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Form **990-PF**

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

2012

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

| For ca | endar year 2012, or tax year beginning | , 2012 | , and ending | , | |
|-------------------|---|--|----------------------------------|---|--|
| 420 | on Sound Fund L Street #310 orage, AK 99501 | | E | 92-0166389 | |
| G Ch | eck all that apply Initial return | Initial return of a form | ner public charity | If exemption application is 1 Foreign organizations, check | |
| H C | Address change Address change X Section 50 | Name change I(c)(3) exempt private f | oundation | 2 Foreign organizations mee here and attach computation | ting the 85% test, check |
| I F | Section 4947(a)(1) nonexempt charitable t | rust Other taxable | orivate foundation ash X Accrual | If private foundation status under section 507(b)(1)(A) | |
| | from Part II, column (c), line 16) | Other (specify) column (d) must be or | _F | If the foundation is in a 60 under section 507(b)(1)(B) | -month termination), check here |
| Part | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 Contributions, gifts, grants, etc, received (att sch) | 175,000. | | | ı |
| | 2 Ck Interest on savings and temporary cash investments. 1 c c c c c c c c c c c c c c c c c c | 237. | 237 | . 237. | , |
| | 4 Dividends and interest from securities 5 a Gross rents | | | | |
| | b Net rental income or (loss) 6 a Net gain/(loss) from sale of assets not on line 10 | | | | |
| R E V | b Gross sales price for all assets on line 6a | | | | |
| E N | 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain | | | | <u>'</u> |
| E | 9 Income modifications 10 a Gross sales less returns and allowances | | | | |
| | b Less Cost of goods sold | | | | |
| | c Gross profit/(loss) (att sch) 11 Other income (attach schedule) | | | | |
| | 12 Total. Add lines 1 through 11 | 175,237. | 237 | . 237. | |
| | 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages | 0. | | | |
| | 15 Pension plans, employee benefits | | | | |
| A D | 16a Legal fees (attach schedule) b Accounting fees (attach sch) | | | | _ |
| M I N | c Other-prof-fees (attach-sch) | _ | | | |
| O I | 17 Interest RECEIVED | | | | |
| E Ť R R A T | 18 Taxis (attent streamle) See St.m. 1 19 Depreciation (attach script and depletion 3 2013 3 20 Occupancy | 17. | | | |
| 1 1 | 19 Depreciation (attach schematic s | | | | - |
| N V G E | 21 Travel—conferences—and meetings! | | | | |
| A E X D P E | 22 Pfinting and publications 17 23 Other expenses (attach schedule) | | | | |
| E N S E | 24 Total operating and administrative | 12 | | - | |
| S | expenses. Add lines 13 through 23 Contributions, gifts, grants paid Part XV | 17. 160,000. | | | 160,000. |
| | 26 Total expenses and disbursements. Add lines 24 and 25 | 160,017. | 0 | . 0. | 160,000. |
| | 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements | | | | , |
| | b Net investment income (if negative, enter -0-) | 15,220. | 237 | | |
| | C Adjusted net income (if negative, enter -0-) | | | 237. | |

| | 16 | Total assets (to be completed by all filers — see the instructions Also, see page 1, item l) | | 1,159,924. | 1,175,1 | 44. | 1,175,144. |
|-------------------|---------------|--|------|-----------------------------|---------|-----|------------|
| ŗ | 17 | Accounts payable and accrued expenses | | | | | |
| Å | 18 | Grants payable | | | | | |
| В | 19 | Deferred revenue | | | | | |
| ŀ | 20 | Loans from officers, directors, trustees, & other disqualified persons | | | | | |
| ĭ | 21 | Mortgages and other notes payable (attach schedule) | | | | | |
| Ţ | 22 | Other liabilities (describe ► |) | | | | |
| ES | 23 | Total liabilities (add lines 17 through 22) | _ ` | 0. | | 0. | |
| | | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. | П | | | | |
| NF | 24 | Unrestricted | | | | | |
| N F E U T N | 25 | Temporarily restricted | | | | | |
| ח | 26 | Permanently restricted | į | | | | |
| A B S A E L | | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. | X | | | | |
| ĔĹ | 27 | Capital stock, trust principal, or current funds | | | | | |
| SN | 28 | Paid-in or capital surplus, or land, building, and equipment fund | | | | | |
| O E R S | 29 | Retained earnings, accumulated income, endowment, or other funds | | 1,159,924. | 1,175,1 | 44. | |
| RS | 30 | Total net assets or fund balances (see instructions) | | 1,159,924. | 1,175,1 | 44. | |
| | 31 | Total liabilities and net assets/fund balances (see instructions) | | 1,159,924. | 1,175,1 | 44. | |
| Part | | Analysis of Changes in Net Assets or Fund Bala | ınc | es | | | |
| 1 | Total end- | net assets or fund balances at beginning of year — Part II, of-year figure reported on prior year's return). | colu | umn (a), line 30 (must agre | ee with | 1 | 1,159,924. |

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

(attach schedule)

Other assets (describe >

2 Enter amount from Part I, line 27a

Decreases not included in line 2 (itemize).

Add lines 1, 2, and 3

Other increases not included in line 2 (itemize).

3 4

5

6

15,220.

1,175,144.

