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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except 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 www irs.gov/form990

OMB No 1545-0047 Open to Public Inspection

A	For the	2014 calendar year, or tax year beginning , and ending			
В	Check if app			D Employer	identification number
	Address ch	nange COOK NATIVE AMERICAN MINISTRIES			
	Name chan	Doing business as			096776
\equiv	Initial return	Number and street (or PO box if mail is not delivered to street address)	Rom/sete	E Telephone 480-	968-9354
	Final return		TAL	700	700 7334
닏	terminated Amended re	TEMPE AZ 85281		G Gross rece	9,516,687
\equiv		r realite and address of principal officer	H(a) Is this a grou	n return for su	bordinates? Yes X No
Ш	Application	10:2:0			
		1830 WEST UNIVERSITY, SUITE 105	H(b) Are all subo		- -
		TEMPE AZ 85281	II "No," a	attach a list (see instructions)
<u></u>	Tax-exem				_
J	Website:		H(c) Group exem		
	Form of org		Year of formation 15	944	M State of legal domicile AZ
<u> </u>	art I	Summary	 -		· · · · · · · · · · · · · · · · · · ·
	1 B	rinefly describe the organization's mission or most significant activities			
Se		SEE SCHEDULE O			
Jan					
≤⊍ ∰ Activities & Governance					
30	2 C	Check this box $lacktriangle$ if the organization discontinued its operations or disposed of more than 2	25% of its net asse	ets	
ಷ	3 N	lumber of voting members of the governing body (Part VI, line 1a)		3	
ies	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)		4	_11
Ĭ	5 T	otal number of individuals employed in calendar year 2014 (Part V, line 2a)		5	6
ာ့	6 T	otal number of volunteers (estimate if necessary)		6	_0
5	7a T	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0
<u>,</u>	b _N	let unrelated business taxable income from Form 990-T, line 34		7b	0
1		RECEIVED	Prior Year		Current Year
		Contributions and grants (Part VIII, line 1h)		,881	264,768
Revenue		Program service revenue (Part VIII, line 2g)	3	,326	5,843
و د د		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	69	,873	8,570,109
_	1	A =		378	3,393
		otal revenue – add lines 8 through 11 (must equal Part VIII, column (A) sline (2)	146	,458	8,844,113
	13 G	Grants and similar amounts paid (Part IX, column (A), lines 1–3)			7,000
	1	enefits paid to or for members (Part IX, column (A), line 4)		400	101 007
es	1	dalaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	85	,137	191,807
penses	16aP	rofessional fundraising fees (Part IX, column (A), line 11e)			0
	b⊺	otal fundraising expenses (Part IX, column (D), line 25) ▶ 23,474			
ш	17 0	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		,946	264,016
	18 T	otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		,083	462,823
	19 R	Revenue less expenses Subtract line 18 from line 12		,625	8,381,290
Net Assets or Fund Balances	<u> </u>	(1) (2) (3) (4)	Beginning of Curro		End of Year
Sset	20 T	fotal assets (Part X, line 16)	1,875		9,971,896
E A	21 T	otal liabilities (Part X, line 26)		,013	25,446
		let assets or fund balances Subtract line 21 from line 20	1,851	,613	9,946,450
	art II	Signature Block			
U	nder pen	alties of perjury, I declare that I have examined this return, including accompanying schedules and statem	nents, and to the bes	st of my kno	owledge and belief, it is
	ue, correc	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer	nas any knowledge	1 11	
		Sale Curly		111	-9-13
Siç		Signature of officer		Date	
He	re	ISAAC CURLEY PRESI	DENT		
		Type or print name and title		1	
		Print/Type preparer's name Preparer's signature	Date Date	Check	If PTIN
Pai	id [STEVEN L. TAIT STEVEN L. TAIT	11/03/	15 self-em	 _
	parer	Firm's name WALKER & ARMSTRONG, LLP	Fir	m's EIN	86-0257194
Use	e Only	3838 N CENTRAL AVE STE 1700			
		Firm's address PHOENIX, AZ 85012-1994	Ph	one no _	602-230-1040
Ma	y the IRS	S discuss this return with the preparer shown above? (see instructions)			X Yes No
		ork Reduction Act Notice, see the separate instructions.			Form 990 (2014)
DAA	١.		(.	129	Q

