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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2017

Open to Public Inspection

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](#)

A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

% STACI FIESER

Doing business as

Number and street (or P O box if mail is not delivered to street address)Room/suite

PO BOX 1464

City or town, state or province, country, and ZIP or foreign postal code

DILLINGHAM, AK 99576

F Name and address of principal officer

NORMAN VAN VACTOR

PO BOX 1464

DILLINGHAM, AK 99576

H(a) Is this a group return for subordinates?

☐ Yes

☒ No

H(b) Are all subordinates included?

☐ Yes

☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number

92-0142567

E Telephone number

(907) 842-4370

G Gross receipts \$ 77,887,840

I Tax-exempt status

☐ 501(c)(3)

☒ 501(c) (4) ◀ (insert no)

☐ 4947(a)(1) or

☐ 527

J Website: ▶ WWW BBEDC COM

K Form of organization

☒ Corporation

☐ Trust

☐ Association

☐ Other ▶

L Year of formation 1992

M State of legal domicile AK

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

TO PROMOTE ECONOMIC GROWTH AND OPPORTUNITIES FOR RESIDENTS OF ITS MEMBER COMMUNITIES THROUGH SUSTAINABLE USE OF THE BERING SEA RESOURCES

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Prior Year

Current Year

8,0008,000

18,057,65524,731,120

-7,162,9094,062,692

187,182677,873

11,089,92829,479,685

14,089,67112,622,307

00

2,763,1252,683,538

00

-819,3446,094,472

16,033,45221,400,317

-4,943,5248,079,368

Beginning of Current YearEnd of Year

267,366,231269,695,811

28,920,23219,348,520

238,445,999250,347,291

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2018-11-14

Date

STACI FIESER CFO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

NICK WHITMORE

Preparer's signature

NICK WHITMORE

Date

Check ☐ if self-employed

PTIN

P01488898

Firm's name ▶ KPMG LLP

Firm's EIN ▶

Firm's address ▶ 701 W8TH AVE STE 600

Phone no (907) 265-1200

Anchorage, AK 99501

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

☒ Yes

☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2017)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

IT IS THE PURPOSE OF THE BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION TO PROMOTE ECONOMIC GROWTH AND OPPORTUNITIES FOR RESIDENTS OF ITS MEMBER COMMUNITIES THROUGH SUSTAINABLE USE OF THE BERING SEA RESOURCES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code)	(Expenses \$	8,120,202	including grants of \$	8,120,202)	(Revenue \$)
See Additional Data						

4b	(Code)	(Expenses \$	2,307,480	including grants of \$	1,060,861)	(Revenue \$ 656,433)
See Additional Data						

4c	(Code)	(Expenses \$	1,945,076	including grants of \$	1,307,145)	(Revenue \$)
See Additional Data						

See Additional Data Table

4d	Other program services (Describe in Schedule O)					
	(Expenses \$	3,826,152	including grants of \$	2,134,099)	(Revenue \$	)

4e	Total program service expenses ▶	16,198,910
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	No
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	No
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? <i>If "Yes," complete Schedule C, Part II</i>	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	No
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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
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? <i>If "Yes," complete Schedule D, Part IV</i> 	9 Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> 	11a Yes	
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? <i>If "Yes," complete Schedule D, Part VII</i> 	11b	No
c 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 Yes	
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> 	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 	11e Yes	
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)? <i>If "Yes," complete Schedule D, Part X</i> 	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part III</i>	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes
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	Yes
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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	Yes
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) a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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	Yes
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
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	Yes

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	83	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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.	72	
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).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	Yes	
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)?		No
b	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).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
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	
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?	8	
9a	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		
a	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.	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 against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
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	
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.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

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 if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?		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?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	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.		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	Yes	
13	Did the organization have a written whistleblower policy?		No
14	Did the organization have a written document retention and destruction policy?		No
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?		
a	The organization's CEO, Executive Director, or top management official.	Yes	
b	Other officers or key employees of the organization.	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	Yes	
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?	Yes	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: **▶**

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **▶** STACI FIESER 411 FIRST AVENUE EAST DILLINGHAM, AK 995761464 (907) 842-4370

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, 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) Average hours per week (list any hours for related organizations below dotted line)	(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 (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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) H ROBIN SAMUELSEN JR CHAIRMAN OF THE BOARD	2 5 0 4	X						34,668	4,832	0
(2) FRED T ANGASAN SR VICE CHAIRMAN OF THE BOARD	1 7 0 1	X						18,084	916	0
(3) HATTIE ALBECKER SECRETARY OF THE BOARD	1 9 0 1	X						20,584	916	0
(4) ROBERT HEYANO TREASURER OF THE BOARD	2 0 0 1	X						21,084	916	0
(5) LOUIE ALAKAYAK SR BOARD MEMBER	1 0 0 0	X						7,500	0	0
(6) MARGIE ALOYSIUS BOARD MEMBER	0 7 0 0	X						5,000	0	0
(7) RICHARD ALTO BOARD MEMBER	0 3 0 0	X						2,000	0	0
(8) MARK ANGASAN BOARD MEMBER	0 9 0 0	X						6,000	0	0
(9) BETTY GARDINER-WASSILY BOARD MEMBER	0 7 0 0	X						4,500	0	0
(10) KENNETH JENSEN BOARD MEMBER	0 8 0 3	X						5,750	3,750	0
(11) MARY ANN JOHNSON BOARD MEMBER	1 2 0 4	X						10,084	4,416	0
(12) GERDA KOSBRUK BOARD MEMBER	1 0 0 2	X						12,055	1,916	0
(13) VICTOR SEYBERT BOARD MEMBER	1 6 0 1	X						15,584	916	0
(14) FRITZ SHARP BOARD MEMBER	0 7 0 3	X						5,250	3,250	0
(15) JIMMY COOPCHIAK BOARD MEMBER	0 9 0 0	X						5,500	0	0
(16) ALEXANDER TALLEKPALEK BOARD MEMBER	1 0 0 0	X						5,500	0	0
(17) PAUL HANSEN SR BOARD MEMBER	0 8 0 3	X						4,500	4,000	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 (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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) RALPH ANGASAN III BOARD ALTERNATE	0 2 0 0	X						1,000	0	0
(19) JOHN CHRISTENSEN JR BOARD ALTERNATE	0 2 0 0	X						1,000	0	0
(20) WILLIAM YOST BOARD ALTERNATE	0 2 0 0	X						1,000	0	0
(21) NORMAN VAN VACTOR PRESIDENT/CEO	40 0 0 0			X				236,626	0	26,204
(22) HELEN SMEATON CHIEF OPERATING OFFICER	40 0 0 0			X				115,976	0	38,808
(23) STACI FIESER CHIEF FINANCIAL OFFICER	40 0 0 0			X				116,911	0	64,388
(24) CHRIS NAPOLI CHIEF ADMINISTRATIVE OFFICER	40 0 0 0			X				98,726	0	39,276
(25) PAUL PEYTON SEAFOOD INVESTMENT OFFICER	40 0 0 0			X				173,803	0	44,428
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								928,685	25,828	213,104

