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Form **990-PF**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No 1545-0052

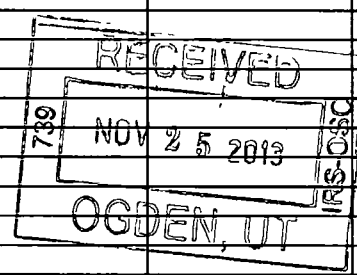
**2012**

Open to Public Inspection

For calendar year 2012 or tax year beginning , and ending

Name of foundation <b>UIC Foundation, Inc</b>		<b>A Employer identification number</b> 92-0157584
Number and street (or P O box number if mail is not delivered to street address) <b>3201 C Street, Suite 801</b>		<b>B Telephone number (see instructions)</b> (907) 852-4460
Room/suite		
City or town, state, and ZIP code <b>Anchorage AK 99503</b>		<b>C If exemption application is pending, check here</b> <input type="checkbox"/>
<b>G Check all that apply</b> <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1. Foreign organizations, check here</b> <input type="checkbox"/> <b>2. Foreign organizations meeting the 85% test, check here and attach computation</b> <input type="checkbox"/>
<b>H Check type of organization</b> <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E If private foundation status was terminated under section 507(b)(1)(A), check here</b> <input type="checkbox"/>
<b>I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$</b> 60,101	<b>J Accounting method</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	<b>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here</b> <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule)	184,547			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5 a Gross rents				
	b Net rental income or (loss)				
	6 a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10 a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 <b>Total.</b> Add lines 1 through 11	184,547	0	0		
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16 a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	81			81
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	81	0	0	81
	25 Contributions, gifts, grants paid	147,920			147,920
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	148,001	0	0	148,001	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	36,546				
b <b>Net investment income</b> (if negative, enter -0-)		0			
c <b>Adjusted net income</b> (if negative, enter -0-)			0		



SCANNED DEC 02 2013

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2012)

HTA



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1	Cash—non-interest-bearing	22,676	60,101	60,101
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10 a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)				
14	Land, buildings, and equipment basis ▶				
	Less accumulated depreciation (attach schedule) ▶				
15	Other assets (describe ▶ )				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	22,676	60,101	60,101	
Liabilities	17	Accounts payable and accrued expenses	77	956	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ )			
	23	<b>Total liabilities</b> (add lines 17 through 22)	77	956	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ <input type="checkbox"/>				
	24	Unrestricted	22,599	59,145	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input type="checkbox"/>				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
29	Retained earnings, accumulated income, endowment, or other funds				
30	<b>Total net assets or fund balances</b> (see instructions)	22,599	59,145		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions)	22,676	60,101		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	22,599
2	Enter amount from Part I, line 27a	2	36,546
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	59,145
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	59,145

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 { If (loss), enter -0- in Part I, line 7		2	0
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}		3	0

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

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2011	115,202	67,829	1.698418
2010	124,915	66,525	1.877715
2009	178,787	65,756	2.718946
2008	211,344	56,643	3.731158
2007	147,450	23,168	6.364382
2 Total of line 1, column (d)			2 16.390619
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 3.278124
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5			4 50,812
5 Multiply line 4 by line 3			5 166,568
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 0
7 Add lines 5 and 6			7 166,568
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions			8 148,001

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1 a</b> Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)			
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	<b>1</b>		
<b>c</b> All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
<b>2</b> Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<b>2</b>		0
<b>3</b> Add lines 1 and 2	<b>3</b>		0
<b>4</b> Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<b>4</b>		
<b>5</b> Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	<b>5</b>		0
<b>6</b> Credits/Payments			
<b>a</b> 2012 estimated tax payments and 2011 overpayment credited to 2012	<b>6a</b>		
<b>b</b> Exempt foreign organizations—tax withheld at source	<b>6b</b>		
<b>c</b> Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>		
<b>d</b> Backup withholding erroneously withheld	<b>6d</b>		
<b>7</b> Total credits and payments Add lines 6a through 6d	<b>7</b>		0
<b>8</b> Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>		
<b>9</b> Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>9</b>		0
<b>10</b> Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>10</b>		0
<b>11</b> Enter the amount of line 10 to be Credited to 2013 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	<b>11</b>		0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1 a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>		X
<b>c</b> Did the foundation file Form 1120-POL for this year?		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>		X
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		X
<b>4 a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b> If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>		X
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	X	
<b>8 a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> AK		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>		X
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>		X