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2_	Λ	
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		
4	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		
J	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-		
٠	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	<u> </u>		
Ĭ	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		X
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	x	
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	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X	
d	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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
_	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	fundraising, business, investment, and program service activities outside the United States, or aggregate	44.		v
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	45		v
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
10	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		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	''-		
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
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		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_

			Yes	No
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	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	İ	1	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated		ļ	
	employees? If "Yes," complete Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	ļ		
	\$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	-	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	i		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a			ļ	
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		İ	
	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		<u>X</u> _
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			37
	disqualified persons? If "Yes," complete Schedule L, Part II	26		<u>X</u> _
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			77
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	20-	1	v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	206	,	x
_	Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28b		
С	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	-	$\frac{\mathbf{x}}{\mathbf{x}}$
29 30	Did the organization receive more than \$25,000 in non-cash contributions in Tes, complete scriedule in	25	1	
30	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
	Part 1	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-		
-	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		
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		<u> </u>
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2014)

Pa	art 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			
			Yes	No
1a		15		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	<u>1c</u>		X
2a				
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	6		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<u>2b</u>	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u>3a</u>		<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<u>3b</u>		
4a				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			₹.
	account)?	<u>4a</u>		X
D	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1 1	x _
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5a</u> 5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a				_
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	ļ	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<u>7b</u>		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			•
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	\vdash	$\frac{\mathbf{x}}{\mathbf{x}}$
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 and the organization file Form 8899 are contributions.	7f	-	X
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	· · · · · · · · · · · · · · · · · · ·		$\frac{\mathbf{x}}{\mathbf{x}}$
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	71 om 1030-C		
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
10-	against amounts due or received from them.) Section 4047(a)(4) and except the first form 10412			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
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?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u> </u>	
DAA		Fo	ա 990	(2014)

Form 990 (2014) COOK NATIVE AMERICAN MINISTRIES 86-0096776 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 11 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 11 1b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 $\overline{\mathbf{x}}$ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c describe in Schedule O how this was done 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure ΑZ List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website X Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records

1830 WEST UNIVERSITY, SUITE 105

AZ 85281

480-968-9354

TEMPE

THE ORGANIZATION

orm 990 (2014)	COOK	NATIVE	AMERICAN	MINISTRIES	86-0096776	Page
					-	

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

Check if Schedule O contains a response or note to any line in this Part VII

Section A.	Officers, Di	irectors, Truste	es, Key Emp	oloyees, and Hig	ghest Comp	ensated Emp	oloyees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees; officers; key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) Average hours per week (list any	bo	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1) GARY METOXEN									-	
	1.00									
CHAIRPERSON	0.00	X		X				42,000	0	0
(2) RONALD LUNDEEN										
	1.00									_
MEMBER	0.00	X				\sqcup		22,500	0	0
(3) BETTY WESTON										
	1.00							_		_
CORP SECRETARY	0.00	X		X				0	0	0
(4) MICHAEL ALLISON										
	1.00							_		_
TREASURER	0.00	X		X		\sqcup		0	0	0
(5) MICHELLE HALE				1						
	1.00									_
VICE CHAIRPERSON	0.00	X		X				0	0	0
(6) SUSAN WARE-LARSO										
	1.00									
MEMBER	0.00	X				$\sqcup \bot$		0	0	0
(7) EVELINE STEELE										
	1.00				l			_		
MEMBER	0.00	X		_		<u> </u>		0	0	0
(8) ROSITA TIPPECON										
	1.00	l			}					_
MEMBER	0.00	X		ļ				0	0	0
(9) SALLIE CUARESMA										
	1.00	l								_
MEMBER	0.00	X	<u> </u>	┞		├ ──┼		0	0	0
(10) GARY LONG										
	1.00							_		_
MEMBER	0.00	X		₩	_	$\vdash \vdash$		0	0	0
(11) RANDEL BOHANON	1									
15155	1.00							_	^	^
DAA	0.00	X		<u> </u>	<u> </u>			0	0	O Form 990 (2014)

