

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493205012145

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

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

2014

Open to Public Inspection

A Fo	r the 2	2014 cz	lendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014				
		pplicable	C Name of organization		D Employ	er iden	itification number
	ress ch		IDAHO TELECOM ALLIANCE				
	ne char	-			82-04	31913	;
	ıal retur	_	Doing business as				
,		m	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telepho	ne numl	oer
Final retu		nınated	PO BOX 1638		(208)	229-1	482
┌ Am	ended r	return	City or town, state or province, country, and ZIP or foreign postal code				
☐ App	lication	pendino	BOISE, ID 83701		G Gross re	ceipts \$	210,687
			F Name and address of principal officer	(a) 7 U			•
			Name and address of principal officer	l (a) Is this subor	s a group dinates?	return	Tor Yes ▼ No
			H	l (b) Are al includ		nates	┌ Yes 🗸 No
	x-exem	pt statu	s			a list	(see instructions)
	- 4-14-		iou ida hata la compiliance are	_			
				l(c) Grou	p exempti	on nun	nber F
				L Year of for	mation 198	34 M	State of legal domicile ID
Pa	rt I	Sur	nmary				
			describe the organization's mission or most significant activities				
			t the advancement of its members, to collectively share ideas and to promot bers throughout the State of Idaho	te services	to rural t	elecon	nmunication
<u>ల</u>	-		<u> </u>				
厦	-						
Governance	3 -	^ hack	this box 🔭 if the organization discontinued its operations or disposed of m	ore than 2	5% of its	net ac	catc
9		CHECK	tins box Fig. If the organization discontinued its operations of disposed of in	ore than 2:	3 70 OTTES	iiet as:	sets
	3 1	Numbe	r of voting members of the governing body (Part VI, line 1a)			3	13
Activities &	4 1	Numbe	r of independent voting members of the governing body (Part VI, line 1b) .			4	13
3	5 1	Γotal n	umber of individuals employed in calendar year 2014 (Part V, line 2a) .			5	0
ã	6 ⊺	Γotal n	umber of volunteers (estimate if necessary)			6	
	7 a ⊺	Γotal u	nrelated business revenue from Part VIII, column (C), line 12			7a	0
	ьſ	Vet uni	related business taxable income from Form 990-T, line 34			7b	
				Prio	Year		Current Year
_	8	Cont	ributions and grants (Part VIII, line 1h)				0
Revenue	9	Prog	ram service revenue (Part VIII, line 2g)		327,1	63	210,637
9.66	10	Inve	stment income (Part VIII, column (A), lines 3, 4, and 7d)				50
	11		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		23,0	17	0
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		350,1	80	210,687
	13		ts and similar amounts paid (Part IX, column (A), lines 1-3)		3,5	_	. 0
	14		fits paid to or for members (Part IX, column (A), line 4)		- ,-		0
	15		ries, other compensation, employee benefits (Part IX, column (A), lines		30.5		20.220
8		5-10			30,5	00	29,229
Expenses	16a	Profe	ssional fundraising fees (Part IX, column (A), line 11e)				0
ੜੀ	ь	Total 1	fundraising expenses (Part IX, column (D), line 25) ▶0				
	17	Othe	r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		247,6	97	115,968
	18		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		281,6	97	145,197
	19	Reve	nue less expenses Subtract line 18 from line 12		68,4	83	65,490
<u> </u>				Beginning	of Curren	ıt	End of Year
₽ Œ			_	Y	ear		
Not Assets or Fund Balances	20		lassets (Part X, line 16)		180,5		163,139
# E	21		l liabilities (Part X, line 26)		83,1		0
	22		assets or fund balances Subtract line 21 from line 20		97,4	38	163,139
	t II		nature Block				
			f perjury, I declare that I have examined this return, including accompanying I belief, it is true, correct, and complete Declaration of preparer (other than				
			knowledge	,			
		<u> </u>		1			
c:		I B.	**** nature of officer	20: Da	15-07-24 te		
Sign Here		<u>'</u>	TE CRESWELL Executive Dir				
			e or print name and title				
		''	Print/Type preparer's name Preparer's signature Date	Chec		PTIN	
Paid	t	,	Wendy K Clausen CPA Wendy K Clausen CPA Wendy K Clausen CPA	self-	employed	P00034	032
	pare	_r	Firm's name	Firm	's EIN 🕨		
	Onl		Firm's address ► 1110 N Five Mile Rd	Phor	ne no (208)	323-76	55
		,	Boise, ID 83713				