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶ 6**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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	Yes	
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		No

Section B. Independent Contractors

1 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
KPMG LLP, 701 W 8TH AVENUE SUITE 600 ANCHORAGE, AK 995013467	PROF SERVICES	194,147
ADAMS AND REESE LLP, PO BOX 2153 DEPT 5208 BIRMINGHAM, AL 35287	PROF SERVICES	102,004
ZACHARY SCOTT COMPANY, 1200 FIFTH AVENUE SUITE 1500 SEATTLE, WA 98101	PROF SERVICES	100,718
AMAK TOWING COMPANY INC, PO BOX 7655 KETCHIKAN, AK 99901	TOWING SERVICES	167,204

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 **▶ 4**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a				
	b Membership dues . . .	1b				
	c Fundraising events . . .	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	8,000			
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f \$ _____					
	h Total. Add lines 1a-1f ▶			8,000		
Program Service Revenue			Business Code			
	2a CDQ ROYALTIES		110000	13,894,290		13,894,290
	b IFQ ROYALTIES		110000	2,454,543		2,454,543
	c EQUITY IN EARNINGS OF UNCON AFFILIATES		110000	8,060,021	1,253,304	6,806,717
	d FISHING RIGHTS INVESTMENT INCOME		110000	322,266	322,266	
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶			24,731,120		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		4,307,928			4,307,928
	4 Income from investment of tax-exempt bond proceeds ▶		0			
	5 Royalties ▶		0			
			(i) Real	(ii) Personal		
	6a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)	0	0			
	d Net rental income or (loss) ▶			0		
			(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory		48,162,919			
	b Less cost or other basis and sales expenses		48,408,155			
	c Gain or (loss)		-245,236			
	d Net gain or (loss) ▶			-245,236		-245,236
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a			0		
	b Less direct expenses b			0		
	c Net income or (loss) from fundraising events . . . ▶				0	
	9a Gross income from gaming activities See Part IV, line 19 a			0		
	b Less direct expenses b			0		
	c Net income or (loss) from gaming activities . . . ▶				0	
	10a Gross sales of inventory, less returns and allowances . . . a			0		
b Less cost of goods sold . . . b			0			
c Net income or (loss) from sales of inventory . . . ▶				0		
Miscellaneous Revenue		Business Code				
11a BBEDC MATCHING FUNDS		110000	17,833	17,833		
b ICE SALES FROM BARGES		110000	125,751	125,751		
c INSURANCE RECOVERY		110000	530,682	530,682		
d All other revenue			3,607	1,386	2,221	
e Total. Add lines 11a-11d ▶			677,873			
12 Total revenue. See Instructions ▶				29,479,685	2,251,222	6,806,717
						20,413,746

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 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.	10,470,248	10,470,248		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	2,152,059	2,152,059		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	925,901	228,261	697,640	0
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.	1,021,214	681,994	339,220	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	52,359	17,794	34,565	
9 Other employee benefits.	543,772	260,363	283,409	
10 Payroll taxes.	140,292	72,810	67,482	
11 Fees for services (non-employees):				
a Management.	0			
b Legal.	143,642	48,582	95,060	
c Accounting.	190,511		190,511	
d Lobbying.	122,254		122,254	
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	316,257	309,059	7,198	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	130,387	124,417	5,970	
12 Advertising and promotion.	21,145	18,644	2,501	
13 Office expenses.	90,814	17,404	73,410	
14 Information technology.	27,609		27,609	
15 Royalties.	0			
16 Occupancy.	81,303	22,691	58,612	
17 Travel.	349,882	158,557	191,325	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	11,757	1,842	9,915	
20 Interest.	37,471	37,471		
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	202,587	133,288	69,299	
23 Insurance.	114,065	53,180	60,885	
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 DUES AND SUBSCRIPTIONS	66,467	63,004	3,463	
b PROGRAM EXPENSES	1,299,590	1,299,590		
c UBI TAX EXPENSE	2,897,046		2,897,046	
d TRAINING AND STAFF DEVELOPMENT	17,958		17,958	
e All other expenses	-26,273	27,652	-53,925	
25 Total functional expenses. Add lines 1 through 24e.	21,400,317	16,198,910	5,201,407	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		7,349,757	2	18,844,376
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		7,862,621	4	6,168,630
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		115,693	9	1,259,399
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a 5,882,059			
	b	Less: accumulated depreciation	10b 4,106,875	1,936,360	10c	1,775,184
	11	Investments—publicly traded securities		81,378,225	11	89,523,556
	12	Investments—other securities. See Part IV, line 11		0	12	0
	13	Investments—program-related. See Part IV, line 11		118,056,814	13	101,153,233
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		50,666,761	15	50,971,433
16	Total assets. Add lines 1 through 15 (must equal line 34)		267,366,231	16	269,695,811	
Liabilities	17	Accounts payable and accrued expenses		480,409	17	826,939
	18	Grants payable		16,084,036	18	18,335,202
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	1,000
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		12,014,117	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		341,670	25	185,379
	26	Total liabilities. Add lines 17 through 25		28,920,232	26	19,348,520
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		238,445,999	27	250,347,291
	28	Temporarily restricted net assets		0	28	0
	29	Permanently restricted net assets		0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
33	Total net assets or fund balances		238,445,999	33	250,347,291	
34	Total liabilities and net assets/fund balances		267,366,231	34	269,695,811	