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <a href="http://www.uicalaska.com/family-of-companies/uic-foundation/">http://www.uicalaska.com/family-of-companies/uic-foundation/</a>	X		
14	The books are in care of ▶ Rebecca Brower Telephone no ▶ (907) 852-4460 Located at ▶ PO Box 890, Barrow AK ZIP+4 ▶ 99723			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country ▶		Yes	No
				X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/>	1b	N/A
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here  **5b** X

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No  
If "Yes," attach the statement required by Regulations section 53.4945–5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No  
If "Yes" to 6b, file Form 8870 **6b** X

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No **7b** N/A

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

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Attached Statement 2				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 ▶ 0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
.....		
.....		
.....		
.....		
.....		
<b>Total number of others receiving over \$50,000 for professional services</b>		▶

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See instructions	
3 NONE	
<b>Total. Add lines 1 through 3</b>	▶ 0

**Part X Minimum Investment Return** (All domestic foundations must complete this part Foreign foundations, see instructions )

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances	<b>1b</b>	51,586
<b>c</b>	Fair market value of all other assets (see instructions)	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	51,586
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	51,586
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see instructions)	<b>4</b>	774
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	50,812
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	2,541

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part )

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	2,541
<b>2a</b>	Tax on investment income for 2012 from Part VI, line 5	<b>2a</b>	
<b>b</b>	Income tax for 2012 (This does not include the tax from Part VI )	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1	<b>3</b>	2,541
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	18,800
<b>5</b>	Add lines 3 and 4	<b>5</b>	21,341
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted</b> Subtract line 6 from line 5 Enter here and on Part XIII, line 1	<b>7</b>	21,341

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	<b>1a</b>	148,001
<b>b</b>	Program-related investments—total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	148,001
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	148,001

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
<b>1</b> Distributable amount for 2012 from Part XI, line 7				21,341
<b>2</b> Undistributed income, if any, as of the end of 2012				
<b>a</b> Enter amount for 2011 only			0	
<b>b</b> Total for prior years 20 ____, 20 ____, 20 ____		0		
<b>3</b> Excess distributions carryover, if any, to 2012				
<b>a</b> From 2007	146,292			
<b>b</b> From 2008	192,458			
<b>c</b> From 2009	156,112			
<b>d</b> From 2010	112,166			
<b>e</b> From 2011	112,685			
<b>f</b> Total of lines 3a through e	719,713			
<b>4</b> Qualifying distributions for 2012 from Part XII, line 4 <b>▶</b> \$ 148,001				
<b>a</b> Applied to 2011, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions)				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions)				
<b>d</b> Applied to 2012 distributable amount				21,341
<b>e</b> Remaining amount distributed out of corpus	126,660			
<b>5</b> Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	846,373			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions				
<b>e</b> Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount—see instructions			0	
<b>f</b> Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
<b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	146,292			
<b>9</b> Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	700,081			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2008	192,458			
<b>b</b> Excess from 2009	156,112			
<b>c</b> Excess from 2010	112,166			
<b>d</b> Excess from 2011	112,685			
<b>e</b> Excess from 2012	126,660			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling

▶

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

**2 a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
	(a) 2012	(b) 2011	(c) 2010	
				0
<b>b</b> 85% of line 2a				0
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed				0
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities				0
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c				0
<b>3</b> Complete 3a, b, or c for the alternative test relied upon				
<b>a</b> "Assets" alternative test—enter				
<b>(1)</b> Value of all assets				0
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)				0
<b>b</b> "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				0
<b>c</b> "Support" alternative test—enter				
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				0
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				0
<b>(3)</b> Largest amount of support from an exempt organization				0
<b>(4)</b> Gross investment income				0