(A) Name and title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	rson ı	than cost both	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount o other compensati from the		of
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		organizat and relat organizati	tion ted
(12) SUANNE WARE-DIA												-
EXECUTIVE DIRECTOR	40.00			x				34,635	o			0
(13) ISAAC CURLEY		1						0.7,000				
	40.00							16 100				0
EXECUTIVE DIRECTOR (14) JEROME CLARKE	0.00	╁		X				16,108	0	 		
(14)02110122 022212	40.00											
EXECUTIVE DIRECTOR	0.00			X	_			9,472	0			0
(15)												
(16)												
(17)												
(18)					_							
(10)												
(19)												
1b Sub-total		.—	L	<u> </u>				124,715				
c Total from continuation she d Total (add lines 1b and 1c)	ets to Part VII,	Secti	on A	4				124,715		 	 -	
2 Total number of individuals (in				thos	e lıs	ted a	bov		\$100,000 of	I		
reportable compensation from	the organizatio	n ▶	0									Yes No
 Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization. 	' complete Sche e 1a, is the sum	dule of re	J for	suci able	h inc	lividu ipens	ial satic	on and other compensation	from the		3	х
individual 5 Did any person listed on line 1 for services rendered to the or									· ındıvıdual		5	X
Section B. Independent Contracto	ors											
Complete this table for your five compensation from the organical compensation from the organical compensation.	zation Report of							dar year ending with or with	nin the organization's tax ye	ear		(C)
Name and	(A) business address							Descrip	(B) tion of services		Com	(C) ppensation
	<u>.</u>											
							-					
2 Total number of independent received more than \$100,000	contractors (incl of compensatio	uding n fror	but the	not e org	lımıt anız	ed to	tho	se listed above) who	0_			000
DAA											Form	990 (2014)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue (C) Unrelated exempt function business excluded from tax under sections revenue revenue 512-514 1a 1a Federated campaigns fts, Grant **b** Membership dues 1b 1c c Fundraising events 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 264,768 g Noncash contributions included in lines 1a-1f 264,768 h Total. Add lines 1a-1f Program Service Revenue Busn. Code 5,843 5,843 2a TUITION AND STUDENT FEES þ C d f All other program service revenue 5,843 \triangleright g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 492,683 492,683 Income from investment of tax-exempt bond proceeds ▶ Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental exps Rental inc or (loss) Net rental income or (loss) 7a Gross amount from (ii) Other (i) Securities sales of assets 8,750,000 other than inventor **b** Less cost or other 672,574 basis & sales exps 8,077,426 c Gain or (loss) 8,077,426 8,077,426 d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses \blacktriangleright c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses ▶ c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold Þ c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 3,393 3,393 11a MISCELLANEOUS b C d All other revenue

3,393

8,086,662

8,844,113

Total. Add lines 11a-11d

Total revenue. See instructions

Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respo			elete column (A)	
	ot include amounts reported on lines 6b,	(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	7,000	7,000		
2	Grants and other assistance to domestic				
	ındıvıduals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members		i		<u></u>
5	Compensation of current officers, directors,	124,715	1,371	121,842	1,502
_	trustees, and key employees	124,713	1,3/1	121,042	1,302
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			,	
7	persons described in section 4958(c)(3)(B)	55,085	16,222	29,526	9,337
7 8	Other salaries and wages Pension plan accruals and contributions (include	33,003	10,222	25,520	3,331
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	6,233		6,233	
10	Payroll taxes	5,774		5,774	
11	Fees for services (non-employees)	<u> </u>		3,,,,	
a	Management				
b	Legal	95,575		83,758	11,817
C	Accounting	33,313			
4	Lobbying				
u _	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column			-	
9	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	461	143		318
13	Office expenses	6,379	285	6,047	47
14	Information technology	5,575			
15	Royalties				
16	Occupancy	20,280		20,280	
17	Travel				· · · · · · · · · · · · · · · · · · ·
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		-		
20	Interest	1,787		1,787	
21	Payments to affiliates	,			
22	Depreciation, depletion, and amortization	7,327		7,327	
23	Insurance	3,140		3,140	
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	EDUCATION PORGRAMS	40,014	40,014		
b	GRANTS FUNDED	23,321	23,321		
С	BOARD OF TRUSTEES EXPENSE	20,998	61	20,937	
d	TELEPHONE & UTILITIES	15,849		15,849	
е	All other expenses	28,885		28,432	453
25	Total functional expenses. Add lines 1 through 24e	462,823	88,417	350,932	23,474
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				
DAA	following SOP 98-2 (ASC 958-720)	<u> </u>		<u></u>	Form 990 (2014)