Part XI Reconciliation of Net AssetsCheck 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	29,479,685
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,400,317
3	Revenue less expenses Subtract line 2 from line 1	3	8,079,368
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	238,445,999
5	Net unrealized gains (losses) on investments	5	6,790,740
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2,968,816
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	250,347,291

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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		

Additional Data

Software ID:
Software Version:
EIN: 92-0142567
Name: BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

Form 990 (2017)

Form 990, Part III, Line 4a:

COMMUNITIES AND ECONOMIC DEVELOPMENT - THE COMMUNITY BLOCK GRANT (CBG) PROGRAM PROVIDES BBEDC'S CDQ COMMUNITIES WITH THE OPPORTUNITY TO FUND PROJECTS THAT PROMOTE SUSTAINABLE COMMUNITY AND REGIONAL ECONOMIC DEVELOPMENT THE FUNDING PER COMMUNITY WAS \$500,000 FOR 2017 (SAME AS 2016) CDQ COMMUNITIES REQUESTED AND WERE AWARDED GRANTS OF \$500,000 PER COMMUNITY THE INFRASTRUCTURE GRANT FUND (IGF) PROGRAM PROVIDES BBEDC COMMUNITIES WITH A SOURCE OF FUNDS FOR BROAD PUBLIC INFRASTRUCTURE AS WELL AS BUSINESS INFRASTRUCTURE DEVELOPMENT TRIBAL AND/OR CITY GOVERNMENTS ARE ELIGIBLE TO APPLY FOR UP TO \$2,000,000 NO COMMUNITIES WERE AWARDED THE GRANT IN 2017 (SAME AS 2016) THE ARCTIC TERN PROGRAM PROVIDES FUNDING FOR COMMUNITIES TO SUPPORT EMPLOYMENT AND EDUCATIONAL ACTIVITIES FOR RESIDENT YOUTH UNDER THE AGE OF 17 IN 2017, \$75,950 WAS AWARDED (DOWN FROM \$83,000 IN 2016) THE INTEREST RATE ASSISTANCE PROGRAM PROVIDED \$44,252 IN INTEREST RATE ASSISTANCE TO 25 RESIDENTS (DOWN FROM 31 RESIDENTS AND \$47,418 IN 2016)

Form 990, Part III, Line 4b:

REGIONAL FISHERIES - RECOGNIZING THAT THE QUICKEST WAY TO INCREASE THE VALUE OF BRISTOL BAY SALMON WAS THROUGH CHILLING, BBEDC EMBARKED ON AN AMBITIOUS PROGRAM TO PROVIDE ICE TO THE REGION'S FISHERMEN IN 2017, BBEDC'S VESSEL UPGRADE PROGRAM ASSISTED 57 FISHERMEN WITH VESSEL UPGRADES FOR A TOTAL OF 697,596 (DOWN FROM 98 FISHERMEN AND \$1,550,042 IN 2016) BBEDC CONTINUED WITH ITS QUALITY IMPROVEMENTS PROGRAM BY PURCHASING 15 TOTES FOR 8 FISHERMEN (DOWN FROM 39 TOTES FOR 13 FISHERMEN IN 2016), 30 SLUSH BAGS FOR 11 FISHERMEN (UP FROM 8 SLUSH BAGS FOR 3 FISHERMEN IN 2016), PROVIDING FLEX FOAM INSULATION TO 6 FISHERMEN (UP FROM 4 FISHERMEN IN 2016), AND PURCHASING PADDED DECK MATS FOR 19 FISHERMEN (UP FROM 7 FISHERMEN IN 2016) RSW FLEET SUPPORT OFFERED GRANTS UP TO \$1,000 FOR FISHERMEN THAT HAD RSW SYSTEMS ON BOARD THEIR VESSELS 20 FISHERMEN WERE AWARDED A TOTAL OF \$14,039 (UP FROM 14 AND \$9,813 IN 2016) 14 FISHERMEN WERE AWARDED WITH RSW SYSTEMS TOTALING \$269,828 (up from 13 fishermen and \$192,275 in 2016) PRE-SEASON ADVANCE LOANS WERE AWARDED TO 36 INDIVIDUALS IN 2016 IN ADDITION, TWO ICE BARGES DELIVERED 1,891,920 POUNDS OF ICE (DOWN FROM 2,158,300 POUNDS IN 2016) AND \$50,000 WAS AWARDED TO FUND FISHERIES HABITAT PROTECTION

Form 990, Part III, Line 4c:

EDUCATION, EMPLOYMENT, AND TRAINING - THIS PROGRAM OFFERS OPPORTUNITIES TO BBEDC'S CDQ RESIDENTS BY HELPING THEM DEVELOP THEIR SKILLS AND IMPROVE THE ECONOMIC CONDITIONS OF THE REGION BBEDC'S EDUCATION PROGRAMS CONTINUED PROVIDING RESIDENTS WITH SKILLED LEARNING OPPORTUNITIES THE COLLEGE DEVELOPMENT FUND PROVIDED BENEFITS TO 105 RESIDENTS WITH FUNDS OF \$137,182 (DOWN FROM \$138,644 BUT UP FROM 93 RESIDENTS IN 2016) IN 2017, BBEDC'S VOCATIONAL/TECHNICAL PROGRAM ASSISTED 103 RESIDENTS WITH FUNDS OF \$300,928 (DOWN FROM 124 RESIDENTS AND \$358,402 IN 2016) BBEDC'S COMMUNITY AND GROUP TRAININGS PROVIDED \$363,933 WORTH OF ASSISTANCE (UP FROM OVER \$328,196 IN 2016) BBEDC CONTINUED ITS FINANCIAL SUPPORT TO THE UAF-BRISTOL BAY CAMPUS FOR ITS ADULT BASIC EDUCATION/GED COURSE SPONSORSHIP IN THE AMOUNT OF \$40,000 (SAME IN 2016) AS WELL AS PROVIDED A \$10,000 CONTRIBUTION TO THEIR NURSING PROGRAM THE STUDENT LOAN FORGIVENESS PROGRAM PROVIDED 8 RESIDENTS WITH FUNDS TOTALING \$49,070 (UP FROM \$37,441 FOR 7 RESIDENTS IN 2016) BBEDC'S INTERNSHIP PROGRAMS CONTINUED WITH 7 RESIDENTS BENEFITING FROM THE NON-REGION-BASED INTERNSHIPS (DOWN FROM 10 IN 2016), 13 RESIDENTS BENEFITING FROM THE IN-REGION INTERSHIPS (UP FROM 8 IN 2016), AND 20 YOUTH BENEFITING FROM YOUTH INTERNSHIPS (DOWN FROM 28 IN 2016) BBEDC'S EMPLOYMENT OPPORTUNTIES CONTINUED PROVIDING SEASONAL EMPLOYMENT TO 34 RESDIENTS (DOWN FROM 37 IN 2016) AND PROVIDED 6 RESIDENTS WITH PRE-EMPLOYMENT SCREENING AND TRAVEL COSTS OF \$5,336 FOR AT-SEA EMPLOYMENT IN 2017, BBEDC ALSO PROVIDED FUNDING IN THE AMOUNT OF \$67,233 FOR A FISHERIES INITIATIVE PROGRAM WITH A LOCAL SCHOOL DISTRICT

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)				
(Code)	(Expenses \$ 6,343	including grants of \$ 3,159	(Revenue \$)	
TECHNICAL ASSISTANCE				
(Code)	(Expenses \$ 27,402	including grants of \$ 17,286	(Revenue \$)	
GRANT WRITING ASSISTANCE				

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)				
(Code)	(Expenses \$	748,905	including grants of \$	729,225) (Revenue \$)
COMMUNITY LIAISONS				
(Code)	(Expenses \$	496,322	including grants of \$	461,369) (Revenue \$)
PERMIT LOAN PROGRAM				

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)				
(Code)	(Expenses \$	1,674,076	including grants of \$	750,000) (Revenue \$)
INVESTMENT MANAGEMENT				
(Code)	(Expenses \$	472,865	including grants of \$	143,060) (Revenue \$)
PERMIT BROKERAGE				

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 310,681 including grants of \$) (Revenue \$)
QUOTA MANAGEMENT
(Code) (Expenses \$ 59,558 including grants of \$) (Revenue \$)
OUTREACH

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)				
(Code	) (Expenses \$	30,000	including grants of \$	30,000) (Revenue \$
CONTRIBUTIONS				

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

Employer identification number
92-0142567

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) 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 the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 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 an historically important 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 conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the 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 easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on 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 other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☒

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

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

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	202,399		202,399
b	Buildings	1,643,904	438,505	1,205,399
c	Leasehold improvements			
d	Equipment	426,350	302,993	123,357
e	Other	3,609,406	3,365,377	244,029
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			1,775,184

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII

Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) INVESTMENT IN UNCONS AFFILIATE	57,825,864	C
(2) INVESTMENT IN IFQS	27,147,325	C
(3) INVESTMENT IN FISHING RIGHTS	2,650,000	C
(4) INVESTMENT IN CONS AFFILIATES	13,530,044	F
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶	101,153,233	

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) ACCRUED INTEREST	294,946
(2) DUE FROM AFFILIATES	18,864
(3) GOODWILL	49,368,275
(4) FED INCOME TAXES RECEIVABLE	567,142
(5) STATE INCOME TAXES RECEIVABLE	42,692
(6) DEFERRED TAXES	215,170
(7) INSURANCE CLAIM RECEIVABLE	464,344
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	50,971,433

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
STATE INCOME TAXES	260
DUE TO AFFILIATES	185,119
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	185,379

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	37,990,998
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	6,790,740
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	1,720,573
e	Add lines 2a through 2d	2e	8,511,313
3	Subtract line 2e from line 1	3	29,479,685
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	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 revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	29,479,685

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	26,089,706
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	4,689,389
e	Add lines 2a through 2d	2e	4,689,389
3	Subtract line 2e from line 1	3	21,400,317
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	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	21,400,317

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.

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 92-0142567
Name: BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

Supplemental Information

Return Reference	Explanation
Form 990, Sch D, Part XI, line 2d	Equity in earnings of consolidated affiliates of \$1,720,573

Supplemental Information	
Return Reference	Explanation
FORM 990, SCH D, PART XII, LINE 2D	IFQ IMPAIRMENT LOSS OF \$4,689,389

Supplemental Information	
Return Reference	Explanation
FORM 990 SCH D, PART IV LINE 2B	PRIOR TO 12/31/2017, BBEDC RECEIVED \$1,000 FROM A PARTICIPANT TO BE USED TOWARDS A PERMIT LOAN PURCHASE THAT WAS FINALIZED IN 2018

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493319114438

Schedule I
(Form 990)

OMB No 1545-0047

2017

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

Employer identification number
92-0142567

Part I

General Information on Grants and Assistance

- 1 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? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 37

3 Enter total number of other organizations listed in the line 1 table 8

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

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
See Additional Data Table					
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
SCHEDULE I PART I LINE 2	BBEDC HAS MANY PROGRAMS AVAILABLE TO ITS CDQ MEMBER COMMUNITIES INCLUDING THOSE THAT PROVIDE GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS, ORGANIZATIONS, AND GOVERNMENTS THESE PROGRAMS WERE DEVELOPED AND ARE ADMINISTERED CONSISTENT WITH BBEDC'S TAX-EXEMPT PURPOSE ALL PROGRAMS HAVE SPECIFIC PROGRAM REQUIREMENTS AS WELL AS ESTABLISHED POLICIES AND PROCEDURES FOR ENSURING A GRANTEE'S ELIGIBILITY AND USE OF FUNDS WHICH ARE MONITORED BY BBEDC'S PROGRAM MANAGERS