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

**1 Information Regarding Foundation Managers:**

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

NONE

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

NONE

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

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

**a** The name, address, and telephone number or e-mail of the person to whom applications should be addressed

Rebecca Brower PO Box 890 Barrow, AK 99723

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

**See Attachment 3**

**c** Any submission deadlines

March 1 Spring Term, May 1 Summer Term, August 1 Fall Term, December 1 Winter Term

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

Scholarships are awarded to UIC Shareholders and their Children

**Part XV Supplementary Information (continued)**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Attachment 4				147,920
<b>Total</b>				▶ 3a 147,920
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b>				▶ 3b 0





# Schedule of Contributors

**2012**

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

Name of the organization

Employer identification number

UIC Foundation, Inc

92-0157584

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

### General Rule

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

### Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II

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

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

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

<b>Name of organization</b> UIC Foundation, Inc	<b>Employer identification number</b> 92-0157584
--	---

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Ukpeagvik Inupiat Corporation 3201 C Street, Suite 801 Anchorage AK 99503 Foreign State or Province _____ Foreign Country _____	\$ 135,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
2	BP America Inc 900 E Benson Blvd Anchorage AK 99508 Foreign State or Province _____ Foreign Country _____	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
-----	----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
-----	----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
-----	----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
-----	----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

FORM 990PF, PART I - OTHER EXPENSES

ATTACHMENT 1

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<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>CHARITABLE PURPOSES</u>
REGISTRATION / MEMBERSHIPS	56	56
BUSINESS LICENSES	25	25
TOTALS	<u>81</u>	<u>81</u>

UIC FOUNDATION, INC

92-0157584

FORM 990PF, PART VIII, Line 1 - COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES, AND FOUNDATION MANAGERS

ATTACHMENT 2

NAME	STREET	CITY	STATE	ZIP CODE	TITLE	AVERAGE HOURS	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS & DEFERRED COMPENSATION	EXPENSE ACCOUNT OTHER ALLOWANCES
JUSTIN THOMAS	3201 C STREET, SUITE 801	ANCHORAGE	AK	99503	DIRECTOR/PRESIDENT	1	0	0	0
DAVID KLOPP	3201 C STREET, SUITE 801	ANCHORAGE	AK	99503	DIRECTOR	1	0	0	0
TOM MARTELLE	3201 C STREET, SUITE 801	ANCHORAGE	AK	99503	DIRECTOR	1	0	0	0
STEVE CRONIC	3201 C STREET, SUITE 801	ANCHORAGE	AK	99503	DIRECTOR	1	0	0	0

ATTACHMENT 2



## UIC Foundation, Inc. Scholarship Application

Personal Information			
Date of Application:			
<input type="checkbox"/> New Applicant <input type="checkbox"/> Renewal	School Term: <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Winter	Year: _____	
<input type="checkbox"/> Full-time (<12 credits) <input type="checkbox"/> Part-time (>12 credits)			
Name :		SSN	
Home Phone:		E-mail address	
Address:			
Shareholder Status			
UIC Shareholder: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Child/Descendent of Shareholder: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Descendent/Parent Name:			
School Information			
Name of School/College: _____			
Address _____ _____			
Acceptance Letter. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Will Send			
Type of training: <input type="checkbox"/> Vocational <input type="checkbox"/> Higher Education (college/university)			
School(s) Previously Attended:			
1. _____			
2. _____			
3. _____			
References (Initial Applicants Only)			
	Reference Name	Address	Phone Number
1			
2			
3			
<b>For Renewal Students</b>			
Past Semester Grades. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Will Send			
<b>REMINDER: Scholarship funding will not be issued until grades have been received.</b>			
Year in College: <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior			
Living arrangements: <input type="checkbox"/> Dorm (on-campus) <input type="checkbox"/> Parents <input type="checkbox"/> Apartment/Rental (off-campus)			



Expenses			
School Expenses for ONE term:		Source of Funds	
Tuition:		Job Savings:	
Fees:		City of Barrow	
Dorm		AEF:	
Food/Meals:		BIA:	
Apt. Rent/Month		Pell Grant:	
Books:		State Loans:	
		Misc/Other:	
Total Expenses:		Total Funds:	
Total Request:			

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Approved Amount: \_\_\_\_\_

Signature (UIC Foundation Administrator): \_\_\_\_\_



## **UIC Foundation, Inc.**

### **Scholarship Program**

P.O. Box 890

Barrow, AK 99723

Phone: (907) 852-4460

Fax: (907) 852-4459

UIC Foundation, Inc. has funding available for the purpose of providing scholarships to qualified students whether they are attending college or vocational school; part-time or full-time. The Foundation will assist in paying for the basic college costs of tuition, fees and books for each term. Every applicant is encouraged to apply for other financial aid for which they may be eligible.