86-0096776 Form 990 (20.14) COOK NATIVE AMERICAN MINISTRIES Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 510,235 436,623 Cash-non-interest bearing 14,196 2 565,663 Savings and temporary cash investments 2 Pledges and grants receivable, net 9,073 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 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 6 7 Notes and loans receivable, net 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 39,979 other basis Complete Part VI of Schedule D 10a 10b 31,576 413,318 8,403 10c b Less accumulated depreciation 171,746 188,540 Investments—publicly traded securities 11 11 12 12 Investments—other securities See Part IV, line 11 8,554,745 531,908 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 14 217,922 225,150 15 Other assets See Part IV, line 11 15 1,875,626 9,971,896 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 12,245 4,972 17 Accounts payable and accrued expenses 17 18 Grants payable 18 10,343 9,600 Deferred revenue 19 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors. 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 8,698 3,601 24 Unsecured notes and loans payable to unrelated third parties 24 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 D 25 24,013 26 25,446 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 918,523 9,060,846 27 27 Unrestricted net assets 450,444 416,725 28 Temporarily restricted net assets 28 482,646 468,879 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here

> 9,971,896 Form 990 (2014)

9,946,450

30

31 32

33

1,851,613

1,875,626

30

31

32

33

complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3a

X

Schedule O

the Single Audit Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Attaci to Form 990 of Form 990-EZ.

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

Employer identification number

			COOK NATIVE	AMERICAN MINIST	<u>RIES</u>		86-009	6776						
P	art I	Reas	on for Public Charity	Status (All organizations	must co	omplete	this part.) See instructio	ns.						
he	orga	nızatıon is not	a private foundation because	e it is: (For lines 1 through 11, o	check only	y one box)							
1		A church, coi	nvention of churches, or ass	ociation of churches described	ın sectioi	170(b)(1)(A)(i).							
2		A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	П			ce organization described in sec	ction 170	(b)(1)(A)(i	iii).							
4	П			d in conjunction with a hospital of				ospital's name,						
	ш	city, and stat	- ·	•				·						
5		-		of a college or university owned	or operat	ed by a go	overnmental unit described in							
_	ш	•	b)(1)(A)(iv). (Complete Part	•		,								
6	П			overnmental unit described in s	ection 17	70/h)/1\/A	Yv)							
7	X		•	substantial part of its support fro			., .	•						
•		Ü	section 170(b)(1)(A)(vi). (C		om a gov	Jii ii ii Cintai	diff of from the general public	,						
					+ 11 A									
8	A community trust described in section 170(b)(1)(A)(vi) . (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross													
9	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its													
	support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)													
		-	=											
10	Н	•	•	exclusively to test for public safe	-		• • • •							
11		=	-	exclusively for the benefit of, to										
				ions described in section 509(a				Check						
			=	cribes the type of supporting org										
а				ed, supervised, or controlled by		_	() , , ,							
	the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting													
		organization	You must complete Part I'	V, Sections A and B.										
b		Type II. A su	pporting organization superv	rised or controlled in connection	with its s	upported	organization(s), by having							
		control or ma	nagement of the supporting	organization vested in the same	e persons	that cont	rol or manage the supported							
	_	organization(s) You must complete Par	t IV, Sections A and C.										
C		Type III func	tionally integrated. A supp	orting organization operated in o	connectio	n with, an	d functionally integrated with,							
		its supported	organization(s) (see instruc	tions) You must complete Par	rt IV, Sec	tions A, C), and E.							
d		Type III non-	functionally integrated. A	supporting organization operate	d in conn	ection wit	h its supported organization(s)	1						
		that is not fur	nctionally integrated. The org	janization generally must satisfy	y a distrib	ution requ	irement and an attentiveness							
		requirement ((see instructions) You must	t complete Part IV, Sections A	and D, a	ind Part \	<i>l</i> .							
е		Check this bo	ox if the organization receive	d a written determination from t	he IRS th	at it is a T	ype I, Type II, Type III							
		functionally in	ntegrated, or Type III non-fur	nctionally integrated supporting	organizat	ion								
f	Ent	ter the number	r of supported organizations											
g			ving information about the su	ipported organization(s)										
(e of supported	(II) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of						
	org	janization		(described on lines 1–9 above or IRC section		ur governing ment?	support (see instructions)	other support (see instructions)						
				(see instructions))	4000	THE THE	madacaona)	madacaona)						
					Yes	No	<u>-</u>							
A)														
			<u> </u>		ļ									
B)														
		 			<u> </u>		· · · · · · · · · · · · · · · · · · ·							
C)														
ים					1									
D)														
E)					<u> </u>									
-,					<u> </u>									
_														

