CANNED JAN 0 5 2022

0423220221APR21'21

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

2019

		nent of the Treasury Revenue Service						on this form tructions an					1417	10	pen to Public Inspe	ction
_		alendar year 2019					101 1110			, and en					. 20	
_			PPER VALLEY		RIC AS	SSC	CIATIO			,	<u> </u>	A En	nployer ide	entıf	ication number	
	COM	MUNITY FOUND	ATION, INC.									38	3-3737	07	9	
N	umbei	r and street (or P O bo	ox number if mail is not	delivered to	o street ad	dres	s)			Room/su	ıte	В Те	lephone n	umb	er (see instructions)	
										}						
	P.0	. BOX 45											(907)	82	22-3211	
Cı	ty or t	own, state or province	, country, and ZIP or fo	reign posta	al code			·					-			
													exemption ag			
	GLE	NNALLEN, AK	99588-0045									pci	nuing, check	·		
G	Che	eck all that apply	Initial retu	rn		In	itial return	of a forme	er p	ublic cha	arıty	D 1	Foreign orga	anıza	tions, check here >	
			Final retur	n		Αr	mended re	eturn				2	Foreign orga	anıza	itions meeting the	
			Address c	hange		Na	ame chan	ge					85% test ch computation		nere and attach	
H	Che	eck type of organiz	zation X Sect	on 501(c)(3) ex	em	pt private	foundation		_		E 11.	· ·····ata facca	404.0	n status was terminated	
	s	Section 4947(a)(1) r	onexempt charitable	e trust	Ot	her	taxable p	rivate foun	dat	tion)(1)(A), check here	
I	Fair	market value o	f all assets at	J Acco	unting n	netl	hod 💹 (Cash 🔼 🏻 A	٩cc	rual		F If ti	he foundate	on is	ın a 60-month termination	_
		of year (from Pa		_ 0	ther (sp	ecıf	y)]	une	der section 5	507(b)(1)(B), check here . >	Ш
		<u>-ii</u>	297,541.			d), n	nust be on	cash basis)								
i	art	Analysis of Rev	venue and Expens n columns (b), (c), a	ses (The	(a) i		nue and	(b) Net	nve	estment	"	:) Adıı	isted net		(d) Disbursemer for charitable	
		may not necessar	ily equal the amount		exp	ens bod	ses per oks		com		``		ome		purposes (cash basis onl	
_		column (a) (see in					55,188	 			-			—	(Casil basis Oill	y)
	1		s, etc., received (attach scl e foundation is not requ				33,100	 			 				· ·	
	2	attac	h Sch B				157			157.	1					
	3		nd temporary cash inves	- 1				 								!
	4		rest from securities					 -	_	-	┼					<u> </u>
		Gross rents			_			<u> </u>			 				· - -	<u>'</u>
۵		Net rental income or (Net gain or (loss) from	-	lan 10							1		_			<u>'</u>
Ž		Gross sales price for a		line to				 ·			<u> </u>		•			j
Š	7	assets on line 6a	come (from Part IV, I	ine 2\		_				0.				_		<u></u>
Ĕ	8	. •	ital gain													
	9	Income modificatio	-	1	-											1
ı	10 a	Gross sales less return and allowances]
	b	Less Cost of goods so	old -													. !
	С	Gross profit or (loss	s) (attach schedule)	, E.I.V	בט			<u> </u>			<u> </u>					
	11	Other income (atta	ch schedule)			\$С	7.5 2.45			157						
4	12	Total. Add lines 1 t	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	1.4	2020	_	55,345			157.	ļ					
	13		ers, directors, trustees,	- 1		RS	0									
א נ	14	Other employee sa Pension plans, emp	laries and wages	Λ=N	117	_										
	15	Pension plans, emp	ployed benefits	<u> </u>	<u> </u>		<u> </u>	 -			├	 -		_		
		Legal fees (attach s					500.				-			_		
٥		Accounting fees (a									-			-		
iralive c		Other professional	•	′ F				·			 			_		
	17 40	Interest		ſ			 -	 						\dashv		
=	18 10	Taxes (attach sched	• •	·				 			-			\dashv		 -
=	19 20	Depreciation (attac Occupancy	•											\dashv		
ξI	20 21	Travel, conferences		ſ				 			-			\dashv		
=	22	Printing and publication	•	Г										\dashv		
IJ	23	Other expenses (at		Г	****		156.									
=1	24	Total operating an		Г												
	•	Add lines 13 through	•	·			656.	l								
3	25	Contributions, gifts	="	F			22,900.								22,	
	26	Total expenses and disbu	. =				23,556.			0.				0.	22,	900
Ţ	27	Subtract line 26 fro	m line 12													[
- 1	_	_					31 789	ļ			l			- 1		- 1

b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). .

