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DLN: 93493059005174

Form **990** 

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 ca	endar year, or tax year beginnin	g 01-01-2013 , 2013, and end	ing 12-31-	-2013			
		pplicable	C Name of organization IDAHO TELECOM ALLIANCE				D Employ	er ide	ntification number
	dress cl	_	Doing Business As				82-04	3191	3
	me cha								
	tıal retu		Number and street (or P O box if r PO BOX 1638	naıl ıs not delivered to street address)	Room/suite	2	E Telepho	ne num	ber
	rmınate			TTD of control of			(208)	229-:	.482
	ended		BOISE, ID 83701	ntry, and ZIP or foreign postal code					
Ар	plicatioi	n pending		namal afficaci			<b>G</b> Gross re		
			<b>F</b> Name and address of pri	ncipal officer			nis a group ordinates?	returr	for
							all subordır ıded?	nates	┌ Yes <a> No</a>
<b>I</b> Ta	x-exen	npt status	「 501(c)(3) <b>▼</b> 501(c)(6) ◀	(insert no )	27	If"N	lo," attach	a lıst	(see instructions)
J W	ebsite	e: ► ww	w ıdahotelecomallıance org			H(c) Gro	up exemptı	on nu	mber ►
<b>K</b> For	m of or	ganızatıor	Corporation Trust Association	on Other ▶		· · ·	ormation 198	34 M	State of legal domicile ID
	rt I		ımary						<b>,</b>
	1	Briefly d	escribe the organization's missi	on or most significant activities					
		Support	the advancement of its member	s, to collectively share ideas ar		ote service	es to rural t	eleco	mmunication
ب		subscrib	pers throughout the State of Idal	no					
≧ _									
Ě									
Governance	2	Check t	his box দ if the organization d	scontinued its operations or dis	posed of	more than	25% of its	net as	sets
							ı	ı	1
Activities &	1		of voting members of the govern					3	13
Ě	1		of independent voting members mber of individuals employed in					4 	13
ទ្ធ	1		mber of volunteers (estimate if i		•			6	-
•	1		related business revenue from P	• •				7a	0
			elated business taxable income					7b	
						Pri	or Year		Current Year
_	8	Contr	butions and grants (Part VIII, I	ıne 1 h)					0
an Tile	9		am service revenue (Part VIII, I		199,8	63	327,163		
Revenue	10		tment income (Part VIII, colum	,				23	0
_	11		revenue (Part VIII, column (A) revenue—add lines 8 through 11				4,3	67	23,017
	12		revenue—add imes o through 11	•			204,2	5 3	350,180
	13		s and sımılar amounts paıd (Pari				3,0	00	3,500
	14		its paid to or for members (Part					_	0
92	15	Saları 5–10	es, other compensation, employ \	ee benefits (Part IX, column (A)	), lines		51,0	83	30,500
Expenses	16a		, ssional fundraising fees (Part IX	, column (A), line 11e)			•		0
ੜੇ	Ь	Total fu	ındraısıng expenses (Part IX, column (E	0), line 25) <b>▶</b> 0					
ш	17		expenses (Part IX, column (A),	• •	<del></del> .		147,0	55	247,697
	18	Total	expenses Add lines 13–17 (mu	ıst equal Part IX, column (A), lır	ne 25)		201,1	38	281,697
	19	Rever	ue less expenses Subtract line	18 from line 12			3,1	15	68,483
Not Assets or Fund Balances						_	ng of Curren Year	ıt	End of Year
6 E	20	Total	assets (Part X, line 16)				29,0	60	180,568
Å.	21		liabilities (Part X, line 26)					03	83,130
žÏ	22	Net a	ssets or fund balances Subtract	line 21 from line 20			28,9	57	97,438
Pa	rt II	Sigr	nature Block						
my k prepa	nowle arer ha	dge and as any k	ature of officer			n officer) is			
Her	E		CRESWELL Executive Dir						
		17	Print/Type preparer's name	Preparer's signature	Dat	te Ch	eck if	PTIN	
Paid	d		Nendy K Clausen CPA  Firm's name ► Crandall Swenson Gle	acon & Wadawarth Chil		se	lf-employed	P0003	4032
	pare		IIII S Hairie 🕩 Cranuali Swenson Gle	ason & wadsworth Child		Fir	m's EIN 🟲		
	On		Firm's address 🟲 1110 N Five Mile Rd			Ph	one no (208)	323-7	655