1,175,144.

| (a) List and describe 2-story brick warehous | How acquired — Purchase — Donation | (C) Date acquired (month, day, year) | (d) Date sold (month, day, year) | | |
|---|--|---|-------------------------------------|--|----------------------|
| 1a N/A | | | | · · · · · · · · · · · · · · · · · | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (e) plus (f) m | |
| а | | | | ·· | |
| b | | | | | |
| <u> </u> | | | | | |
| d | | | | | |
| Complete only for accets show | ving gain in column (h) and owned by | the foundation on 12/31/60 | | 9 40.1 | 4.3 |
| (i) Fair Market Value as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of column (i) over column (j), if any | | (1) Gains (Col jain minus column (F an -0-) or Losses (fi | (), but not less |
| | | | | | |
| b | | | | | |
| c | | | | | |
| d | | • | | • | |
| e | | | | | |
| 2 Capital gain net income or (ne | et capital loss) If gain, also enter | enter in Part I, line 7 er -0- in Part I, line 7 | 2 | | |
| 3 Net short-term capital gain or | (loss) as defined in sections 1222(5) a | and (6). | | | |
| If gain, also enter in Part I, lin in Part I, line 8 | e 8, column (c) (see instructions) If (l | oss), enter -0- | 3 | | |
| • | r Section 4940(e) for Reduced | Tax on Net Investment | | | |
| If 'Yes,' the foundation does not qua | ction 4942 tax on the distributable amounting under section 4940(e). Do not comin each column for each year, see the | plete this part | | Yes | X No |
| (a) Base period years Calendar year (or tax year | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | | (d) Distribution umn (b) divided | |
| beğinning in) | | Tiorionamable about | (00. | | |
| 2011 | 44,200. | 1,061,6 | | | 0.041634 |
| 2010 | 15,000. | 974,8 | | | 0.015386 |
| 2009 2008 | 79,991. | 942,3 844,2 | | | 0.084887 0.026059 |
| 2007 | 22,000. 39,731. | 708,0 | | | 0.056113 |
| 2007 | 33, 131. | 700,0 | ,33. | T | 0.030113 |
| 2 Total of line 1, column (d) | | | 2 | | 0.224079 |
| 3 Average distribution ratio for t number of years the foundatio | he 5-year base period – divide the tot n has been in existence if less than 5 | al on line 2 by 5, or by the years | 3 | | 0.044816 |
| 4 Enter the net value of nonchar | ritable-use assets for 2012 from Part X | C. line 5 | 4 | | 1,143,771. |
| 5 Multiply line 4 by line 3 | | ,, | 5 | | |
| | | | | | 51,259. |
| 6 Enter 1% of net investment in | come (1% of Part I, line 27b) | | 6 | | 2. |
| 7 Add lines 5 and 6 | | | 7 | | 51,261. |
| 8 Enter qualifying distributions f | • | | 8 | | 160,000. |
| If line 8 is equal to or greater | than line 7, check the box in Part VI, l | ine 1b, and complete that part | using a 19 | % tax rate See t | he |

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| Form | | 2-0166389 | | F | age 4 |
|----------|--|------------------|-----------------|--|--------------|
| | | see instruction | ns) | | |
| ıa | Exempt operating foundations described in section 4940(d)(2), check here | | | | |
| h | Date of ruling or determination letter: (attach copy of letter if necessary – see instrs) Domestic foundations that meet the section 4940(e) requirements in Part V, | | | | _ |
| U | check here X and enter 1% of Part I, line 27b | 1 | | | 2. |
| _ | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b) | | | | |
| | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | 2 | | | 0. |
| 3 | Add lines 1 and 2 | 3 | | | 2. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0- | <u> </u> | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | 5 | | | 2. |
| 6 | Credits/Payments. | | | | |
| а | 2012 estimated tax pmts and 2011 overpayment credited to 2012 | | | | |
| b | Exempt foreign organizations — tax withheld at source 6b | | | | |
| С | Tax paid with application for extension of time to file (Form 8868) 6c | - | | | |
| d | Backup withholding erroneously withheld 6 d | <u> </u> | | | |
| 7 | Total credits and payments Add lines 6a through 6d | 7 | | | 0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached | 8 | | | |
| 9 | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | ▶ 9 | | | 2. |
| 10 | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | ▶ 10 | | | |
| 11 | Enter the amount of line 10 to be Credited to 2013 estimated tax | ► 11 | | | |
| Par | t VII-A Statements Regarding Activities | | | | |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did in participate or intervene in any political campaign? | t | 1 a | Yes | No X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | | 1 b | | х |
| | 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 | | | | |
| С | Did the foundation file Form 1120-POL for this year? | | 1 c | - | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | ··• | ļ | _ ^ <u>^</u> |
| | (1) On the foundation >\$ 0. (2) On foundation managers. >\$ | 0. | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers | | | | |
| 2 | foundation managers | | 2 | | |
| _ | If 'Yes,' attach a detailed description of the activities | | | | X |
| _ | • | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes | ; | 3 | | X |
| 4 a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | 4 a | | X |
| b | If 'Yes,' has it filed a tax return on Form 990-T for this year? | | 4 b | | /A |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | | X |
| | If 'Yes,' attach the statement required by General Instruction T | | - | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | 1 | | |
| | By language in the governing instrument, or | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict | :t | | | |
| | with the state law remain in the governing instrument? | - | 6 | Х | |
| | Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV | | 7 | Х | |
| 8 a | Enter the states to which the foundation reports or with which it is registered (see instructions) AK | - | | | |
| b | If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation | | 8ь | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3 for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' com | s) or 4942(j)(5) | | <u> </u> | - : |
| | | | 9 | | X |
| | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name and addresses | | 10 | <u> </u> | X |
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3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

| enterprise at any time during the year? | Yes | X No |
|---|------------|------|
| b If 'Yes,' did it have excess business holdings in 2012 as a result of (1) any purchase by the foundar or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period appropriate Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, (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.) | oved or | |