Additional Data

Software ID:
Software Version:
EIN: 92-0142567
Name: BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALEKNAGIK TRADITIONAL COUNCIL BOX 115 ALEKNAGIK, AK 99555	94-2857786	Trad Council	515,761				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS
CITY OF DILLINGHAM BOX 889 DILLINGHAM, AK 99576	92-0030674	City	48,771				SEASONAL EMPLOYMENT OPPORTUNITIES SEASONAL EMPLOYMENT, GROUP TRAININGS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLARKS POINT VILLAGE COUNCIL BOX 9 CLARKS POINT, AK 99569	92-0073206	Village Council	555,444				ECONOMIC DEVELOPMENT, SEASONAL EMPLOYMENT ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS
CURYUNG TRIBAL COUNCIL BOX 216 DILLINGHAM, AK 99576	92-0069902	TRIBAL COUNCIL	559,380				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EGEGIK VILLAGE COUNCIL BOX 29 EGEGIK, AK 99579	92-0063332	VILLAGE COUNCIL	546,300				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS
EKWOK VILLAGE COUNCIL BOX 70 EKWOK, AK 99580	94-3057295	VILLAGE COUNCIL	569,258				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EKUK VILLAGE COUNCIL BOX 530 DILLINGHAM, AK 99576	92-0163114	VILLAGE COUNCIL	552,300				ECONOMIC DEVELOPMENT PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS
KING SALMON GROUND LLC BOX 214 KING SALMON, AK 99613	90-0421246		8,181				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS SEASONAL EMPLOYMENT OPPORTUNITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KING SALMON TRIBAL COUNCIL BOX 68 KING SALMON, AK 99613	92-0177073	TRIBAL COUNCIL	46,300				SEASONAL EMPLOYMENT OPPORTUNITIES PROMOTION OF PROGRAMS
LEVELOCK VILLAGE COUNCIL BOX 70 LEVELOCK, AK 99625	92-0074206	VILLAGE COUNCIL	563,239				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF MANOKOTAK BOX 170 MANOKOTAK, AK 99628	92-0037650	CITY	195,736				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, OPPS FOR YOUTH
MANOKOTAK VILLAGE COUNCIL BOX 169 MANOKOTAK, AK 99628	92-0124434	VILLAGE COUNCIL	366,288				ECONOMIC DEVELOPMENT, OPPS FOR YOUTH ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NAKNEK VILLAGE COUNCIL BOX 106 NAKNEK, AK 99633	92-0058661	VILLAGE COUNCIL	552,300				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS
CITY OF PILOT POINT BOX 430 PILOT POINT, AK 99649	92-0140460	CITY	25,487				SEASONAL EMPLOYMENT OPPORTUNITIES SEASONAL EMPLOYMENT OPPORTUNITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PILOT POINT VILLAGE COUNCIL BOX 449 PILOT POINT, AK 99649	99-0143318	VILLAGE COUNCIL	552,300				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS
NATIVE VILLAGE OF PORT HEIDEN BOX 49007 PORT HEIDEN, AK 99549	92-0059922	NATIVE VILLAGE	568,836				SEASONAL EMPLOYMENT OPPORTUNITIES ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PORTAGE CREEK VILLAGE COUNCIL 1762 ABBOT ROAD ANCHORAGE, AK 99507	92-0070857	VILLAGE COUNCIL	506,000				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, OPPS FOR YOUTH
SOUTH NAKNEK VILLAGE COUNCIL 2521 E MT VILLAGE DR SUITE B PMB 3 WASILLA, AK 99654	92-0065146	VILLAGE COUNCIL	558,617				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHWEST ALASKA VOCATIONAL & EDUCATION CENTER BOX 615 KING SALMON, AK 99613	92-0174741	501(c)(3)	214,866				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS COMMUNITY/GROUP TRAININGS
TRADITIONAL COUNCIL OF TOGIAK BOX 310 SUITE B PMB 388 TOGIAK, AK 99678	92-0113885	TRAD COUNCIL	557,535				ECONOMIC DEVELOPMENT , PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TWIN HILLS VILLAGE COUNCIL BOX TWA TWIN HILLS, AK 99576	92-0062296	VILLAGE COUNCIL	573,528				COMMUNITY/GROUP TRAININGS, SEASONAL EMPL ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS
UGASHIK TRADITIONAL COUNCIL 2525 BLUEBERRY RD SUITE 205 ANCHORAGE, AK 99503	92-0160597	TRAD COUNCIL	552,300				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRISTOL BAY SCIENCE & RESEARCH INSTITUTE BOX 1464 DILLINGHAM, AK 99576	92-0168036	501(c)(3)	750,000				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS SCIENTIFIC AND EDUCATIONAL PROJECTS
UAF-BRISTOL BAY CAMPUS BOX 1070 SUITE 205 DILLINGHAM, AK 99576	92-6000147	STATE OF ALASKA	123,316				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS GED/ADULT BASIC ED, TRAININGS, NURSING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OCEAN BEAUTY SEAFOODS LLC BOX 70739 SEATTLE, WA 981271539	20-8899430		12,560				SCIENTIFIC AND EDUCATIONAL PROJECTS INTERNSHIPS
BRISTOL BAY LAND HERITAGE TRUST BOX 1388 DILLINGHAM, AK 99576	31-1721762	501(c)(3)	10,000				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS EDUCATION - BB RIVER ACADEMY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STATES SEAFOODS LLC 6901 MARGINAL WAY SW SEATTLE, WA 98106	91-2087455		24,445				ECONOMIC DEVELOPMENT, PROMO OF PROGRAMS INTERNSHIPS
WESTWARD SEAFOODS INC 2101 4TH AVE SUITE 1700 SEATTLE, WA 981212377	91-1443701		22,261				SCIENTIFIC AND EDUCATIONAL PROJECTS INTERNSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DILLINGHAM CITY SCHOOL DISTRICT BOX 170 DILLINGHAM, AK 99576	92-0031132	STATE OF ALASKA	9,784				GED/ADULT BASIC ED, TRAININGS, NURSING SEASONAL EMPLOYMENT OPPORTUNITIES SEASONAL EMPLOYMENT OPPORTUNITIES
SAFE AND FEAR-FREE ENVIRONMENT BOX 94 DILLINGHAM, AK 99576	92-0088380	501(c)(3)	17,545				INTERNSHIPS EDUCATION - BB RIVER ACADEMY SEASONAL EMPLOYMENT OPPORTUNITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED TRIBES OF BRISTOL BAY BOX 1252 DILLINGHAM, AK 99576	30-0785358	TRIBAL COUNCIL	50,000				INTERNSHIPS FISHERIES HABITAT PROTECTION
COMMUNITY FINANCIAL INC 520 E 32ND AVE ANCHORAGE, AK 99503	61-1527877	501(c)(3)	20,000				INTERNSHIPS INTERNSHIPS ECONOMIC DEVELOPMENT - CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRISTOL BAY BOROUGH SCHOOL DISTRICT BOX 169 NAKNEK, AK 99633	92-0029587	STATE OF ALASKA	67,233				INTERNSHIPS FISHERIES HABITAT PROTECTION EDUCATIONAL FISHERIES INITIATIVE
BRISTOL BAY NATIVE ASSOCIATION BOX 310 DILLINGHAM, AK 99576	92-0041473	501(c)(3)	6,079				ECONOMIC DEVELOPMENT SEASONAL EMPLOYMENT, COMM/GROUP TRAINING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF ALEKNAGIK BOX 33 ALEKNAGIK, AK 99555	92-0079021	City	52,954				deck mats for fish ECONOMIC DEVELOPMENT, COMMUNITY TRAINING
ANDREW BERKOSKI DBA SUBWAY OF DILLINGHAM BOX 1296 DILLINGHAM, AK 99576			5,197				SEASONAL EMPLOYMENT OPPORTUNITIES SEASONAL EMPLOYMENT OPPORTUNITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAY AMUSEMENTS DBA EDDIE'S FIREPLACE INN BOX 348 KING SALMON, AK 99613	92-0125527		10,389				SEASONAL EMPLOYMENT OPPORTUNITIES SEASONAL EMPLOYMENT OPPORTUNITIES
BRISTOL BAY AREA HEALTH CORPORATION BOX 130 DILLINGHAM, AK 99576	92-0044965	501(c)(3)	14,105				EDUCATIONAL FISHERIES INITIATIVE COMM/GROUP TRAININGS, SEASONAL EMPLOY OP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRISTOL BAY HOUSING AUTHORITY BOX 50 DILLINGHAM, AK 99576	92-0049726	STATE OF ALASKA	15,887				SEASONAL EMPLOYMENT OPPORTUNITIES INTERNSHIPS
BRISTOL BAY TELEPHONE COOPERATIVE BOX 259 KING SALMON, AK 99613	92-0047849	STATE OF ALASKA	7,823				SEASONAL EMPLOYMENT OPPORTUNITIES SEASONAL EMPLOYMENT OPPORTUNITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COASTAL AIR LLC BOX 137 NAKNEK, AK 99633	36-4772858		8,365				SEASONAL EMPLOYMENT OPPORTUNITIES SEASONAL EMPLOYMENT OPPORTUNITIES
COPPER RIVER SEAFOODS LLC 1118 E 5TH AVE ANCHORAGE, AK 99501	92-0157589		10,568				SEASONAL EMPLOYMENT OPPORTUNITIES SEASONAL EMPLOYMENT OPPORTUNITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF EKWOK BOX 49 EKWOK, AK 99580	92-0086143	CITY	9,587				SEASONAL EMPLOYMENT OPPORTUNITIES SEASONAL EMPLOYMENT OPPORTUNITIES
KDLG BOX 670 DILLINGHAM, AK 99576	92-0031132		26,103				COMMUNITY/GROUP TRAININGS SEASONAL EMPLOY OPPS/INTERNSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF TOGIAK BOX 190 TOGIAK, AK 99678	92-0047402	CITY	7,320				INTERNSHIPS COMMUNITY/GROUP TRAININGS