✓ Yes No

Part IV	Che	cklist	of Re	auired	Sche	dules
	CHE	CRIISC	OI NO	uuncu	SCIIC.	uuics

			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		Νo
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^{\bullet}	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? If "Yes," complete Schedule C, Part III	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		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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
	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
	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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
	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? If "Yes," complete Schedule D, Part IX	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		Νo
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		N o
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? If "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 $11e^{7}$ 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 ——
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		

Par	Checklist of Required Schedules (continued)		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 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 or for domestic individuals 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
C	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), 501(c)(4), and 501(c)(29) 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 "Yes," 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		ú
		28a	No
D	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b	No
C	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	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		No
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37	110
20	Note: All Form 990 filers are required to complete Schedule O	38	No

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
1.	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 5		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	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		Νo
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		Νο
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
h	If "Yes," enter the name of the foreign country			
ט	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
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		No
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).	ı		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		
C	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. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			ı <u>.</u> .
Qa	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		No No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	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.			
a	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			
	Enter the amount of reserves on hand			1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
D	II TES. HAS IL HIED A FORM 720 LO REDOTE TRESE DAVMENTS? IT "NO." DROVIGE AN EXPLANATION IN SCHEDULE O	14b		i

Section A. Governing Body and Management

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

Check it Schedule O contains a response or note to any line in this Part VI	if Schedule O contains a response or note to any line in this Part VI
---	---

			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		Νo
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	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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	ie Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	re Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		•
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a		No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b		No No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b		No No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13		No No No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13		No No No No No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No No

Section C. Disclosure

- 17 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 V 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
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►KATE CRESWELL

box 1638

Boise, ID 83701 (208) 229-1482

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ect	not box h an or/tr	o le control de la control de	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) RICH REDMAN	1 00	x						0	0	0
BOARD MEMBER	0 00	,								
(2) JOHN STUART Vice President	1 00	х		х				0	0	0
(3) STEVE COWGER	1 00							_	_	
BOARD MEMBER	0 00	Х						0	0	0
(4) DENNIS THORNOCK	1 00	,								
BOARD MEMBER	0 00	Х						0	0	0
(5) GARRIN BOTT	1 00	,,								
BOARD MEMBER	0 00	X						0	0	0
(6) COREY PACKER	1 00	х						0	0	0
BOARD MEMBER	0 00	^						0	0	
(7) DAN GREIG	1 00	x						0	0	0
BOARD MEMBER	0 00	_ ^						0	0	
(8) JAMES BROOKS	1 00	x						0	0	0
BOARD MEMBER	0 00	, ,								
(9) MARK MARTELL	1 00	×						0	0	0
BOARD MEMBER	0 00							_	_	
(10) JEFF BECK	1 00	x						0	0	0
President	0 00									
(11) CHARLIE CREASON	1 00	x						0	0	0
President & CEO	0 00									
(12) RICK WIGGINS	1 00	х						0	0	0
BOARD MEMBER (13) ALLEN HOOPES	0 00 1 00									
BOARD MEMBER	0 00	х						0	0	0
(14) JERRY PIPER	3 00									
President	0 00			X				0	0	0
	<u> </u>									Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	(C) Position (do not che more than one box, ui person is both an off and a director/trust			x, unle n office	ss er	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(15) KYLE BRADSHAW SEC/TREAS	2 00			х				0	0	1
(16) KATE CRESWELL Executive Dir	20 00 0 00			х				29,229	0	