V 19-4F

Form **990-PF** (2019)



157.

Form 990			COPPER VALLEY ELECTRI	C ASSOCIATION		38-3737079 Page 2				
Part II		Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	E	nd of year	, 			
			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Marl	ket Value			
	1 (Cash - non-interest-beari	ing							
	2 :	Savings and temporary	cash investments	265,752.	297,54	1.	297,541			
		Accounts receivable								
1	-	Less allowance for dou	btful accounts ▶							
ı										
	1	Less allowance for dou								
			 [
			officers, directors, trustees, and other							
			tach schedule) (see instructions)							
			receivable (attach schedule)							
			total to the last							
छ			se							
931			deferred charges							
		•								
1										
		•	e bonds (attach schedule)							
1	1 1	nvestments - land buildings					1			
1		and equipment basis Less accumulated deprecia				- 				
	1	(attach schedule)		- 						
	2 3	Investments - mortgage	loans							
	4	Land, buildings, and	ach schedule)				i			
	ĺ	equipment basis Less accumulated deprecia	ation		***************************************	-				
						 -				
	5 6	Other assets (describe								
'	0	notal assets (to be	completed by all lilers - see the		207 F.A	.1	207 5/1			
+		A A A A A A A A A A A A A A A A A A A	completed by all filers - see the page 1, item I)		= =		- '			
1	,	Accounts payable and a	accrued expenses			 -				
ا نِجْ						 				
			ors, trustees, and other disqualified persons.							
.12			otes payable (attach schedule)							
- 2	2	Other liabilities (describe	e ▶)							
١,	23	Total liabilities (add line	es 17 through 22)	0.		0.				
+										
alances		roundations that follow and complete lines 24,	w FASB ASC 958, check here							
鬞.		•					ļ			
			or restrictions							
Net Assets or Fund B	:5		estrictions				4			
Š		Foundations that do not f and complete lines 26 thr	follow FASB ASC 958, check here			İ				
<u>.</u>							Į			
Ö 2	.6		cipal, or current funds							
\$ 2	: /		r land, bldg, and equipment fund	265,752.	297,54	1	<u>-</u>			
80 2	8		ulated income, endowment, or other funds							
2 ك	9		d balances (see instructions)	265,752.	297,54					
욁	U		net assets/fund balances (see	265 752	297,54		1			
_			nage in Not Appete or Fund Balar	265,752.	291,54	<u></u>				
			inges in Net Assets or Fund Balar		must ages :th					
			balances at beginning of year - Part II			_	265 752			
			ed on prior year's return)				265,752 31,789			
			, line 27a			2	31,/89			
		er increases not inclu		3	207 541					
				• • • • • • • • • • • • • • • • • • • •			297,541			
		reases not included in	·			5	207 541			
6	rota	i net assets or fund b	palances at end of year (line 4 minus	line 5) - Part II, column (b), line 29	6	297,541			

(b) How acquired (c) Date acquired (d) Date sold

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate,

Part IV.