#### **Limitations of the Scholarship Program Funds are as follows:**

- Apartment rent is limited to 30% of agreement not to exceed any tuition of \$1,500 each term and must turn in lease agreement.
- Food allowance is limited to \$150.00/month for full-time students only.
- Room and board is only available for full-time students living away from home.
- Transportation to and from school is not available.

#### **Application deadlines are as follows:**

March 1:	Spring Term
May 1:	Summer Term
August 1:	Fall Term
December 1:	Winter Term

#### **Requirements an applicant must fulfill in order to be considered for a scholarship are:**

1. Must be a UIC shareholder or a descendent of a UIC shareholder.
2. Scholarship application form must be completed and returned by the appropriate deadline.
3. A letter of acceptance from the school you will be attending must be on file (for new students).
4. Complete academic transcripts from high school or the most recent school you have attended must be on file with a GPA of 2.0 or better (for new and renewal students).
5. Three (3) letters of recommendation from counselors, teachers, administrators or present employers must be submitted with the application (for new students).
6. A personal statement detailing your future career plans after completion of college or training must be submitted (for new and renewal students). Include extra-curricular activities and community service activities  
A current resume is required (for new students).
8. Financial need sheet from the school is required (for new and renewal students). This form is
9. Current grade report with renewal application submitted (for renewal students only) within 35 days of above application deadline in order to get renewal scholarship award.

Any questions regarding the UIC Foundation Scholarship Program, call (907) 852-4460.

FORM 990PF, PART XV - SUPPLEMENTARY INFORMATION  
 GRANTS PAID DURING THE YEAR

Last Name	First Name	Relationship to any Foundation		Scholarship Amount
		Manager or Substantial Contributor	Foundation Status	
ABAD	COLLEEN	NONE	NONE	1,900.00
AGIAK	FLORA	NONE	NONE	1,000.00
AHKIVIANA	LINDA	NONE	NONE	1,900.00
AHMAOGAK	VERONICKA	NONE	NONE	900.00
AHSAK	NAOMI	NONE	NONE	1,900.00
AKOOTCHOOK	LUCINDA	NONE	NONE	1,900.00
AKPIK	ALLISON	NONE	NONE	900.00
AKPIK	DANIELLE	NONE	NONE	2,900.00
ANDERSON	GEORGIANN	NONE	NONE	1,900.00
ASHBY	AUDREY	NONE	NONE	1,900.00
BANKSTON	ALISON	NONE	NONE	900.00
BODFISH	THEA	NONE	NONE	1,000.00
BOWERS	JENNIFER	NONE	NONE	1,000.00
BROSTE	SPENCER	NONE	NONE	1,900.00
BROWER	BRITTNEE	NONE	NONE	1,900.00
BROWER	TERZA	NONE	NONE	1,900.00
BROWER	TRINA	NONE	NONE	900.00
BURNS	BRITTANY	NONE	NONE	900.00
CAIN	KRISTINA	NONE	NONE	3,000.00
CAMPBELL	KELSEY	NONE	NONE	1,900.00
CHRISTENSEN	JAMIE	NONE	NONE	1,000.00
CHRISTENSEN	JENNIFER	NONE	NONE	1,000.00
CORWIN	NICHOLE	NONE	NONE	1,000.00
CROSBY	DEANNA	NONE	NONE	1,900.00
DANNER	ERIK	NONE	NONE	900.00
DANNER	LENA	NONE	NONE	900.00
DELIA	LORISSA	NONE	NONE	2,900.00
DIAZ	LIZZIE	NONE	NONE	900.00
DINGMAN	HEATHER	NONE	NONE	1,900.00
DONATH	KRISTA	NONE	NONE	2,900.00
DONOVAN	DOREAN	NONE	NONE	900.00
DURIEZ	MARIE	NONE	NONE	900.00
EDWARDSSEN	DOMINIQUE	NONE	NONE	1,000.00
EDWARDSSEN	MONICA	NONE	NONE	1,900.00
EDWARDSON	ANTON	NONE	NONE	1,900.00
EDWARDSON	SUSAN	NONE	NONE	2,900.00
ERICKSON	KAARE	NONE	NONE	1,000.00
EVANS	NICOLE	NONE	NONE	2,500.00
FERRIS	CARLY	NONE	NONE	900.00
FISCHER	BERNADETTE	NONE	NONE	2,900.00
GREEN	KITTY	NONE	NONE	1,000.00
GUECO	REBEKAH	NONE	NONE	2,900.00
HAVENS	COREY	NONE	NONE	600.00
HOPSON	HEATHER	NONE	NONE	1,900.00
HOPSON	LESLEY	NONE	NONE	350.00
HOPSON	REBECCA	NONE	NONE	2,100.00
HOPSON SUVLU	ABEL	NONE	NONE	1,000.00
IVANOFF	JOYCELYN	NONE	NONE	350.00
BORDEAUX	MICHELLE	NONE	NONE	900.00
JADE	LACI	NONE	NONE	900.00
JUDKINS	TENNESSEE	NONE	NONE	1,900.00
KAHN	SELMA	NONE	NONE	2,900.00
KALEAK	LILLIAN	NONE	NONE	1,000.00