Boise, ID 83713

May the IRS discuss this return with the preparer shown above? (see instructions)  $\ \ .$ 

✓ Yes No

Form	990 (20	013)			Page
Par		Statement of Program Service Acco Check if Schedule O contains a response or no		ш	
1	Briefly	describe the organization's mission			
		dvancement of its members, to collectively she State of Idaho	nare Ideas and to promote	services to rural telecommunicat	tion subscribers
2		organization undertake any significant progra r Form 990 or 990-EZ?			┌ Yes ┌ No
	If"Yes	," describe these new services on Schedule O			
3	service	organization cease conducting, or make signi		onducts, any program	┌ Yes ┌ No
	If "Yes	" describe these changes on Schedule O			
4	expens	pe the organization's program service accomples Section 501(c)(3) and 501(c)(4) organizall expenses, and revenue, if any, for each prog	tions are required to repo		
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
		the 2013 Tristate Telecommunications conference with t ade show and nationally known speackers in the telecon nce			
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	Conduc	ted 2 training events for 75 member company personne	l Training included customer se	ervice and marketing topics and industry s	specific technical training
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	Held 20	12 Annual meeting All ITA board members and employe	ees were invited		
4d	Other	program services (Describe in Schedule O )			
	(Expe	nses \$ including gran	nts of \$	) (Revenue \$	)
4e	Total	program service expenses 🕨			

# Part IV Checklist of Required Schedules

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

Par	t IV Checklist of Required Schedules (continued)		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes,"	204	
	complete Schedule L, Part IV	28b	No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b	No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	No

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   8		163	140
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable  1b  0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		No
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		<b> </b>
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		1	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		1	
_		8		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		No
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	į l		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		ı ——

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

Check if Schedule O contains a response or note to any line in the	hıs Part VI .							. <u>「</u> マ

36	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			No
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing			No
b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			No No
b 12a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b		No No
b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	11a 12a 12b		No No
b 12a b c	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?	11a 12a 12b 12c 13		No No No
b 12a b c 13 14 15	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by	11a 12a 12b 12c 13	Yes	No No No
b 12a b c 13 14 15	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	11a 12a 12b 12c 13	Yes	No No No
b 12a b c 13 14 15	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	11a 12a 12b 12c 13 14	Yes	No No No No
b 12a b c 13 14 15 a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14	Yes	No No No No
b 12a b c 13 14 15 a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14	Yes	No No No No
b 12a b c 13 14 15 a b b 16a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a  12a  12b  12c  13  14  15a  15b	Yes	No No No No

- List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►KATE CRESWELL box 1638

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

BOARD MEMBER   0 00	(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is a dir	one bot ecto	not box h ar or/tr	offic	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
DARD MEMBER		below	ndividual trustee ir director	Institutional Trustee	Жісеі	(ey employee	lighest compensated mployee	omer	MISC)	MISC)	and related
BOARD MEMBER   0 00	(1) STEVE COWGER	1 00								0	
BOARD MEMBER	BOARD MEMBER	0 00	*						U	U	U
BOARD MEMBER   0 00	(2) DENNIS THORNOCK										
3) GARRIN BOTT	BOARD MEMBER	0.00	X						0	0	0
DARD MEMBER											
(4) COREY PACKER	•		х						0	0	0
DOARD MEMBER   0 00											
S	(4) CORET FACRER	1 00	х						0	0	0
BOARD MEMBER											
DOARD MEMBER   0 0 0	(5) DAN GREIG	1 00	<sub>x</sub>						0	0	0
BOARD MEMBER	BOARD MEMBER	0 00	_ ^						Ů	Ů	
DOARD MEMBER   0 00	(6) STEVE CHILD	1 00	<u></u>								
The state of the	BOARD MEMBER	0.00							U	U	U
BOARD MEMBER   0 00	(7) JAMES BROOKS										
(8) MARK MARTELL	ROADD MEMBED	0.00	X						0	0	0
BOARD MEMBER											
Seminary   Color   C			Х						0	0	0
President											
Color   Charlie Creason   Color   Co	(9) JEH BECK	1 00	х						0	0	0
President & CEO											
President & CEO	(10) CHARLIE CREASON	1 00	l <sub>x</sub>						0	0	0
BOARD MEMBER   0 00   0   0   0   0   0   0   0   0		0 00									
BOARD MEMBER   0 00	(11) RICK WIGGINS	1 00								0	0
CEO	BOARD MEMBER	0 00	^						U	U	U
BOARD MEMBER         0 00         X         0         0         0           (13) ALLEN HOOPES         1 00         X         0         0         0           BOARD MEMBER         0 00         X         0         0         0           (14) RICH REDMAN         2 00         X         0         0         0           BOARD MEMBER         0 00         X         0         0         0           (15) JOHN STUART         1 00         X         0         0         0           CEO         0 00         X         30,500         0         0	(12) RICH REDMAN										
CEO	BOARD MEMBER	0.00	X						0	0	0
BOARD MEMBER   0 000   X											
(14) RICH REDMAN         2 00         X         0         0         0           BOARD MEMBER         0 00         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0			х						0	0	0
BOARD MEMBER											
(15) JOHN STUART         1 00         X         0         0         0           CEO         0 00         X         0         0         0           (16) KATE CRESWELL         20 00         X         30,500         0         0	• •	2 00			Х				0	0	0
CEO         0 00         X         0 0         0 0           (16) KATE CRESWELL         20 00         X         30,500         0         0											
CEO         0 00         Image: CEO of the control of t	(15) JUHN STUART	1 00			х				n	٥	0
X     30,500   0		0 00							Ů	Ŭ	
	(16) KATE CRESWELL	20 00			,				30 F00	0	
	Executive Dir	0 00			^				30,300	U	U
		1									_