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	337,645	296,747	477,414	72,881	264,768	1,449,455
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	337,645	296,747	477,414	72,881	264,768	1,449,455
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						1,449,455
	tion B. Total Support	<u></u>					
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	337,645	296,747	477,414	72,881	264,768	1,449,455
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	249,495	79,770	80,489	69,873	492,683	972,310
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)	18,304	19,537	7,692	378	3,393	49,304
11	Total support. Add lines 7 through 10	1					2,471,069
12	Gross receipts from related activities, etc	•				12	9,236
13	First five years. If the Form 990 is for the		second, third, four	th, or fifth tax year	as a section 501(c)(3)	
800	organization, check this box and stop her tion C. Computation of Public Su		300				<u> </u>
				(6)		144	50.669/
14 15	Public support percentage for 2014 (line 6 Public support percentage from 2013 Scho			(1))		14	58.66% 73.30%
	33 1/3% support test—2014. If the organ	· ·		3 and line 14 is 33	3 1/3% or more, ch		73.30 /6
IVA	box and stop here . The organization quali				7 170 70 01 111010, 01	ICON UIIS	▶ X
h	33 1/3% support test—2013. If the organ	• •			is 33 1/3% or mo	re	,
_	check this box and stop here . The organiz						▶ □
17a	10%-facts-and-circumstances test—201	•		•	, or 16b, and line	14 is	
	10% or more, and if the organization meet Part VI how the organization meets the "fa	s the "facts-and-circ	cumstances" test, o	check this box and	stop here. Expla	ın ın	. \Box
b	organization 10%-facts-and-circumstances test—201 15 is 10% or more, and if the organization Explain in Part VI how the organization me	meets the "facts-an	id-circumstances"	test, check this bo	x and stop here .		▶ [_]
18	supported organization Private foundation. If the organization did instructions	i not check a box or	n line 13, 16a, 16b	, 17a, or 17b, chec	k this box and see	e	▶ □
							

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

1 Gifts, grants, fees received grants") 2 Gross receipt sold or service furnished in a organization's 3 Gross receipt unrelated trace 4 Tax revenue organization to or expension to or expension or expension or the value of furnished by organization or the color of t	fiscal year beginning in) contributions, and membership (Do not include any "unusual	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(2) 2044	
fees received grants ") 2 Gross receipt sold or service furnished in a organization's 3 Gross receipt unrelated trace 4 Tax revenue organization to or expension to organization to organization organization to organization to organization to organization organization to organization to organization organization to organization organization to organization organization organization to organization organ	contributions, and membership I (Do not include any "unusual			(0) 20 12	(u) 2013	(e) 2014	(f) Total
sold or service furnished in a organization's 3 Gross receipt unrelated trace 4 Tax revenue organization to or expension	1						
unrelated trac Tax revenue organization to or expend The value of furnished by organization Total. Add Amounts in received from persons that or 1% of the a C Add lines 73 Public sup line 6) Section B. To	ts from admissions, merchandise tes performed, or facilities any activity that is related to the s tax-exempt purpose			_			
organization to or expension to organization organization of Total. Add Total. Add Total. Add Total. Add Total. Add Inception of the action of the a	ts from activities that are not an de or business under section 513	,					
furnished by organization 6 Total. Add 7a Amounts in received from persons that or 1% of the acceptable conditions and the conditions of	es levied for the n's benefit and either paid ded on its behalf						
7a Amounts in received from the persons that the control of the co	of services or facilities y a governmental unit to the n without charge						
received from persons that or 1% of the a c Add lines 7: 8 Public sup line 6) Section B. To	lines 1 through 5						
received from persons that or or 1% of the a c Add lines 7: 8 Public sup line 6) Section B. To	cluded on lines 1, 2, and 3 om disqualified persons						
8 Public sup line 6) Section B. To	uded on lines 2 and 3 n other than disqualified exceed the greater of \$5,000 amount on line 13 for the year						
Section B. To	a and 7b						
	port (Subtract line 7c from						
Calendar year (or f							
	fiscal year beginning in) 🕨 📗	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts fro	om line 6						
payments red	e from interest, dividends, ceived on securities loans, rents, income from similar sources						
section 511	ousiness taxable income (less taxes) from businesses ter June 30, 1975						
c Add lines 1	0a and 10b						
activities not	rom unrelated business included in line 10b, whether siness is regularly carried on				1		
	ne. Do not include gain or ne sale of capital assets Part VI)						
13 Total supp and 12)	ort. (Add lines 9, 10c, 11,						
	ں ears . If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax ye	ar as a section 501	I(c)(3)	
	n, check this box and stop here						>
	omputation of Public Su		_ -	<u> </u>			
	oort percentage for 2014 (line 8,	. , ,	•	nn (f))		15	
	ort percentage from 2013 Sche					16	%
	omputation of Investme					T T	
	income percentage for 2014 (li	="	·	i, column (f))		17	<u>%</u>
	income percentage from 2013					<u> 18 </u>	%_
	ipport tests—2014. If the organ						
	ore than 33 1/3%, check this bo ipport tests—2013. If the orgal	=	=		-		
	ot more than 33 1/3%, check th						▶ □
	indation. If the organization did						