1b	Sub-Total	Ŧ		
C	Total from continuation sheets to Part VII, Section A	•		
d	Total (add lines 1b and 1c)	►	29,229	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section	R	Inde	nar	adan	+ Ca	ntra	ctore
Section	Ю.	THUE	:ver	ıuen	LCC	пига	CLUES

L Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part V	4111	Statement o	f Revenue µle O contains a respor	nee or note to any li	ne in thic Part VIII			_
				ise of flote to any fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
st st	1a	Federated camp						
ran Our	b	Membership du	es 1b					
S Am	С	Fundraising eve	ents 1c					
ali fis	d	Related organiz	ations 1d					
S, C	e	Government grants	s (contributions) 1e					
is is	f	All other contribution	ons, gifts, grants, and 1f			i		
but the		similar amounts no	ot included above			ļ		
Contributions, Gifts, Grants and Other Similar Amounts	g	1a-1f \$	ons included in lines					
ē	h	Total. Add lines	31a-1f	· · · •	0			
				Business Code				
٧en	2a	Membership Dues			179,764	179,764		
82	Ь	TRAINING SEMINAR	-		9,020	9,020		
≥	c	TRISTATE CONFER	ENCE		21,853	21,853		
Ŗ	d							
Ē	e f	All other progra	m service revenue					
Program Serwice Revenue	ļ '							
<u></u>	g		2a-2f	+	210,637			
	3		ome (including dividend ar amounts)		50			50
	4	Income from inves	tment of tax-exempt bond	proceeds 🕨	0			
	5	Royalties			0			
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental						
		expenses Rental income						
	d	or (loss)	me or (loss)		0			
	"	Net rental incol	(i) Securities	(II) O ther				
	7a	Gross amount	(1,7 0 0 0 0 11 11 11 11 11 11 11 11 11 11 1	(11) 5 21151				
		from sales of assets other						
	ь	than inventory Less cost or						
		other basıs and sales expenses						
	C	Gain or (loss)						
	d		s)		0			
ane	8a	Gross income fi events (not incl \$	luding 					
Other Revenue		of contributions See Part IV, lin	reported on line 1c) e 18 a					
j	ь	Less direct ex	penses b					
5	c	Net income or (loss) from fundraising	events 🛌	0			
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19					
			penses b					
			loss) from gaming activ	vities	0			
	104	Gross sales of a returns and allo						
	ь	Less cost of go	oods sold b					
	С	<u>_</u>	loss) from sales of inve		0			
	<u> </u>	Miscellaneous	s Revenue	Business Code				
	11a							
	Ь							
	d	All other revenu						
	e e		s 11a-11d	🕨				+
	12		See Instructions	_	0			
		rocar revenue.		• • • • •	210,687	210,637		50

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete col	umn (A)
--	-------	-----

	Check if Schedule O contains a response or note to any line in this Part IX					
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0				
2	Grants and other assistance to domestic individuals See Part IV, line 22	0				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals 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	29,229				
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	34,364				
c	Accounting	5,829				
d	Lobbying	25,000				
е	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)	2,653				
12	Advertising and promotion	0				
13	Office expenses	3,632				
14	Information technology	0				
15	Royalties	0				
16	Occupancy	0				
17	Travel	19,242				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0				
19	Conferences, conventions, and meetings	1,385				
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)					
a	Political Contributions	16,000				
Ŀ	Lobbying Expense	3,174				
c	Training for Committees	2,752				
d	Merchant Service & bank fees	817				
€	All other expenses	1,120				
25	Total functional expenses. Add lines 1 through 24e	145,197	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)					