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more t	on is	one l both	box, an d			Repor comper from organiza	table sation the tion (W-	(E)  Reportable compensation from related organizations (W	-	(F) Estima mount o compens from t	ited f other sation :he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099	-M15C)	2/1099-MISC)		rganizati relati organiza	ed
												+		
				_								_		
				-								-		
				-								+		
												+		
		+		$\vdash$								+		
1b	Sub-Total			<u> </u>	_			<u> </u>				+		
c	Total from continuation shee		ection A	Α.		•		Þ				+		
d	Total (add lines 1b and 1c) .							<b> -</b>		30,500				
2	Total number of individuals (ii \$100,000 of reportable comp						d abov	e) w	ho receive	d more th	ian	·		
													Yes	No
3	Did the organization list any f						emplo	yee	, or highes	t compen	sated employee			
4	on line 1a? <i>If "Yes," complete</i> For any individual listed on lin	ie 1a, is the sum	of repo	rtabl	e co	mpe						3		No
	organization and related organindividual	nizations greater	than \$	150,		? I† '	"Yes," (	comp •	lete Schedi	ule]fors	uch	4		No
5	Did any person listed on line : services rendered to the orga									anızatıon	or individual for	5		No
1	Complete this table for your fi compensation from the organi	ve highest comp											tax vear	
		(A) Name and business									(B) cription of services		(C Comper	)
												1	1.2	-
												$\dashv$		
2	Total number of independent co	ontractors (inclu	dına bu	t not	lımıt	ed to	those	e list	ted above)	who rece	ived more than	$\dashv$		

\$100,000 of compensation from the organization  $\blacktriangleright 0$ 

Form 99						Page <b>9</b>
Part V	<b>/    </b>	Statement of Revenue Check if Schedule O contains a response or note to any lir	ne in this Part VIII			
			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s £	1a	Federated campaigns 1a				
ant	b	Membership dues 1b				
Gifts, Grants ilar Amounts	С	Fundraising events 1c				
ifts ar A	d	Related organizations 1d				
%. E	е	Government grants (contributions) <b>1e</b>				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above				
ontrib nd Otl	g h	Noncash contributions included in lines  1a-1f \$  Total. Add lines 1a-1f	0			
<u>ರ ಹ</u>	-"	P-	Ŭ			
e E	22	Business Code	200.040	200.040		
ever.	2a b	Membership Dues & Assessments TRAINING SEMINAR	200,910 8,948	200,910 8,948		
or GE	, c	TRISTATE CONFERENCE	117,305	117,305		
r M	d	- INDIVIDED CONTROL OF THE PROPERTY OF THE PRO	117,505	117,505		
Ž,	e					
Program Serwoe Revenue	f	All other program service revenue				
Š	g	Total. Add lines 2a-2f	327,163			
	3	Investment income (including dividends, interest,	0			
	4	and other similar amounts)	0			
	5	Royalties	0			
		(ı) Real (ıı) Personal				
	6a	Gross rents				
	b	Less rental expenses				
	C	Rental income or (loss)				
	d	Net rental income or (loss)	0			
	   7a	(i) Securities (ii) Other Gross amount				
	'a	from sales of assets other				
	١.	than inventory				
	b	Less cost or other basis and				
	С	sales expenses Gain or (loss)				
	d	Net gain or (loss)	0			
en e	8a	Gross income from fundraising events (not including				
Other Revenue		\$				
Ē	 	loss direct expenses				
₹	1	Net income or (loss) from fundraising events	0			
		Gross income from gaming activities See Part IV, line 19				
		a				
		Net income or (loss) from gaming activities	0			
		Gross sales of inventory, less	- Y			
	-	returns and allowances .				
	 	a l				
		Less cost of goods sold <b>b</b> Net income or (loss) from sales of inventory <b>p</b>	0			
	٣	Miscellaneous Revenue Business Code	, i			
	11a	SPONSORSHIP	23,017			23,017
	ь					
	С					
	d	All other revenue				
	e	Total. Add lines 11a-11d ▶	23,017			
	12	Total revenue. See Instructions	350,180	327,163		23,017