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PERMIT LOAN PROGRAM	42	251,614			
PERMIT AND VESSEL LOAN TECHNICAL ASSISTANCE	60	18,516			
EMERGENCY TRANSFER GRANTS	30	127,925			
INTEREST RATE ASSISTANCE	25	44,252			
PERSONAL FINANCE/EDUCATION	51	810			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.					
(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
TAX ASSISTANCE PROGRAM	1138	142,250			
VESSEL UPGRADES	57	697,596			
STUDENT LOAN FORGIVENESS PROGRAM	8	49,070			
COLLEGE DEVELOPMENT FUND	105	137,182			
VOCATIONAL/TECHNICAL TRAINING PROGRAM	103	300,928			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.					
(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
QUALITY IMPROVEMENTS PROGRAM - TOTES	8		11,064	BOOK	TOTES FOR ICING FISH
QUALITY IMPROVEMENTS PROGRAM - SLUSH BAGS	11		8,616	BOOK	SLUSH BAGS FOR ICING
QUALITY IMPROVEMENTS PROGRAM - FOAM INSULATION	6		2,412	BOOK	FOAM INSUL FOR ICING
VESSEL ACQUISITION PROGRAM	10	63,314			
RSW FLEET SUPPORT	20	14,039			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.					
(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
RSW PURCHASE PROGRAM	14	269,828			
QUALITY IMPROVEMENTS PROGRAM - PADDED DECK MAT	19		7,167	BOOK	DECK MATS FOR FISH
PRE-SEASON ADVANCE LOANS	36	140			
AT-SEA EMPLOYMENT	6	5,336			

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**
- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
- ▶ **Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.**

Name of the organization
BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

Employer identification number
92-0142567

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| ☐ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☐ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes," on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes," on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

No

4b

No

4c

No

5a

No

5b

No

6a

No

6b

No

7

No

8

No

9

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

[illegible]

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ.
► Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION	Employer identification number 92-0142567
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Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ► \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ► \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						► \$						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
See Additional Data Table				

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
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Additional Data

Software ID:
Software Version:
EIN: 92-0142567
Name: BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