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section	Δ	Δ	ī	Suppor	tina Or	ganizations
Jechon	л.	_		SUDDOL		Jainzanviis

Sect	ion A. All Supporting Organizations			
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c	***************************************	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
_	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action	_		
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	5b		
_	designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
с 6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	30		
Ü	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
-	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent			
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	if "Yes," complete Part I of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described]]		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)	} [
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			
	organizations)? If "Yes," answer (b) below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings)	10b		

Par	t IV Supporting Organizations (continued)			
•		······	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		ļ
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations			r
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			ŀ
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Cooti	supervised, or controlled the supporting organization	2		L
Secu	on C. Type II Supporting Organizations		V	NI.
		r	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Secti	the supported organization(s) on D. All Type III Supporting Organizations	1		
0000	on B. Air Type in oupporting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	110
•	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	'		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	:	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	,		·
а	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instruction)	iions)		
2 /	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	_		
	trustees of each of the supported organizations? Provide details in Part VI .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

2

3

4

5

•	Distributable Amount. Subtract line 5 from line 4, unless subject to		1	
em	ergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-integrated 1	ype III	supporting organization (s	ee
	instructions)			

Schedule A (Form 990 or 990-EZ) 2014

2 Enter 85% of line 1

Enter greater of line 2 or line 3

Income tax imposed in prior year

Minimum asset amount for prior year (from Section B, line 8, Column A)

Sched Par	ule A (Form 990 or 990-EZ) 2014 COOK NATIVE AMERIC			776 Page 7
	t V Type III Non-Functionally Integrated 509(a)(3) Son D - Distributions	supporting Organiza	tions (continued)	Current Year
1	Amounts paid to supported organizations to accomplish exempt purpor		_	Current rear
	Amounts paid to perform activity that directly furthers exempt purposes			
_	organizations, in excess of income from activity	s or supported		
3	Administrative expenses paid to accomplish exempt purposes of supply	orted organizations		
4	Amounts paid to acquire exempt-use assets	orted organizations		
5	Qualified set-aside amounts (prior IRS approval required)		···	
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6.	<u> </u>		
, 8	Distributions to attentive supported organizations to which the organizations	ation is responsive		
·	(provide details in Part VI) See instructions	ation is responsive		
9	Distributable amount for 2014 from Section C, line 6		· · · · · · · · · · · · · · · · · · ·	
10	Line 8 amount divided by Line 9 amount			
10	Line o amount divided by Line 3 amount	(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014		-	
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014			
а				
b				
С				
d				
е	From 2013 .			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section			
	D, line 7. \$			
а	Applied to underdistributions of prior years		•	
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if			
	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions)			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7			
a				
b				
C				

Schedule A (Form 990 or 990-EZ) 2014

d Excess from 2013 .
e Excess from 2014

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions.)