4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

| 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? |

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3 b

4 a

N/A

Х

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|--|---|---|--|--|--------------------------|
| Part VII-B Statements Regarding Activiti | | 4720 May Be Req | uired (continued) | | |
| 5 a During the year did the foundation pay or incu | | 40454.00 | п., п | | |
| (1) Carry on propaganda, or otherwise attempt | J | | ∐ Yes X | No | |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra | ition drive? | | | No | |
| (3) Provide a grant to an individual for travel, | ∐ Yes X | No | | | |
| (4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section | nan a charitable, etc, or 4940(d)(2)? (see instru | ganization described ictions) | Yes X | No | |
| (5) Provide for any purpose other than religio educational purposes, or for the preventio | | | Yes X | No | |
| b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)? | the transactions fail to a current notice regard | qualify under the excep ding disaster assistance | tions | 5 b | N/A |
| Organizations relying on a current notice rega | rding disaster assistant | e check here | ▶ 📗 | | |
| c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response. | sibility for the grant? | | N/A Yes | No | |
| If 'Yes,' attach the statement required by Regi | | . , | | | |
| 6 a Did the foundation, during the year, receive are on a personal benefit contract? b Did the foundation, during the year, pay premise. | | | ∐ Yes X | No 6 b | x |
| If 'Yes' to 6b, file Form 8870 | arris, arrectly or marrec | try, on a personal bene | in contract | | ^ |
| 7 a At any time during the tax year, was the found | dation a party to a proh | ibited tax shelter transa | action? Yes X | No | |
| b If 'Yes,' did the foundation receive any procee | · - | | | 1/A 7b | |
| Part VIII Information About Officers, D | rectors, Trustees, | Foundation Manag | gers, Highly Paid E | mployees | s, |
| and Contractors | | | | | |
| 1 List all officers, directors, trustees, foundation | T.:. | | T | | |
| (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 | | se account, llowances |
| Kyan Olanna | Secretary | 0. | 0. | | 0 |
| _420_L_Street,_Suite_310 _Anchorage, AK 99501 | 0.25 | | _ | | |
| Simon Kinneen | President | 0. | 0. | | 0 |
| 420 L Street, Suite 310 | 0.25 | | | | |
| Anchorage, AK 99501 | | · <u>:</u> | | | |
| Richard Tremaine | Treasurer | 0. | 0. | | 0 |
| 420 L Street, Suite 310 | 0.25 | ii | | | |
| Anchorage, AK 99501 | · · · - | | | | |
| | | | : | | |
| | | | | <u> </u> | |
| 2 Compensation of five highest-paid employees (of | | | | | |
| (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) Expens other a | se account, llowances |
| None | | | | | |
| | | | | | |
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| | | <u> </u> | | | <u> </u> |
| | | | | | |
| Table and all all all all all all all all all al | | | | <u> </u> | |
| Total number of other employees paid over \$50,000 BAA | 1 TEEA0306L 1 | 2/25/12 | | 1 |) I- PF (2012) |

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|--|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, and Contractors (continued) | Highly Paid Employees, |
| 3 Five highest-paid independent contractors for professional services (see instructions). If none, e | enter 'NONE.' |
| (a) Name and address of each person paid more than \$50,000 (b) Type of s | service (c) Compensation |
| None | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Total number of others receiving over \$50,000 for professional services | ▶ 0 |
| 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 nu organizations and other beneficiaries served, conferences convened, research papers produced, etc | umber of Expenses |
| 1 <u>N/A</u> | |
| | |
| 2 | |
| | |
| 3 | |
| | |
| <u> </u> | |
| 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 | d 2 Amount |
| 1 | |
| | |
| 2 | |
| | |
| All other program-related investments See instructions | |
| ³ | |
| | |
| Total. Add lines 1 through 3 | 0. |
| BAA | Form 990-PF (2012) |