Form 990 (2014)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pai	tx			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		96,079	1	103,869
	2	Savings and temporary cash investments		1,307	2	51,357
	3	Pledges and grants receivable, net		3	0	
	4	Accounts receivable, net		83,182	4	7,913
ts	5	Loans and other receivables from current and former officers, director employees, and highest compensated employees Complete Part II of Schedule L	rs, trustees, key f		5	0
	6	Loans and other receivables from other disqualified persons (as defin section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and employers and sponsoring organizations of section $501(c)(9)$ volunta beneficiary organizations (see instructions) Complete Part II of Sche		6	0	
Assets	7	Notes and loans receivable, net			7	0
ď	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	0
	10a	Land, buildings, and equipment cost or other basis Complete Part	·i		9	
	100		10a			
	ь	Less accumulated depreciation	10b		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)		180,568	16	163,139
	17	Accounts payable and accrued expenses		-52	17	100,100
	18	Grants payable			18	
	19	Deferred revenue	• •	83,182	19	
	20	Tax-exempt bond liabilities		55,152	20	
		·				
ies	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
Liabiliti	22	Loans and other payables to current and former officers, directors, trukey employees, highest compensated employees, and disqualified				
ļā.		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 this and other liabilities not included on lines 17-24) Complete Part X of D	Schedule		25	
	26	Total liabilities. Add lines 17 through 25		83,130	26	0
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and		,		
ces		lines 27 through 29, and lines 33 and 34.	complete			
lan	27	Unrestricted net assets			27	
Ba	28	Temporarily restricted net assets			28	
2	29	Permanently restricted net assets			29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► complete lines 30 through 34.	▽ and			
	30	Capital stock or trust principal, or current funds			30	
ž	31	Paid-in or capital surplus, or land, building or equipment fund			31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		97,438	32	163,139
Net	33	Total net assets or fund balances		97,438	33	163,139
z	34	Total liabilities and net assets/fund balances		180,568	34	163,139
		,		,		orm 990 (2014)

FOIIII	990	(2014)
Par		Reco

Page 12

•	\-	,			'	age ==
Par	t XI	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		Ž	210,687
2	Total	expenses (must equal Part IX, column (A), line 25)	2		1	145,197
3	Reven	nue less expenses Subtract line 2 from line 1	3			65,490
4	Netas	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			97,438
5	Net ur	nrealized gains (losses) on investments	5			
6	Donat	ed services and use of facilities	6			
7	Inves	tment expenses	7			
8	Prior	period adjustments	8			
9		changes in net assets or fund balances (explain in Schedule O)	9			211
10	Net as colum		10		1	163,139
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	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	1		
	Γs	eparate basis				
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	arate			
	Γs	eparate basis				
c		s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c		
	If the Sched	organization changed either its oversight process or selection process during the tax year, explain i Iule O	n			
	Single	result of a federal award, was the organization required to undergo an audit or audits as set forth in the Addit Act and OMB Circular A-133?	е	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: 93493205012145

OMB No 1545-0047

Political Campaign and Lobbying Activities

Open to Public **Inspection**

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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. ▶ Information about Schedule C (Form 990 or 990-EZ) and its 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) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

	me of the organization				Employer ide	nt if ic	cation number	er
IDAI	HO TELECOM ALLIANCE				82-0431913	3		
Par	t I-A Complete if the org	ganization is exempt under	section 501(c				ganizatio	n.
1	Provide a description of the org	ganization's direct and indirect politic	cal campaign acti	vities in Parl	IV			
2	Political expenditures				.	\$		16,000
3	V olunteer hours					-		
Par	t I-B Complete if the org	ganization is exempt under	section 501(c	c)(3).				
1	Enter the amount of any excise	e tax incurred by the organization und	der section 4955		F	\$_		
2	Enter the amount of any excise	e tax incurred by organization manag	ers under section	4955	▶	\$_		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?						┌ Yes	┌ No
4a	Was a correction made?						☐ Yes	┌ No
b	If "Yes," describe in Part IV							
Par	t I-C Complete if the org	ganization is exempt under	section 501(c	c), except	section 50	01(c	:)(3).	
1	Enter the amount directly expe	nded by the filing organization for se	ction 527 exemp	t function ac	tivities 🕨	\$_		16,000
2	Enter the amount of the filing of exempt function activities	rganızatıon's funds contributed to ot	her organızatıons	for section 5	527 ►	\$ <u>_</u>		
3	Total exempt function expendit	tures Add lines 1 and 2 Enter here a	and on Form 1120	0-POL, line :	L7b ►	¢		16,000
4	Did the filing organization file F	Form 1120-POL for this year?				Ψ_	✓ Yes	□ No
5	organization made payments F amount of political contribution	nd employer identification number (E) For each organization listed, enter the is received that were promptly and d political action committee (PAC) If	e amount paid fro irectly delivered t	m the filing o to a separate	rganızatıon's political org	fund anıza	s Also ente ation, such a	rthe
	(a) Name	(b) Address	(c) EIN	filing org	int paid from janization's one, enter -0	- d	a) A mount of ontributions and prompt irectly deliverseparate porganization enter - (received ly and ered to a plitical If none,
See	Addıtıonal Data Table		<u> </u>				0.110	
F 5	mamus ul. Baduaki A - t N - t	the instructions for Form 990 or 990	F7					