PART II, LINE 10 - OTHER INCOME DETAIL

CONFERENCES, PROJECTS & MISC. INCOME \$

49,304

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

Employer identification number

OMB No 1545-0047

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

C	OOK NATIVE AMERICAN MINISTRIES		86-0	096776
	ert I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or A	ccount	S.
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 6.		
		(a) Donor advised funds	<u>(b</u>) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised		
	funds are the organization's property, subject to the organization's exclusive	usive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	_		
	only for charitable purposes and not for the benefit of the donor or dono			
	conferring impermissible private benefit?	, , ,		Yes No
Pa	ert II Conservation Easements.			
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization (check	all that apply)		
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically impo	rtant land	area
	Protection of natural habitat	Preservation of a certified historic	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conser	rvation contribution in the form of a conser	vation	
	easement on the last day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure incl	uded ın (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/6	06, and not on a		
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organizati	on during	the
	tax year ▶			
4	Number of states where property subject to conservation easement is le	ocated ▶		
5	Does the organization have a written policy regarding the periodic moni	toring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	ing conservation easements during the ye	ear	
	>			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of	conservation easements during the year		
	▶ \$			•
8	Does each conservation easement reported on line 2(d) above satisfy t	he requirements of section 170(h)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation easeme	ents in its revenue and expense statement	t, and	
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that de	escribes t	ne
	organization's accounting for conservation easements			
Pa	art III Organizations Maintaining Collections of Art,		Similar	Assets.
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n	•		neet
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance of	
	public service, provide, in Part XIII, the text of the footnote to its financial			
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to	•		
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	rance of	
	public service, provide the following amounts relating to these items			
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		>	\$
2	If the organization received or held works of art, historical treasures, or		vide the	
	following amounts required to be reported under SFAS 116 (ASC 958)	relating to these items:		
а	Revenue included in Form 990, Part VIII, line 1		•	\$
b	Assets included in Form 990, Part X			\$

	Yes	No
3a(i)		X
3a(ii)		X
3b		

	d, Buildings, and E polete if the organiza	equipment. Ation answered "Yes" to Fo	orm 990. Part IV. line 11	a. See Form 990. Par	t X. line 10.
	cription of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land					
b Buildings					
c Leasehold impr	rovements				
d Equipment			39,979	31,576	8,403
e Other					
Total. Add lines 1a th	rough 1e (Column (d) m	ust equal Form 990, Part X, colu	umn (B), line 10c)	•	8,403

	Form 990) 2014 COOK NATIVE AMERICAN	MINISTRIES	86-0096776	Page
Part VII	Investments—Other Securities.	Farm 000 Dart IV line	44h Caa Farra 000 Dawl V	lina 40
	Complete if the organization answered "Yes" to			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1) Financial				
	eld equity interests			
(3) Other	ord oquity microsity			··-
(A)				
(B)		-		
(c)				
(D)				
(E)				
(F)				
(G)				
(H)	40.			
Part VIII	nn (b) must equal Form 990, Part X, col (B) line 12) ► Investments—Program Related.			
Part VIII	Complete if the organization answered "Yes" to	Form 900 Part IV line	11c See Form 000 Part Y	line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation	
	(4,	(-,	Cost or end-of-year market	
(1) PROG	RAM RELATED INVESTMENTS	8,554,745		
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				
(9)	on (h) must asual Form 000 Part V and (P) line 12 \	8,554,745		
Part IX	nn (b) must equal Form 990, Part X, col_(B) line 13) ► Other Assets.	0,334,743		
* GIL IX	Complete if the organization answered "Yes" to	Form 990 Part IV line	11d See Form 990 Part X	line 15
	(a) Description	1 01111 000, 1 011 11, 11110		(b) Book value
(1)				· · · ·
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u>				
(8)				
(9)	nn (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities.			
1 41131	Complete if the organization answered "Yes" to	Form 990. Part IV. line	11e or 11f. See Form 990. P	art X.
	line 25.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
1.	(a) Description of liability	(b) Book value		
(1) Federa	I income taxes			
(2)				
(3)				
(4)				
(5)				
(6)		<u> </u>		
(7)				
(8)		+		
(9)	nn (b) must equal Form 990, Part X, col (B) line 25) ▶	+		
	r uncertain tax positions. In Part XIII, provide the text of the foo		nancial statements that reports the	
•	s liability for uncertain tax positions under FIN 48 (ASC 740)	-	•	II
	1			