Form 990, Schedule L, Part III - Grants or Assistance Benefiting Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance
(1) AMY ANGASAN	GRANDDAUGHTER OF BOARD MEMBER	432
(2) TRISTON CHANEY	GRANDSON/NEPHEW OF BOARD MEMB	1,496
(3) KAYLANI FARLER	SISTER-IN-LAW/GREAT-NIECE O	648
(4) SHARON HANSEN	GRANDDAUGHTER OF BOARD MEMBER	618
(5) SAMUEL ILUTSIK	GRANDSON OF BOARD MEMBER	2,042
(6) ARTHUR SHARP	BROTHER OF BOARD MEMBER	4,715
(7) CADEN SMEATON	SON OF BBEDC OFFICER	1,496
(8) DANNY WASSILY	BROTHER-IN-LAW OF BOARD MEMBER	2,272
(9) TONY JOHNSON	GREAT GRANDSON OF BD MBR	1,030

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 .	OMB No 1545-0047 2017 Open to Public Inspection
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Name of the organization BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION	Employer identification number 92-0142567
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990 Schedule O, Supplemental Information

Return Reference	Explanation
FAMILY AND BUSINESS RELATIONSHIPS OF BOARD MEMBERS	Form 990 Part VI Line 2 BOARD MEMBERS - CURRENT YEAR BOARD MEMBERS - MARK ANGASAN AND FRED ANGASAN, SR HAVE A FAMILY RELATIONSHIP Alternate Board Member Ralph Angasan, III has a family relationship with Board Members Mark Angasan and Fred Angasan, Sr Alternate Board Member John Christensen, Jr has a family relationship with Board Member Gerda Kosbruk

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROCESS FOR REVIEW OF THE FORM 990	Form 990 Part VI Line 11b PRIOR TO FILING THE RETURN, A DRAFT OF THE FORM 990 TAX RETURN WILL BE SUBMITTED TO THE CHIEF FINANCIAL OFFICER (CFO) BY THE TAX PREPARER. THIS DRAFT WILL BE REVIEWED BY THE CFO AND STAFF. THE CFO WILL THEN HAVE THE PRESIDENT/CEO AND COO REVIEW THE DRAFT RETURN BEFORE AUTHORIZING THE TAX PREPARER TO FINALIZE THE RETURN. A COPY OF THE TAX RETURN WILL BE PROVIDED TO THE BOARD MEMBERS UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Monitoring and enforcement of conflict of interest policy	FORM 990 PART VI LINE 12C In any situation where there is a conflict or the appearance of conflict, or where a board member is uncertain of the possibility of a conflict, the Board Member or employee should protect himself/herself by immediately discussing the matter fully and frankly with the Chairman or, if the matter arises during a board meeting, by disclosing the matter to the full Board of Directors. The Chairman or any other board member are also encouraged to raise any issue known to them to ensure that any potential conflict is known to the Corporation and its board in a timely manner. Where there is doubt as to the existence of a conflict of interest, the situation should be fully explained in writing in advance of any board meeting. If necessary, the Chairman will appoint a three-member ad hoc committee of members of the Board of Directors to make a recommendation to the Board of Directors on the matter at the next board meeting. The committee will discuss the matter with the Corporation's General Counsel. The decision of the Board of Directors is binding. BOARD MEMBERS ARE REQUIRED TO DECLARE A CONFLICT OF INTEREST ON EACH AND EVERY VOTE THEY TAKE IF ONE EXISTS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
DETERMINING COMPENSATION FOR PRESIDENT/CEO	FORM 990 PART VI LINE 15A THE BOARD SETS THE BEGINNING SALARY RANGE FOR THE POSITION OF THE PRESIDENT/CEO BASED ON A LOCAL SALARY SURVEY The last salary survey was performed in 2014 THIS SALARY RANGE IS ADJUSTED PERIODICALLY AS LOCAL SALARIES IN THE REGION CHANGE EACH YEAR THE BOARD GOES INTO EXECUTIVE SESSION TO EVALUATE THE PRESIDENT/CEO'S PERFORMANCE OVER THE PAST YEAR AND THE CONTRACT RENEWAL AND COMPENSATION, IF TIME TO RENEW THE CURRENT PRESIDENT/CEO CONTRACT IS FOR A 5 YEAR TERM IN ADDITION, THE BOARD TAKES INTO CONSIDERATION ITS POLICY OF UP TO A 4% MERIT INCREASE EACH YEAR AT THE CONCLUSION OF THE PRESIDENT/CEO'S EVALUATION, THE PRESIDENT/CEO IS REQUIRED TO LEAVE THE ROOM SO THAT THE REMAINING BOARD MAY HAVE CONFIDENTIAL DISCUSSIONS MOTION IS MADE TO COME OUT OF EXECUTIVE SESSION AND THE BOARD'S DECISION OF THE CONTRACT AND COMPENSATION IS PRESENTED AND DOCUMENTED IN THE MINUTES

990 Schedule O, Supplemental Information

Return Reference	Explanation
DETERMINING COMPENSATION FOR OTHER OFFICERS OR KEY EMPLOYEES	FORM 990 PART VI LINE 15B Annually, the board approve the budget which contains the salary information on employees THE BOARD SETS THE BEGINNING SALARY RANGE FOR THE POSITIONS AT BBEDC BASED ON A LOCAL SALARY SURVEY The last salary survey was performed in 2014 THIS SALARY RANGE IS ADJUSTED PERIODICALLY AS LOCAL SALARIES IN THE REGION CHANGE ANNUALLY ON THE EMPLOYEE'S ANNIVERSARY DATE, THE IMMEDIATE SUPERVISOR PERFORMS AN EVALUATION IN ADDITION, THE SUPERVISOR TAKES INTO CONSIDERATION THE BOARD'S POLICY OF UP TO A 4% MERIT INCREASE EACH YEAR THE SUPERVISOR MAKES ITS RECOMMENDATION ON THE COMPENSATION FOR THE NEXT YEAR , WHICH ARE APPROVED BY THE COO/CEO, WITH THE PRESIDENT/CEO HAVING FINAL APPROVAL FOR ALL EMPLOYEES IN ADDITION, FORMAL CONTRACTS ARE REQUIRED ANNUALLY FOR THE FOLLOWING POSITIONS CHIEF OPERATING OFFICER, CHIEF FINANCIAL OFFICER, AND SEAFOOD INVESTMENT OFFICER OFFICER