Last Name	First Name	Relationship to any Foundation		Scholarship Amount
		Manager or Substantial Contributor	Foundation Status	
KANAYURAK	JALENE	NONE	NONE	900.00
KANAYURAK	KEIFER	NONE	NONE	1,900.00
KANAYURAK	NICOLE	NONE	NONE	1,900.00
KAYOTUK	FELICIA	NONE	NONE	1,900.00
KELLER	LEILANI	NONE	NONE	600.00
KHAN	ERICA	NONE	NONE	350.00
KIPPI	ASHLI	NONE	NONE	1,900.00
KIPPI	PHOEBE	NONE	NONE	1,000.00
KNOWLES	THADRA	NONE	NONE	1,000.00
LEAVITT	AMBROSIA	NONE	NONE	900.00
LEAVITT	DOREEN	NONE	NONE	2,350.00
LEAVITT	ELLEN	NONE	NONE	1,350.00
LEAVITT	REBECCA	NONE	NONE	1,000.00
LEAVITT	SELENE	NONE	NONE	900.00
LITCHARD	QITUVITUAQ	NONE	NONE	1,900.00
LONG	COLIN	NONE	NONE	900.00
LONG	FLORENCE	NONE	NONE	1,900.00
MATUMEAK	FREDERICA	NONE	NONE	900.00
MCNIEL	RENA	NONE	NONE	2,000.00
MENDEL	JESSICA	NONE	NONE	1,900.00
MENDEL	KYLE	NONE	NONE	1,900.00
MILLER	FRED	NONE	NONE	350.00
MILLER	TAKTUK	NONE	NONE	1,900.00
MILLS	ROBERT	NONE	NONE	900.00
MONGOYAK	CLAUDIA	NONE	NONE	350.00
MURPHREY	MICHAELA	NONE	NONE	350.00
NAGEAK	SALOMI	NONE	NONE	1,000.00
NAY	ISABEL	NONE	NONE	2,900.00
NELSON	NED	NONE	NONE	1,000.00
OKPEAHA	MICHELLE	NONE	NONE	350.00
OYAGAK	BERNICE	NONE	NONE	900.00
PANNINGONA	CLARISSA	NONE	NONE	2,500.00
PATKOTAK	ABRA	NONE	NONE	1,000.00
PATKOTAK	JAIME	NONE	NONE	350.00
RABADJIYSKY	ANGELIE	NONE	NONE	900.00
REILLY	RONNIE	NONE	NONE	1,600.00
REXFORD	ANNIE	NONE	NONE	600.00
REXFORD	MARIANNE	NONE	NONE	1,500.00
REXFORD-BROWN	WILLIAM	NONE	NONE	600.00
RICHARDS	TARA	NONE	NONE	900.00
ROMERO	CRYSTAL	NONE	NONE	350.00
ROSEBERRY	KATIE	NONE	NONE	1,900.00
ROSEBERRY	MARK	NONE	NONE	900.00
RUSSELL	ALBERT	NONE	NONE	1,000.00
SAKEAGAK	DARLENE	NONE	NONE	3,800.00
SANCHEZ	JOSE	NONE	NONE	900.00
SARREN	MYRNA	NONE	NONE	1,270.00
SIELAK	GEORGIANNA	NONE	NONE	2,900.00
SIMMONDS	DANIELLE	NONE	NONE	1,900.00
STANDIFER	AURORA	NONE	NONE	900.00
STEVER	JENNIFER	NONE	NONE	900.00
STEWART	VINCE	NONE	NONE	1,000.00
STRUTZ	JOSHUA	NONE	NONE	1,900.00
SUVLU	CAROL	NONE	NONE	1,000.00
THOMPSON	JENE	NONE	NONE	1,000.00
TOMRIDDLE	HEIDI	NONE	NONE	350.00