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla					
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	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 \$500,00	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 \$1,500,000			00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	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		ganization is exempt under section 501(c)(3) and has election under section 501(h)).	NOT				
For a	ach "Vec" i	-	gh 1ı below, provide in Part IV a detailed description of the lobbying	(i	(b)			
activ		esponse to mies 1a emoag	gn II below, provide in variety a detailed description of the lobbying	Yes	No	4	4 mour	nt
1	legislati		anization attempt to influence foreign, national, state or local to influence public opinion on a legislative matter or referendum,					
а	Volunte					1		
b c		ff or management (includ dvertisements?	e compensation in expenses reported on lines 1c through 1i)?			$\frac{1}{1}$		
d	Mailings	to members, legislators,	, or the public?					
e	Publicat	ions, or published or broa	adcast statements?					
f	Grants t	o other organizations for	lobbying purposes?					
g	Direct c	ontact with legislators, th	neir staffs, government officials, or a legislative body?					
h	Rallies,	demonstrations, seminar	s, conventions, speeches, lectures, or any similar means?					
i	Otherac	tivities?						
j	Total A	dd lines 1c through 1i						
2a			the organization to be not described in section 501(c)(3)?					
b	•	·	tax incurred under section 4912					
C			tax incurred by organization managers under section 4912		•			
d			a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A		ganization is exempt under section 501(c)(4), section	501(c)(5),	or s	ectio	n
		501(c)(6).					Yes	No
1	Were su	ostantially all (90% or m	ore) dues received nondeductible by members?		Г	1	103	No
2			i-house lobbying expenditures of \$2,000 or less?		-	2		No
3		-	ry over lobbying and political expenditures from the prior year?		-	3	Yes	
Par			ganization is exempt under section 501(c)(4), section	501(c)(5),	or s	ectio	n
			ither (a) BOTH Part III-A, lines 1 and 2, are answered "					
1	Dues, as	sessments and similar a		1			16	6,364
2	·-		obying and political expenditures (do not include amounts of political					- ,
	expense	s for which the section 5	27(f) tax was paid).					
а	Current	•		2a				2,001
b		er from last year		2b				2,765
С	Total			2c				9,236
3			ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			- 6	6,546
4			unt on line 2c exceeds the amount on line 3, what portion of the excess irryover to the reasonable estimate of nondeductible lobbying and					
		expenditure next year?	myover to the reasonable estimate of hondedactible lobbying and	4			-3	7,310
5			political expenditures (see instructions)	5				
Pa	art IV	Supplemental Info	ormation					
			Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated groe 1 Also, complete this part for any additional information	up list),	Part II	[-A,I	ınes 1	and
		urn Reference	Explanation					
<u>Part</u>	I-A, Line	1 - Direct and Indirect	Campaign Contributions INDIRECT through organized political parties,	caucus	es and	PAC	s	
		oaign Activities	NONEDIRECT to individual political campaigns for Idaho House & Sena					