Pa	Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Pa	irt IV, I	ine 12a.		
1	Total revenue, gains, and other support per audited financial statements		-	1	8,557,660
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on investments	2a	-286,453		
þ	Donated services and use of facilities	2b			
C	Recovenes of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d		i	2e	<u>-286,453</u>
3	Subtract line 2e from line 1			3	<u>8,844,113</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	8,844,113
Pa	art XII Reconciliation of Expenses per Audited Financial Statem			Return	•
	Complete if the organization answered "Yes" to Form 990, Pa	ırt IV, I	ine 12a.		160 000
1	Total expenses and losses per audited financial statements			1	462,823
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	. 1		3	462,823
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b	_		
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	462,823

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Open to Public OMB No 1545-0047 201

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

COOK NATIVE AMERICAN MINISTRIES

Employer identification number 86-0096776

Inspection

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	Yes	anizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, re than \$5,000. Part II can be duplicated if additional space is needed.	(h) Purpose of grant or assistance									
	T T	inization answere eeded.	(g) Description of non-cash assistance									
	s or assistance, and	plete if the orga ional space is n	(f) Method of valuation (book, FMV, appraisal, other)									
	ligibility for the grant	vernments. Com uplicated if addit	(e) Amount of non- cash assistance									
	e grants or assistance, the grantees' e of grant funds in the United States	nd Domestic Gor 0. Part II can be d	(d) Amount of cash grant		7,000							
	ants or assis rant funds ii	zations a nan \$5,00	(c) IRC section if applicable									
Assistance	ne amount of the grance? Intering the use of g	mestic Organia eceived more the	(p) EIN		23-6393377							
General Information on Grants and Assistance	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part IV can be duplicated if additional space is needed.	(a) Name and address of organization or government	RESBYTERY COMMITTEE ON 10TH AVE	AK 99501							
Part i	1 Does the so	Part II	-	(1) YUKON P. 6161 W.	ANCHORAGE	(2)	(3)	(4)	(2)	(9)	(2)	(8)

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) (2014)

7

6

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

Part III

	י מון זון סמולה ומינוסמוסמין ווי ממינוסווים וויים ו	ימו ספמס וא ווכפמסמ.				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
,						
_	:					
7						
က						
4						
2						
9						
7						
Part IV	Supplemental Information Provide the information required in Part II line 2. Part III column (h) and any other additional information	ide the information rec	inited in Part I line	2 Part III column (b)	and any other additional	nformation

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

- PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

PART I, LINE 2

FUNDS ARE DISBURSED IN LUMP SUM IN JANUARY. CNAM BOARD, STAFF OR SELECT

VOLUNTEERS MAY MAKE ONSITE VISITS TO THE GRANTEE TO MEASURE EFFECTIVENESS

THE EXECUTIVE AND PROGRESS OF FUNDED MINISTRIES AND PROJECTS.

DIRECTOR MONITORS FUNDED PROJECTS BY PHONE, EMAIL AND WRITTEN

CORRESPONDENCE WITH GRANTEES ON A QUARTERLY BASIS THROUGHOUT THE YEAR.

GRANTEES SUBMIT FINANICAL AND NARRATIVE REPORTS BY DECEMBER OR AT THE

CONCLUSION OF THE PROJECT WHICHEVER COMES FIRST

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

Name of the organization

Employer identification number 86-0096776

COOK NATIVE AMERICAN MINISTRIES

FORM 990 - ORGANIZATION'S MISSION

OUR MISSION IS TO EQUIP LEADERS TO BETTER SERVE THEIR CHURCHES AND COMMUNITITES BOTH IN NATIVE AMERICAN AND NON-NATIVE AMERICAN COMMUNITITES ACROSS THE COUNTRY THROUGH THE COMMISSION LAY PASTOR (CLP) PROGRAM AND THE SUMMER AND WINTER SESSIONS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 A BOARD MEMBER WILL REVIEW THE RETURN BEFORE AN AUTHORIZED MEMBER SIGNS THE RETURN.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY OBTAINING WRITTEN COMPLIANCE STATEMENTS AND PERIODIC REVIEW OF TRANSACTIONS THAT COULD LEAD TO CONFLICT OF INTEREST.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE BOARD OF DIRECTORS DETERMINE THE SALARY OF THE TOP OFFICIALS BY REVIEWING JOB DUTIES AND RESPONSIBILTIES AND COMPARING TO INDUSTRY STANDARDS FOR SIMILIAR POSITIONS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION AVAILABLE UPON WRITTEN REQUEST TO THE ORGANIZATION.