1 a	<u></u>		sns MLC Co)	D - Donation				
	1				_			
	······································							
	<u></u>							
)							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu			
a	· · · · · · · · · · · · · · · · · · ·							
t	· -							
					·	<u> </u>		
	<u>, </u>	-				<u>-</u>		
		howing gain in column (h) and owned	d by the foundation on 12/31/69	(1)	Gains (Col. (h) ga	ain minus		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	col (k), but not less than -0-) or Losses (from col (h))				
a	<u>-</u>							
t								
			· -					
	<u></u>	(If a	jain, also enter in Part I, line 7					
2	Capital gain net income		loss), enter -0- in Part I, line 7	2				
3	Net short-term capital o	ain or (loss) as defined in sections						
ŭ			structions If (loss), enter -0- in					
	•			3				
	rt V Qualification U	Index Section 4940(a) for Re	duced Tax on Net Investment I	ncome	-	· ·		
	es," the foundation doesn	the section 4942 tax on the distrib						
1		't qualify under section 4940(e)	Do not complete this part			Yes X No		
	Enter the appropriate amount in each column for each year, see the instructions before n				tries	Yes X No		
Cal	Base period years lendar year (or tax year beginning in)	n't qualify under section 4940(e). I mount in each column for each ye	Do not complete this part ear, see the instructions before make (c) Net value of nonchantable-use assets	ng any en	tries (d) Distribution ra (col (b) divided by	tio col (c))		
Cal	Base period years	n't qualify under section 4940(e) I mount in each column for each ye (b) Adjusted qualifying distributions 21,088.	Do not complete this part ear, see the instructions before make (c) Net value of nonchantable-use assets 173,698.	ng any en	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406		
Cal	Base period years lendar year (or tax year beginning in)	n't qualify under section 4940(e) I mount in each column for each ye (b) Adjusted qualifying distributions 21,088. 17,158.	Do not complete this part ear, see the instructions before make (c) Net value of nonchantable-use assets 173,698. 164,836.	ng any en	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406 0.104091		
Cal	Base period years lendar year (or tax year beginning in) 2018	n't qualify under section 4940(e) I mount in each column for each ye (b) Adjusted qualifying distributions 21,088. 17,158. 20,811.	Do not complete this part ear, see the instructions before make (c) Net value of nonchantable-use assets 173,698. 164,836. 177,977.	ng any en	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406 0.104091 0.116931		
Ca	Base period years lendar year (or tax year beginning in) 2018 2017	n't qualify under section 4940(e) I mount in each column for each yeach (b) Adjusted qualifying distributions 21,088. 17,158. 20,811. 10,678.	Do not complete this part ear, see the instructions before make (c) Net value of nonchantable-use assets 173,698. 164,836. 177,977. 184,102.	ng any en	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406 0.104091 0.116931 0.058000		
Ca	Base period years lendar year (or tax year beginning in) 2018 2017 2016	n't qualify under section 4940(e) I mount in each column for each ye (b) Adjusted qualifying distributions 21,088. 17,158. 20,811.	Do not complete this part ear, see the instructions before make (c) Net value of nonchantable-use assets 173,698. 164,836. 177,977.	ng any en	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406 0.104091 0.116931		
Ca	Base period years lendar year (or tax year beginning in) 2018 2017 2016 2015	n't qualify under section 4940(e) I mount in each column for each yeach (b) Adjusted qualifying distributions 21,088. 17,158. 20,811. 10,678.	Do not complete this part ear, see the instructions before make (c) Net value of nonchantable-use assets 173,698. 164,836. 177,977. 184,102.	ng any en	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406 0.104091 0.116931 0.058000 0.047430		
	Base period years lendar year (or tax year beginning in) 2018 2017 2016 2015 2014	n't qualify under section 4940(e) I mount in each column for each ye (b) Adjusted qualifying distributions 21,088. 17,158. 20,811. 10,678. 11,896.	Do not complete this part ear, see the instructions before make (c) Net value of nonchantable-use assets 173,698. 164,836. 177,977. 184,102. 250,810.	ng any en	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406 0.104091 0.116931 0.058000		
	Base period years lendar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (or	n't qualify under section 4940(e) Innount in each column for each yeach yeach distributions 21,088. 17,158. 20,811. 10,678. 11,896.	Do not complete this part ear, see the instructions before make (c) Net value of nonchantable-use assets 173,698. 164,836. 177,977. 184,102. 250,810.	ng any en	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406 0.104091 0.116931 0.058000 0.047430		
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2 3 4 5 6	Base period years lendar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (of Average distribution ration the number of years the Enter the net value of not Multiply line 4 by line 3. Enter 1% of net investment	a't qualify under section 4940(e) Innount in each column for each year (b) Adjusted qualifying distributions 21,088. 17,158. 20,811. 10,678. 11,896. d)	Do not complete this part part, see the instructions before make (c) Net value of nonchantable-use assets 173,698. 164,836. 177,977. 184,102. 250,810. de the total on line 2 by 5 0, or by if less than 5 years	2 3 4	tries (d) Distribution ra (col (b) divided by	tio (c)) 0.121406 0.104091 0.116931 0.058000 0.047430 0.447858 0.089572 229,654. 20,571.		
2 3 4 5	Base period years lendar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (of Average distribution ration the number of years the Enter the net value of not Multiply line 4 by line 3. Enter 1% of net investment	a't qualify under section 4940(e) Innount in each column for each year (b) Adjusted qualifying distributions 21,088. 17,158. 20,811. 10,678. 11,896. d)	Do not complete this part part, see the instructions before making (c) Net value of noncharitable-use assets 173,698. 164,836. 177,977. 184,102. 250,810. de the total on line 2 by 5 0, or by if less than 5 years	2 3 4 5	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406 0.104091 0.116931 0.058000 0.047430 0.447858 0.089572 229,654. 20,571.		
2 3 4 5 6	Base period years lendar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (or Average distribution ration the number of years the Enter the net value of not Multiply line 4 by line 3. Enter 1% of net investment of Add lines 5 and 6	a't qualify under section 4940(e) Innount in each column for each year (b) Adjusted qualifying distributions 21,088. 17,158. 20,811. 10,678. 11,896. d) o for the 5-year base period - divide foundation has been in existence on charitable-use assets for 2019 for the 10 months.	Do not complete this part part, see the instructions before make (c) Net value of nonchantable-use assets 173,698. 164,836. 177,977. 184,102. 250,810. de the total on line 2 by 5 0, or by if less than 5 years	2 3 4 5	tries (d) Distribution ra (col (b) divided by	tio col (c)) 0.121406 0.104091 0.116931 0.058000 0.047430 0.447858 0.089572 229,654. 20,571.		