orm	990 (2013)				Page <b>10</b>
	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ons must comp	olete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX	 (B)	(C)	<del>.</del> \
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	3,500			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			_
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			_
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	30,500			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	33,712			
C	Accounting	1,400			
d	Lobbying	27,165			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	32,723			
12	Advertising and promotion	0			
13	Office expenses	3,834			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	20,178			_
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	118,695			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Lobbying Expense	5,303			
b	Training for Committees	1,974			
C	Merchant Service & bank fees	1,196			
d	Political Contributions	1,000			
e	All other expenses	517			
25	<b>Total functional expenses.</b> Add lines 1 through 24e	281,697	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	19,530	1	96,079
	2	Savings and temporary cash investments	1,307	2	1,307
	3	Pledges and grants receivable, net		3	0
	4	Accounts receivable, net	8,223	4	83,182
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			<u> </u>
		Schedule L		5	0
8	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			_
Se	l _			6	0
Assets	7	Notes and loans receivable, net		7	0
_	8	Inventories for sale or use		8	0
	9 10a	Prepaid expenses and deferred charges		9	0
	Ь	VI of Schedule D  Less accumulated depreciation		10c	0
	11	Investments—publicly traded securities		11	0
	12	Investments—other securities See Part IV, line 11		12	0
	13	Investments—program-related See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11		15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	29,060	16	180,568
	17	Accounts payable and accrued expenses	103	17	-52
	18	Grants payable		18	
	19	Deferred revenue		19	83,182
	20	Tax-exempt bond liabilities		20	
ω.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
_iabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ар		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule		25	
	26	D	103	25	83,130
	26	Total liabilities. Add lines 17 through 25	103	26	83, 130
φ		Organizations that follow SFAS 117 (ASC 958), check here ▶ ┌ and complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets		27	
<u> </u>	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶   and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
ets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
\$ S	32	Retained earnings, endowment, accumulated income, or other funds	28,957	32	97,438
Net 4	33	Total net assets or fund balances	28,957	33	97,438
ž	34	Total liabilities and net assets/fund balances	29,060	34	180,568
	1 7 7	Total nationals and net assets/fund parameter	29,000	J <del>4</del>	100,500

Page <b>1∠</b>
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Par	t XI	Reconcilliation of Net Assets				
		Check if Schedule O contains a response or note to any line in this Part XI				<u></u>
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		3	350,180
2	Total	expenses (must equal Part IX, column (A), line 25)	2		Ž	281,697
3	Reven	nue less expenses Subtract line 2 from line 1	3			68,483
4	Net as	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			28,957
5	Net ur	nrealized gains (losses) on investments	5			20,557
6	Donat	ed services and use of facilities	6			
7	Inves	tment expenses	7			
8	Prior	period adjustments	8			
9	Other	changes in net assets or fund balances (explain in Schedule O )	9			-2
10	Net as colum	ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, in (B))	10			97,438
Par	t XII	Financial Statements and Reporting				
		Check if Schedule O contains a response or note to any line in this Part XII				. Г
					Yes	No
1		organization changed its method of accounting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," ex				
2a	Were t	the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
		s,' check a box below to indicate whether the financial statements for the year were compiled or revie arate basis, consolidated basis, or both	wed or	ו		
	Γs	eparate basis			1	
b	Were t	the organization's financial statements audited by an independent accountant?		2b		No
		s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both	ırate			
	Γs	eparate basis				
С		s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	nt of th	2 <b>c</b>		
	If the Sched	organization changed either its oversight process or selection process during the tax year, explain i Iule O	n			
За		result of a federal award, was the organization required to undergo an audit or audits as set forth in the 2 Audit Act and OMB Circular A-133?	e	3a		No
b		s," did the organization undergo the required audit or audits? If the organization did not undergo the ed audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