| see instructions.) | Foreign 1 | oundations, |
|---|--------------|--------------------|
| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities | 1 a | |
| b Average of monthly cash balances | 1 b | 1,161,189. |
| c Fair market value of all other assets (see instructions) | 1 c | |
| d Total (add lines 1a, b, and c) | 1 d | 1,161,189. |
| e Reduction claimed for blockage or other factors reported on lines 1a and 1c | | |
| (attach detailed explanation) | 0. | |
| 2 Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 Subtract line 2 from line 1d | 3 | 1,161,189. |
| 4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | 17,418. |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 1,143,771. |
| 6 Minimum investment return. Enter 5% of line 5 | 6 | 57,189. |
| Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private op and certain foreign organizations check here ► ☐ and do not complete this part | | undations |
| 1 Minimum investment return from Part X, line 6 | 1 | 57,189. |
| 2 a Tax on investment income for 2012 from Part VI, line 5 | 2. | |
| b Income tax for 2012 (This does not include the tax from Part VI) | | |
| c Add lines 2a and 2b | 2 c | 2. |
| 3 Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 57,187. |
| 4 Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 Add lines 3 and 4 | 5 | 57,187. |
| 6 Deduction from distributable amount (see instructions) | 6 | |
| 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 | 7 | 57,187. |
| Part XII Qualifying Distributions (see Instructions) | | |
| 1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 | 1a | 160,000. |
| b Program-related investments — total from Part IX-B | 1 b | • |
| 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes | 2 | |
| 3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) | 3 a | |
| b Cash distribution test (attach the required schedule) | 3 b | |
| 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 160,000. |
| 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) | 5 | 2. |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 159,998. |
| Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years | e foundation | |
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Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
|---|---------------|----------------------------|--------------------|--------------------|
| Distributable amount for 2012 from Part XI, line 7 | | | | 57,187. |
| 2 Undistributed income, if any, as of the end of 2012: | | | | 37,107. |
| a Enter amount for 2011 only | | | 51,351. | |
| b Total for prior years 20 , 20 , 20 | | 0. | | |
| 3 Excess distributions carryover, if any, to 2012. | | | | |
| a From 2007 | | | | |
| b From 2008 | | | | |
| c From 2009 | | | | |
| d From 2010 | | | | |
| e From 2011 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2012 from Part | | | | |
| XII, line 4 • \$ 160,000. | | | | |
| a Applied to 2011, but not more than line 2a | | | 51,351. | |
| Applied to undistributed income of prior years (Election required — see instructions) | | 0. | | |
| c Treated as distributions out of corpus (Election required — see instructions) | 0. | | | |
| d Applied to 2012 distributable amount | | | | 57,187. |
| e Remaining amount distributed out of corpus | 51,462. | | | 37,107. |
| 5 Excess distributions carryover applied to 2012. | 0. | | | 0. |
| (If an amount appears in column (d), the | | | | |
| same amount must be shown in column (a)) | : | | | |
| 6 Enter the net total of each column as | | | | |
| indicated below: | _ | | | |
| a Corpus. Add lines 3f, 4c, and 4e Subtract line 5 | 51,462. | | | |
| b Prior years' undistributed income Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistribut- | | 0. | | |
| ed income for which a notice of deficiency | | | 1 | |
| has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | 1 | |
| d Subtract line 6c from line 6b Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2011. Subtract line 4a from | | | | |
| line 2a Taxable amount — see instructions | | | 0. | |
| f Undistributed income for 2012 Subtract lines | | | | |
| 4d and 5 from line 1. This amount must be | | | | |
| distributed in 2013 | | | | 0. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed | | | | |
| by section 170(b)(1)(F) or 4942(g)(3) | | | | |
| (see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) | 0. | | | |
| 9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a | 51,462. | | | |
| 10 Analysis of line 9. | 52, 102. | | | |
| a Excess from 2008 | | | | |
| b Excess from 2009 | 1 | | | |
| c Excess from 2010 | | | | |
| d Excess from 2011 | | | | |
| e Excess from 2012 51, 462. | | | | |

| Form 990-PF (2012) Norton Sound Fund | | | | 92-016638 | |
|---|-----------------------|------------------------|--------------------------|-----------------------|---------------------------|
| Part XIV Private Operating Foundat | | | · • | | N/A |
| 1 a If the foundation has received a ruling or determined is effective for 2012, enter the date of the | ruling | | - | | |
| b Check box to indicate whether the foundate | | erating foundation | | 4942(j)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | 4 > 0011 | Prior 3 years | L 4 10 0000 | 4 |
| investment return from Part X for each year listed | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | (e) Total |
| b 85% of line 2a . | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a 'Assets' alternative test — enter | | | | | |
| (1) Value of all assets(2) Value of assets qualifying under | | | | | |
| section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of | | | | | |
| minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test – enter | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | <u> </u> | | | |
| Part XV Supplementary Information assets at any time during th | (Complete this | s part only if the | e foundation had | \$5,000 or mor€ | e in |
| 1 Information Regarding Foundation Management | | 13(140(10113.) | | | |
| a List any managers of the foundation who hav | e contributed more t | han 2% of the total | contributions received | by the foundation be | fore the |
| close of any tax year (but only if they have None | e contributed more | than \$5,000) (Se | e section 507(d)(2)) | | |
| b List any managers of the foundation who own | 10% or more of the | stock of a corporat | ion (or an equally large | e portion of the owne | rship of |
| a partnership or other entity) of which the None | foundation has a | 10% or greater inte | erest | | |
| | | | | | |
| 2 Information Regarding Contribution, Gran | | | | | |
| Check here I if the foundation only ma requests for funds. If the foundation make | | | _ | | |
| complete items 2a, b, c, and d | s girts, grants, etc | (see instructions) | to individuals of orga | inizations under oth | er conditions, |
| a The name, address, and telephone number o | r e-mail of the perso | on to whom applicati | ions should be address | ed | |
| See Statement 2 | | | | | |
| b The form in which applications should be | submitted and info | rmation and mater | ials they should inclu | de | |
| See Statement for Line 2a | | | | | |
| c Any submission deadlines | | | | | |
| · | | | | | |
| See Statement for Line 2a d Any restrictions or limitations on awards, | such as by geograp | phical areas charit | table fields, kinds of i | nstitutions or other | r factors: |
| • | ocon as by geogra | priidur areas, Gridiil | idale nelus, nilius Ul I | nontanona, or other | iactors. |
| See Statement for Line 2a | | EA03101 10/03/10 | | - - | Form 990 BF (2012) |
| UAA . | п | EEA0310L 12/23/12 | | Į. | Form 990-PF (2012) |