Part IV Supplemental Inf	ormation (continued)				
Return Reference	Explanation				
·	_				

Schedule C (Form 990 or 990EZ) 2014

Software ID: 14000265 **Software Version:** 2014v5.0 **EIN:** 82-0431913

Name: IDAHO TELECOM ALLIANCE

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's own internal funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
BRAD LITTLE FOR IDAHO	P O BOX 2664 BOISE,ID 83701		1000	
SENATOR CURT MCKENZIE	412 W FRANKLIN BOISE,ID 83702		500	
REP JANIE WARD-ENGELKING	3578 SO CROSSPOINT DR BOISE,ID 83706		500	
RUSCHE FOR HOUSE	PO Box 972 LEWISTON,ID 83501		500	
THAYN FOR SENATE	5655 hILLVIEW rOAD EMMETT,ID 83617		500	
PEARCE FOR SENATE	2001 COUNTY LINE RD NEW PLYMOUTH, ID 83655		500	
BATT FOR HOUSE	25253 GRAPHIC LANE WILDER,ID 83676		500	
YOUNGBLOOD FOR HOUSE	12612 SMITH AVE NAMPA,ID 83669		500	
MOYLE FOR HOUSE	480 N PLUMMER RD STAR,ID 83669		50	
PALMER FOR HOUSE	1524 MERIDIAN RD MERIDIAN,ID 83642		50	
HOLTZCLAW FOR HOUSE	3720 N HERITAGE VIEW AVE MERIDIAN, ID 83646			
BAYER FOR SENATE	592 E SAINT KITTS DR MERIDIAN,ID 83642		500	
MONKS FOR HOUSE	1002 W WASHINGTON DR MERIDIAN,ID 83642		500	
BRACKETT FOR SENATE	48331 THREE CR HWY ROGERSON,ID 83302		500	
PATRICK FOR SENATE	2231 E 3200 N TWIN FALLS,ID 83301			
KAUFFMAN FOR HOUSE	3791 N 2100 E FILER,ID 83328		500	
CAMERON FOR SENATE	1101 RUBY DR RUPERT,ID 83328		500	
STENNETT FOR SENATE	BOX 475 KETCHUM,ID 83340		500	
BEDKE FOR HOUSE	PO BOX 89 OAKLEY,ID 83340		500	
PACKER FOR HOUSE	PO BOX 147 MCCAMMON,ID 83250		500	
ANDRUS FOR HOUSE	6948 E OLD OREGON TRAIL R LAVA HOT SPRINTS, ID 83246		500	
THOMPSON FOR HOUSE	1739 PEGGYS LANE3 IDAHO FALLS,ID 83402		500	
LOERTSCHER FOR HOUSE	1357 BONE RD IONA,ID 83427		500	
MORTIMER FOR SENATE	3400 MERLIN DR IDAHO FALLS,ID 83404		500	
TIPPETS FOR SENATE	610 RED CANYON RD BENNINGTON,ID 83254		500	
GIBBS FOR HOUSE	632 HWY 34 GRACE,ID 83241		500	
DAVIS FOR SENATE	PO BOX 50660 IDAHO FALLS,ID 83405		500	
HILL FOR SENATE	1010 S 2ND E REXBURG,ID 83340		500	
GOEDDE FOR SENATE	1010 E MULLAN AVE UNIT 20 COEUR DALENE, ID 83814		500	
NONINI FOR SENATE	5875 W HARBOR DR COEUR DALENE, ID 83814		500	

Form 990, Schedule C, Part 1-C, Line 5

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's own internal funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
KEOUGH FOR SENATE	PO BOX 1010 SANDPOINT,ID 83864		500	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493205012145

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization IDAHO TELECOM ALLIANCE

Employer identification number 82-0431913

990 Schedule O, Supplemental Information

Return Reference	Explanation		
Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder			
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 Increases	PRIOR PERIOD ACCOUNTS PAYABLE ADJUSTMENT = \$211		