DLN: 93493059005174

#### OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

# Political Campaign and Lobbying Activities

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

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

▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its

**Inspection** 

Internal Revenue Service instructions is at www.irs.gov/form990. If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations
 Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B ◆ Section 527 organizations Complete Part I-A only If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** IDAHO TELECOM ALLIANCE 82-0431913 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 1,000 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ┌ Yes Was a correction made? If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter directly delivered to a separate political organization If none, enter-0-(1) BRAD LITTLE FOR IDAHO P O BOX 2664 500 BOISE, ID 83701 (2) SENATOR CURT MCKENZIE 412 W FRANKLIN 250 BOISE, ID 83702 (3) REP JANIE WARD-ENGELKING 3578 SO CROSSPOINT DR 250 BOISE, ID 83706

Sch	nedule C (Form 990 or 990-EZ) 2013					Page <b>2</b>
Pä	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and file	ed Form 5768	
_	under section 501(h)).		List in Dank IV as	- h - 66:1: - h - d		a adduses FIN
٠.	Check Fifthe filing organization belongs to a expenses, and share of excess lobb		list in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		ol" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l.)		(a) Filing organization's totals	( <b>b)</b> Affiliated group totals
La	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1i	b)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
_	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
_	Subtract line 1g from line 1a If zero or less, ent-	•		<u> </u>		
	Subtract line 1f from line 1c If zero or less, ente			<u> </u>		
	If there is an amount other than zero on either lii		organization file	L Form 4720 repo	ortina	
	section 4911 tax for this year?					┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera	ging Period	T	1
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT				
For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		(a)		(b)		
activ		Yes	No	A	moun	ıt
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?					
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?			<u> </u>		
j	Total Add lines 1c through 1i		1			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			-		
b	If "Yes," enter the amount of any tax incurred under section 4912					
c C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		1			
d	t III-A Complete if the organization is exempt under section 501(c)(4), section	E01/o	\/E\ /	<u> </u>	otio	<u> </u>
Par	501(c)(6).	DOT(C	)(5), (	Jr Se	CLIO	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		Γ	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		Νo
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	Yes	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1			15	8,141
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	_			_	
а	Current year	2a				0,216
b	Carryover from last year	2b				9,725
C	Total	<b>2c</b> 30,49				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	<b>3</b> 63,25		3,256	
4	4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?				-37	2,765
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro rt II-B, line 1  Also, complete this part for any additional information	up list),	Part II	-A, lı	ne 2,	and
	Return Reference Explanation					

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Part IV Supplemental Information	on <i>(continued)</i>			
Return Reference	Explanation			

Schedule D (Form 990) 2013

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DLN: 93493059005174

Employer identification number

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Name of the organization IDAHO TELECOM ALLIANCE

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

OMB No 1545-0047

2013

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#### 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	MEMBERS ARE INDIVIDUALS OR ENTITIES OWNING AND OPERATING SMALLER INDEPENDENT LOCAL EXCHANGE TELEPHONE COMPANIES, LOCATED IN WHOLE OR IN PART WITHIN THE STATE OF IDAHO, HAVING LESS THAN 15,000 CUSTOMERS WITHIN THE STATE OF IDAHO
Form 990, Part VI, Line 11b Form 990 Review Process	EXECUTIVE DIRECTOR AND PRESIDENT WILL REVIEW BEFORE RETURN BEFORE IT IS FILED
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	COMPENSATION AND APPROVAL OF EXECUTIVE DIRECTOR IS DETERMINED BY THE EXECUTIVE COMMITTEE WHICH CONSISTS OF THE OFFICERS
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	No documents available to the public
Other Changes In Net Assets Or Fund Balances - Other Decreases	ROUNDING = -\$2