Part XV Supplementary Information (continued)

| 3 Grants and Contributions Paid During the Ye | ar or Approved for Fut | ure Paymen | τ | |
|---|--|----------------------|----------------------------------|----------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | substantial contributor | recipient | Contribution | |
| a Paid during the year | | | | |
| Northwestern Alaska Career & | | | Fishing Industry | 160,000. |
| Tech Ctr | | | Training | 100,000. |
| | | | Training | |
| PO Box 131 | | | | |
| Nome, AK 99762 | | | | |
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| | | | | |
| Total | | | ► 3a | 160,000. |
| b Approved for future payment | 1 | | | 100,000. |
| b ipproved for fatare payment | | | | |
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| | | | | |
| Total | | _ | ► 3b | |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated | Unrelated | business income | Excluded by | section 512, 513, or 514 | (e) | |
|--|-------------------------|----------------------|-------------------------------|--------------------------|--|--|
| Program service revenue | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | Related or exempt function income (See instructions) | |
| a | | | | | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| e | | | | | | |
| f | | | | | | |
| g Fees and contracts from government agencies | | | | | | |
| 2 Membership dues and assessments | | | | | | |
| 3 Interest on savings and temporary cash investments | | | 14 | 237. | | |
| 4 Dividends and interest from securities | | | | | | |
| 5 Net rental income or (loss) from real estate | | | | | | |
| a Debt-financed property | | | | | | |
| b Not debt-financed property | | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | | |
| 7 Other investment income | | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | | |
| 9 Net income or (loss) from special events. | | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | | |
| 11 Other revenue | | | | | | |
| a | | - | | | | |
| b | 1 | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | | | 237. | | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 237. | |
| (See worksheet in line 13 instructions to verify calculate | ons) | | | | | |

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) |
|---------------|---|
| N/A | |
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X

Form 990-PF (2012) Norton Sound Fund 92-0166389 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| described | | ectly engage in any of the following words (other than section 501(c)(3) orga | | | Yes | No |
|--|--|--|--|--------------------------------------|----------|-------|
| a Transfers | s from the reporting foundat | ion to a noncharitable exempt organiz | zation of | | | |
| (1) Cash | | | | 1 a (1) | | X |
| (2) Othe | r assets | | | 1 a (2) | | X |
| b Other tra | insactions | | | | | |
| (1) Sales | s of assets to a noncharitab | le exempt organization | | 1 b (1) | | X |
| (2) Purc | hases of assets from a none | charitable exempt organization | | 1 b (2) | | X |
| • • • | al of facilities, equipment, o | . • | | 1 b (3) | | X |
| • • • | bursement arrangements | | | 1 b (4) | | X |
| • • • | s or loan guarantees | | | 1 b (5) | - | X |
| • • | <u> </u> | bership or fundraising solicitations | | 1 b (6) | - | X |
| | | ling lists, other assets, or paid employ | vees. | 1 c | | X |
| • • • • • • • • • • • • • • • • • • • | | ge, ee. eeeete, e. peie ep.e. | , 555 | ., | | |
| d If the and the goods any trans | swer to any of the above is so, other assets, or services give saction or sharing arrangem | 'Yes,' complete the following scheduli en by the reporting foundation. If the fou ent, show in column (d) the value of t | e Column (b) should always show the indation received less than fair market vathe goods, other assets, or services re | fair market vali lue in ceived | ue of | |
| | | Name of noncharitable exempt organization | (d) Description of transfers, transactions | | gements | |
| N/A | ., | , | , , , , , | | | |
| 1,722 | | | | | | |
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| describe | indation directly or indirectly a d in section 501(c) of the Co complete the following schei | ffiliated with, or related to, one or more to ode (other than section 501(c)(3)) or i | ax-exempt organizations n section 527? | XYes | | No |
| | * | (b) Type of organization | n (a) Description | of relationship | | |
| • • | Name of organization | 1,7,5, | ,,, | | | |
| Norton Sc | ound Economic Dev | 501 (c) 4 | <u>In-kind administra</u> | tive suppo | rt | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Lindar no | analtice of parting I declare that I have | to examined this return including assemblying s | chedules and statements, and to the best of my kno | wiledge and belief it | ic truo | |
| Sign correct, | and complete Declaration of prepare | r (other than taxpayer) is based on all information | of which preparer has any knowledge | May the this retur | RS disc | ne |
| Here Signat | ture of officer or trustee | <u>unna //-5-/_</u> Date | 3 Secretary | preparer (see inst | uctions) | No No |
| | Print/Type preparer's name | Preparer signature | Date Check | If PTIN | | |
| Daid | TOM J DOMAGALA CF | | 7/10 1 17 | ∟ | 688 | |
| Paid | Firm's name Altman | | <u> </u> | 2-0143182 | .000 | |
| Preparer | | Street, Suite 500 | Film S Eliv 3 | 7 014210Z | | |
| Jse Only | | | Dhana na | (007) 274 | 2002 | |
| | Anchor | aye, An 33301 | Phone no | (907) 274- | | |
| AAC | | | | Form 99 0 | J-Pr (2 | U12) |