990 Schedule O, Supplemental Information

Return Reference	Explanation
AVAILABILITY OF DOCUMENTS	Form 990 Part VI Line 19 BBEDC'S FORM 990, GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST BY CONTACTING US AT 1-907-842-4370 OR WRITING TO US AT PO BOX 1464, DILLINGHAM, AK 99576-1464 IN ADDITION, OUR FORM 990 IS AVAILABLE FOR VIEWING ON THE WEBSITE GUIDESTAR ORG

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

Employer identification number
92-0142567

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.						
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	
(1) BRISTOL BAY ICE LLC PO BOX 1464 DILLINGHAM, AK 99576 20-4176963	COMM FISHING	AK	656,633	817,475	BBEDC	

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)BRISTOL BAY SCIENCE & RESEARCH INSTITUTE PO BOX 1464 DILLINGHAM, AK 99576 92-0168036	SCIENCE/EDUC	AK	501(C)(3)	7	BBEDC	Yes	
(2)HARVEY SAMUELSEN SCHOLARSHIP TRUST PO BOX 1464 DILLINGHAM, AK 99576 30-0065137	SCHOLARSHIPS	AK	501(C)(3)	PF	BBEDC	Yes	

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n Yes	
o Sharing of paid employees with related organization(s)	1o Yes	
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q Yes	
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BRISTOL BAY SCIENCE AND RESEARCH INSTITUTE	b	686,036	ACTUAL CASH
(2) BRISTOL BAY SCIENCE AND RESEARCH INSTITUTE	q	611,870	ACTUAL CASH

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Additional Data

Software ID:
Software Version:
EIN: 92-0142567
Name: BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
ALASKAN LEADER FISHERIES LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 61-1503131	COMM FISHING	AK	NA	RELATED	119,674	992,747	Yes				No	50 000 %
ALASKAN LEADER SEAFOODS LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 20-5851344	FISH MARKETING	AK	NA	RELATED	285,604	4,521,872		No			No	50 000 %
ALASKAN LEADER VESSEL LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 92-0142904	COMM FISHING	AK	NA	RELATED	1,085,979	2,460,408	Yes				No	50 000 %
ALEUTIAN LEADER FISHERIES LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 26-1607537	COMM FISHING	AK	NA	RELATED	-1,726	-1,071,419		No			No	50 000 %
BERING LEADER FISHERIES LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 43-2055793	COMM FISHING	AK	NA	RELATED	301,576	1,508,655	Yes				No	50 000 %
BRISTOL LEADER FISHERIES LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 91-1780779	COMM FISHING	AK	NA	RELATED	1,208,546	6,974,969	Yes				No	50 000 %
KODIAK LEADER FISHERIES LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 27-2387715	COMM FISHING	AK	NA	RELATED	85,032	2,237,217		No			No	50 000 %
NORTHERN LEADER FISHERIES LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 45-4219695	COMM FISHING	AK	NA	RELATED	918,267	-4,636,258	Yes				No	50 000 %
ATECH SERVICES LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 26-2712575	FABRICATION	WA	NA	UNRELATED	112,841	484,706		No			No	50 000 %
DONA MARTITA LLC 20308 DAYTON AVE N SEATTLE, WA 98133 91-2089115	COMM FISHING	WA	NA	RELATED	-554,959	24,745,401	Yes				No	50 000 %
ALASKAN MARINER LLC 5470 SHILSHOLE AVE NW STE 410 SEATTLE, WA 98107 20-0499337	COMM FISHING	WA	NA	RELATED	220,051	744,968	Yes				No	50 000 %
ALEUTIAN MARINER LLC 5470 SHILSHOLE AVE NW STE 410 SEATTLE, WA 98107 91-1424870	COMM FISHING	WA	NA	RELATED	296,585	741,402	Yes				No	40 000 %
ARCTIC MARINER LLC 5470 SHILSHOLE AVE NW STE 410 SEATTLE, WA 98107 91-1530408	COMM FISHING	WA	NA	RELATED	204,339	827,718	Yes				No	50 000 %
BRISTOL MARINER LLC 5470 SHILSHOLE AVE NW STE 410 SEATTLE, WA 98107 91-1812263	COMM FISHING	AK	NA	RELATED	304,998	878,412	Yes				No	45 000 %
CASCADE MARINER LLC 5470 SHILSHOLE AVE NW STE 410 SEATTLE, WA 98107 91-2095173	COMM FISHING	WA	NA	RELATED	182,209	619,610	Yes				No	50 000 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproporionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
NORDIC MARINER LLC 5470 SHILSHOLE AVE NW STE 410 SEATTLE, WA 98107 91-1837754	COMM FISHING	WA	NA	RELATED	312,634	863,317	Yes				No	45 000 %
NORTHERN MARINER LLC 5470 SHILSHOLE AVE NW STE 410 SEATTLE, WA 98107 91-1942159	COMM FISHING	WA	NA	RELATED	174,900	8,895		No			No	45 000 %
WESTERN MARINER LLC 5470 SHILSHOLE AVE NW STE 410 SEATTLE, WA 98107 80-0074651	COMM FISHING	WA	NA	RELATED	199,156	1,406,542	Yes				No	50 000 %
OCEAN BEAUTY SEAFOODS LLC PO BOX 70739 SEATTLE, WA 981271539 20-8899430	SEAFOOD PROCESS	AK	NA	UNRELATED	17,075,112	33,068,811	Yes				No	50 000 %
WASHINGTON LANDMARK HOLDINGS LLC 8874 BENDER RD STE 201 LYNDON, WA 98264 46-5732160	REAL ESTATE	AK	NA	RELATED	-756	-1,955,273		No			No	50 000 %
OBS FISHMEAL LLC 1100 W EWING STREET SEATTLE, WA 98119 81-4555564	FISHMEAL PLANT	AK	NA	UNRELATED	1,842,179	1,580,642		No			No	50 000 %