Last Name	First Name	Relationship to any Foundation		Scholarship Amount
		Manager or Substantial Contributor	Foundation Status	
TUCKFIELD	ERIC	NONE	NONE	900.00
TUCKFIELD	JOSIE	NONE	NONE	1,900.00
TURNER	KATELYN	NONE	NONE	1,900.00
TURNER	SAMUEL	NONE	NONE	600.00
UNUTOA	JOANN	NONE	NONE	350.00
VENT	MILISSA	NONE	NONE	900.00
WEBER	KAITLANN	NONE	NONE	900.00
WEBER	WHITNEY	NONE	NONE	1,900.00
WILLIAMS	SERENA	NONE	NONE	1,000.00
WOLGEMUTH	BRIDGET	NONE	NONE	900.00
WONG	STEPHANIE	NONE	NONE	1,900.00

166,720 00

REFUNDED SCHOLARSHIPS

(18,800 00)

TOTAL GRANTS PAID DURING THE YEAR

147,920.00

**Application for Extension of Time To File an Exempt Organization Return**

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box  X
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*

**Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).**

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions.		Enter filer's identifying number, see instructions	
	UIC Foundation, Inc.		Employer identification number (EIN) or 92-0157584	
	Number, street, and room or suite no. If a P O box, see instructions		Social security number (SSN)	
	3201 C Street, Suite 801			
City, town or post office, state, and ZIP code For a foreign address, see instructions.		AK 99503		
Anchorage				

Enter the Return code for the return that this application is for (file a separate application for each return)  04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ► Justin Thomas

Telephone No ► (907) 677-5230 FAX No ► (907) 677-5280

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15/2013 to file the exempt organization return for the organization named above. The extension is for the organization's return for:

►  calendar year 2012 or

►  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

2 If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	none
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	none
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	3c	\$	0

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.  
 For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form **8868** (Rev 1-2013)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box  **X**. **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization UIC Foundation, Inc.	Employer identification number (EIN) or 92-0157584
	Number, street, and room or suite no. If a P O. box, see instructions 3201 C Street, Suite 801	Social security number (SSN)
File by the due date for filing your return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions Anchorage AK 99503	

Enter the Return code for the return that this application is for (file a separate application for each return)  01  02  03  04  05  06  04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of  Rebecca Brower  
Telephone No.  (907) 852-7429 FAX No.  (907) 852-4459
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until 11/15/2013
- For calendar year 2012, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_
- If the tax year entered in line 5 is for less than 12 months, check reason.  Initial return  Final return  
 Change in accounting period
- State in detail why you need the extension Information necessary to prepare a complete and accurate return is not yet available

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	<b>8a</b>	\$	0
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	\$	0
<b>c</b> <b>Balance due.</b> Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	<b>8c</b>	\$	0

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature Justin Thomas Title President Date 8/6/13