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2012

| Name of the organization | | Employer identification number |
|--|---|--|
| Norton Sound Fund | | 92-0166389 |
| Organization type (check one) | | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organizat | tion |
| | 4947(a)(1) nonexempt charitable trust no | ot treated as a private foundation |
| | 527 political organization | |
| | GE7 pointed organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust tro | eated as a private foundation |
| | 501(c)(3) taxable private foundation | |
| | | |
| Check if your organization is covered b | v the General Rule or a Special Rule | |
| | • | al Dula and a Casaral Dula Cas matrustrans |
| Note. Only a section 501(c)(7), (8), or (| (10) organization can check boxes for both the Genera | ai Rule and a Special Rule See Instructions |
| General Rule | | |
| X For an organization filing Form 990, 9 contributor (Complete Parts I and I | 90-EZ, or 990-PF that received, during the year, \$5,000 o | r more (in money or property) from any one |
| communication (complete rans rand t | • • | |
| Special Rules | | |
| <u></u> | (I | and the last the consideration and an analysis |
| $509(a)(1)$ and $170(b)(1)(A)(v_1)$ and | n filing Form 990 or 990-EZ that met the 33-1/3% suppreceived from any one contributor, during the year, a 90, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Com | contribution of the greater of (1) \$5,000 or |
| For a section 501(c)(7), (8), or (10) or | ganization filing Form 990 or 990-EZ that received from a | ny one contributor, during the year, |
| | 000 for use exclusively for religious, charitable, scien or animals. Complete Parts I, II, and III | tific, literary, or educational purposes, or |
| | ganization filing Form 990 or 990-EZ that received from a | any one contributor, during the year |
| contributions for use <i>exclusively</i> for re | ligious, charitable, etc, purposes, but these contributions | did not total to more than \$1,000 |
| If this box is checked, enter here the to purpose. Do not complete any of the r | otal contributions that were received during the year for a parts unless the General Rule applies to this organization | n <i>exclusively</i> religious, charitable, etc, because it received nonexclusively |
| | ons of \$5,000 or more during the year | ► \$ |
| Court on An arrangement of the transfer of the the | - C Dula and/or the Consul Dulas does not file Schodule D. Fo | 000 000 E7 as 000 PD but it must |
| answer 'No' on Part IV, line 2, of its Form 990, | e General Rule and/or the Special Rules does not file Schedule B (Fo or check the box on line H of its Form 990-EZ or on Part I, line 3 | 2, of its Form 990-PF, to certify that it does not |
| meet the filing requirements of Schedu | le B (Form 990, 990-EZ, or 990-PF). | · |
| | otice, see the Instructions for Form 990, 990EZ, | Schedule B (Form 990, 990-EZ, or 990-PF) (2012) |
| or 990-PF. | | |

| | B (Form 990, 990-EZ, or 990-PF) (2012) | Page | 1 of 1 of Part 1 |
|---------------|--|-------------------------------|--|
| Name of org | anization Sound Fund | 1 ' - | er identification number 166389 |
| | Contributors (see instructions) Use duplicate copies of Part I if additional space is needed | 1 | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | Glacier Fish Company, LLC 1200 Westlake Ave N, Suite 900 Seattle, WA 98109 | \$175,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ - - | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ - | Person Payroli Noncash Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ - - | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - - \$ | Person Payroll Complete Part II if there is a noncash contribution Part II if there is a noncash contribution Part II if there is a noncash contribution Payroll Payro |
| ВАА | TFFA07021 11/30/12 | Schedule R (Form 9 | 90. 990.EZ or 990.PE) (2012) |

Page

1 to

of Part II

Name of organization

Employer identification number

Norton Sound Fund

92-0166389

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| | N/A | | |
| | | \$\$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$\$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$\$ | |

| • | , | | | | | | |
|---------------------------|---|--|-----------------|---------------|-----------------------|---------------------------------------|--|
| Schedule B | (Form 990, 990-EZ, or 990-PF) (2012) | | | Page | 1 to | 1 of Part III | |
| Name of organ | ization | | | | | ntification number | |
| | Sound Fund | | | | 92-0166 | | |
| Part III | Exclusively religious, charitable, et | tc, individual contribution | ns to sectio | n 501(c) | (7), (8) or (1 | 10) | |
| | organizations that total more than | | | through (e) | and the following | ng line entry. | |
| | For organizations completing Part III, enter contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional | (Enter this information once S | ee instructions | 5) | ► \$ | N/A | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | Desc | (d) cription of ho | w gift is held | |
| | N/A | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | _ | | | |
| | Transferee's name, addres | (e) Transfer of gift ss, and ZIP + 4 | Relat | ionship of | transferor to | transferee | |
| | | | | | | | |
| | | | | | | | |
| | | - | | | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | Desc | (d) cription of ho | w gift is held | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | (e) Transfer of gift | | | | | |
| | Transferee's name, addres | Relat | ionship of | transferor to | transferee | | |
| | | | • | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | · · · · · · · · · · · · · · · · · · · | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | Desc | (d) cription of ho | w gift is held | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | (e) Transfer of gift | | | | | | |
| | | | | | | | |
| | Transferee's name, addres | Relat | ionship of | transferor to | transferee | | |
| | | | | | | | |
| | | <u></u> | | | | | |
| | | | | | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | Desc | (d) cription of ho | w gift is held | |

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

| 2 | n | 1 | 2 |
|---|---|---|---|
| | u | | _ |

Federal Statements

Page 1

Norton Sound Fund

92-0166389

Statement 1 Form 990-PF, Part I, Line 18 Taxes

Federal Income Tax State Income Tax

| | (a) Expens per Bo | | (b) Net Investme Income | nt | (c) Adjusted Net Income | (d) Charitable <u>Purposes</u> | ; |
|-------|-------------------------|-----------|-------------------------------|----|-------------------------------|--------------------------------------|-----------|
| | \$ | 11. 6. | | | | | |
| Total | \$ | 17. | \$ | 0. | \$ 0. | \$ | <u>0.</u> |

Statement 2 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

Care Of:

Street Address:

City, State, Zip Code:

Telephone:

E-Mail Address: Form and Content: `

Submission Deadlines:

Restrictions on Awards:

Fishing Industry Training

Simon Kinneen Norton Sound Fund

420 L Street, Suite 310 Anchorage, AK 99501 907-274-2248

Not Applicable

None

Norton Sound Fund utilizes contributions and other resources to provide training, business administration,

form loans and grants, construct or improve transportation facilities, and award grants for:

- Fisheries Scholarships

- Fisheries Industry Training - Fisheries Transportation Grants - Fisheries Transportation Loans - Fisheries Facilities Grants - fisheries Facilities Loans

- Fisheries Research Grants.

Name of Grant Program:

Name: Care Of:

Street Address:

City, State, Zip Code:

Telephone:

E-Mail Address: Form and Content: Submission Deadlines: Restrictions on Awards: Fisheries Research Grants

Simon Kinneen Norton Sound Fund

420 L Street, Suite 310 Anchorage, AK 99501 907-274-2248

Not Applicable

None

Norton Sound Fund utilizes contributions and other resources to provide training, business administration,

form loans and grants, construct or improve transportation facilities, and award grants for:

- Fisheries Scholarships - Fisheries Industry Training - Fisheries Transportation Grants - Fisheries Transportation Loans

- Fisheries Facilities Grants

- fisheries Facilities Loans - Fisheries Research Grants.

| Form 8868 | 3 (Rev 1-2013) | | | | Page 2 |
|-----------------------------|--|------------------------------|---------------------------------------|--|----------------|
| | re filing for an Additional (Not Automatic) 3-Mont | h Extension | . complete only Part II and check | this box | |
| _ | complete Part II if you have already been granted | | | | ·· <u>M</u> |
| | re filing for an Automatic 3-Month Extension, con | | | | |
| | Additional (Not Automatic) 3-Month E | | | al (no copies needed) | |
| SECONDA PAR | | - | | identifying number, see ins | |
| | Name of exempt organization or other filer, see instructions. | | | Employer identification number (| |
| - | | | | | |
| Type or print | Norton Sound Fund | | | 92-0166389 | |
| • | Number, street, and room or suite number. If a P O. box, see instructions. Social security number. | | | Social security number (SSN) | |
| File by the extended | tended Altman Rogers & Company | | | | |
| due date for filing your | 425 G. Street, Suite 500 | | | | |
| return See instructions. | Crty, town or post office, state, and ZIP code. For a foreign addre | ss, see instructi | ons. | | |
| | Anchorage, AK 99501 | | | | |
| | | | | | |
| Enter the F | Return code for the return that this application is for | or (file a sep | parate application for each return). | ,, | · <u>04</u> _ |
| | | : | T | | |
| Application Is For | n | Return Code | Application is For | , | Return Code |
| | r Form 990-EZ | 01 | | | |
| Form 990-I | | 02 | Form 1041-A | Land Land States of the state o | 08 |
| Form 4720 | | 03 | Form 4720 | | 09 |
| Form 990-F | · | 04 | Form 5227 | | 10 |
| | T (section 401(a) or 408(a) trust) | 05 | Form 6069 | , , | 11 |
| | Γ (trust other than above) | 06 | Form 8870 | | 12 |
| | | | | town to the different pages | L |
| STOP: DO | not complete Part II if you were πot already grant | ed an auton | natic 3-month extension on a prev | iously filed Form 8808. | |
| | | | | | |
| The boo | oks are in care of ► Rick Walicki | | | _ | |
| Telepho | one No. > 907-274-2248 | FAX No. ► | 907-274-2249 | | |
| If the o | rganization does not have an office or place of bu | | | | . 🏲 📙 |
| | s for a Group Return, enter the organization's four | - | | | is for the |
| | p, check this box > If it is for part of the gi | roup, check t | his box ► | with the names and EINs o | f all |
| members t | he extension is for. | | | | |
| 4 Iron | uest an additional 3-month extension of time until | 11/15 | 20. 4.2 | | |
| | | | , 20 <u>13</u> . , 20 , and ending | 20 | |
| | alendar year <u>2012</u> , or other tax year beginning tax year entered in line 5 is for less than 12 months. | | | Final return | _ |
| _ | thange in accounting period | iris, cricci ii | Lason. | | |
| | | rmation | needed to prepare the | roturn was rose | 41108 |
| | close to the filing date to all | | | | |
| | pleteness and accuracy. | OM_ CITE_ | carbatel ambie cime c | TEATER THE TEC | <u> </u> |
| 8a If this | application is for Form 990-BL, 990-PF, 990-T, 4: application is for Form 990-BL, 990-PF, 990-T, 4: applications | 720, or 6069 | , enter the tentative tax, less any | 8a\$ | 0. |
| | | | | | <u>v.</u> |
| paym | application is for Form 990-PF, 990-T, 4720, or 6 ents made. Include any prior year overpayment al | llowed as a | | | _ |
| | Form 8868 | | | | 0. |
| c Balan EFTP | ice due. Subtract line 8b from line 8a Include you S (Electronic Federal Tax Payment System). See | ir payment v instructions | with this form, if required, by using | 8c\$ | 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 > 7077

Date ► 8-/2-/3 Form **8868** (Rev 1-2013)

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

| | re filing for an Automatic 3-Month Extension, con re filing for an Additional (Not Automatic) 3-Monti | | | | - X |
|--|---|--|--|---|----------------|
| • | plete Part II unless you have already been grante | | , , , , , , | • | |
| Electronic fi corporation equest an ex Associated V | illing (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not xtension of time to file any of the forms listed in Part With Certain Personal Benefit Contracts, which milling of this form, visit www.irs.gov/efile and click of | I if you need automatic) I or Part II would ust be sent | d a 3-month automatic extension of time 3-month extension of time. You can ele with the exception of Form 8870, Information to the IRS in paper format (see instruction | to file (6 months fo ctronically file Form Return for Transfers | 8868 to |
| Parall : | Automatic 3-Month Extension of Time. | Only sub | omit original (no copies needed). | | |
| corporatio | on required to file Form 990-T and requesting an a | automatic 6 | -month extension - check this box and o | complete Part I only | - □ |
| All other cor | rporations (including 1120-C filers), partnerships, | REMICs. ai | nd trusts must use Form 7004 to request | an extension of tim | e to file |
| ncome tax i | returns. | , | • | ying number, see ir | |
| | Name of exempt organization or other filer, see instructions | | Enter mer sidenui | Employer identification in | |
| ype or | | | | | , |
| print | Norton Sound Fund | | | 92-0166389 | |
| Number, street, and room or surte number If a P.O. box, see instructions | | | | Social security num | ber (SSN) |
| ue date for | 420 L Street #310 | | | | |
| ling your eturn See | City, town or post office, state, and ZIP code. For a foreign addr | ress, see instru | ctions. | · | |
| nstructions | Anchorage, AK 99501 | | | | |
| Enter the Re | eturn code for the return that this application is fo | r (file a sep | parate application for each return). | | 04 |
| Application s For | | Return Code | Application Is For | | Return Code |
| orm 990 or Form 990-EZ | | 01 | Form 990-T (corporation) | | 07 |
| orm 990-BL | | 02 | Form 1041-A | | 08 |
| orm 4720 (ıı | ndıvıdual) | 03 | Form 4720 | orm 4720 | |
| orm 990-PI | F | 04 | Form 5227 | | 10 |
| orm 990-T | (section 401(a) or 408(a) trust) | 05 | Form 6069 | | 11 |
| orm 990-T | (trust other than above) | 06 | Form 8870 | | 12 |
| Telephon If the org If this is check th the exter 1 I request until The exter | s are in the care of Rick Walicki The No. 907-274-2248 Ganization does not have an office or place of busing for a Group Return, enter the organization's four its box If it is for part of the group, classion is for. It is to month the interval of the exempt organization is for the organization's return for: I calendar year 20 12 or | siness in thi digit Group heck this bi required to to anization re | Exemption Number (GEN) . If ox Pand attach a list with the natural Form 990-T) extension of time turn for the organization named above. | this is for the whole | group, |
| | tax year beginning, 20 ax year entered in line 1 is for less than 12 montl ange in accounting period | | | al return | |
| 3a If this a | application is for Form 990-BL, 990-PF, 990-T, 47 undable credits. See instructions | /20, or 6069 | 9, enter the tentative tax, less any | 3a\$ | 0. |
| | application is for Form 990-PF, 990-T, 4720, or 60 ints made. Include any prior year overpayment all | | | 3 b \$ | 0. |
| c Balanc EFTPS | ce due. Subtract line 3b from line 3a. Include your 6 (Electronic Federal Tax Payment System). See | r payment v instructions | with this form, if required, by using | 3 c \$ | 0. |
| aution. If yo | ou are going to make an electronic fund withdrawal wi tructions. | ith this Form | 8868, see Form 8453-EO and Form 8879-E | EO for | |