Form	990-PF (2019) COPPER VALLEY ELECTRIC ASSOCIATION 38-373	7079	F	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ctión	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)		,	I
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)		<u></u>	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			2.
	here ► X and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2			2.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			2.
6	Credits/Payments			
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			
b	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)6c			
d	Backup withholding erroneously withheld	·····		
7	Total credits and payments Add lines 6a through 6d			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			2.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	\vdash	Yes	No
	participate or intervene in any political campaign?	1a		Х
	Did if spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1		, <i>,</i>
	instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any-materials		m, .	2
	published or distributed by the foundation in connection with the activities			`
	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	-	_	
	(1) On the foundation ►\$ (2) On foundation managers ►\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$	 		
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	-		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		^
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or By language in t			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law semantic that approximately sent to the state law semantic that the state law sema			
	conflict with the state law remain in the governing instrument?	6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7		-
	Enter the states to which the foundation reports or with which it is registered. See instructions. ► AK,			
		1		
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	x	
	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	00		
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV.	•		Х
	complete Part XIV	9		
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		х
	names and addresses			

38-3737	7079		Page 5								
		Yes	No								
ity within the	11		х								
a disqualified	12		х								
on application?	13	Х									
907-822-	831	1									
99388											
re											
other authority		Yes	No								
	16		Х								
the name of			.								
	-										
		Yes	No								
es X No		-	,								
es X No	. 										
es X No			.								
es X No		,									
es X No described in		<u> </u>									
• • • • • • • • • • • • • • • • • • • •	1b		<u> </u>								
. ▶ □ ted acts, that			×								
vas a private	1c										
es X No			-								
			•								
on 4942(a)(2) 4942(a)(2) to											
here	2b	_									
es X No											

Pai	rt VII-A Statements Regarding Activities (continued)			
	1		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12	1	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► WWW.CVEA.ORG			
14	The books are in care of ▶ COPPER VALLEY ELECTRIC ASSOC. Telephone no ▶ 907-822	-831	1	
	Located at ►MILE 187 GLENN HWY, GLENNALLEN, AK GLENNALLEN, AK ZIP+4 ► 99588			_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country >	<u> </u>		
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			٠,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			}
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	:		1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	•		-
	the solution of the disquarement of the solution of the soluti		1.	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		i . l	
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government outstook in terminating within outstook in the property of the property o			<u> </u>
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	1b	<u></u>	
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	10		
	Organizations relying on a current notice regarding disaster assistance, check here			
·	were not corrected before the first day of the tax year beginning in 2019?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		•	1
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			1
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	,		
_	6d and 6e) for tax year(s) beginning before 2019? Yes X No			- (
	If "Yes," list the years			٠ إ
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			1
	>	}		j
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	' •	, İ	- 1
	at any time during the year? Yes X No		.	}
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or		. [•]
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		į	1
	Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	-	1	
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		-X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			لب
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b_		Х

Pai	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)		,	
5a	During th	e year, did the foundation pay or incur any amo	ount to		·		Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influe	ence legislation (sectio	n 4945(e))?	. Yes X No	,		1
	(2) Influe	nce the outcome of any specific public ele	ection (see section 4	1955), or to carry or				
		ly or indirectly, any voter registration drive?	•			,		
		de a grant to an individual for travel, study, or o				ŀ		
		de a grant to an organization other than a	· ·					ŀ
		•	•					Ì
		in 4945(d)(4)(A)? See instructions				'		
		ses, or for the prevention of cruelty to children	•	•		_		
ь		swer is "Yes" to 5a(1)-(5), did any of the						
U		ns section 53 4945 or in a current notice regar						I
						<u>5b</u>		
		ions relying on a current notice regarding disas				Ш		
С		swer is "Yes" to question 5a(4), does the						
	because it maintained expenditure responsibility for the grant?							
_	If "Yes," attach the statement required by Regulations section 53 4945-5(d)							
6a		oundation, during the year, receive any fur						
		onal benefit contract?						
b		undation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ict?	. <u>6b</u>		X
_		6b, file Form 8870						1
7a	_	e during the tax year, was the foundation a p		•				
b		lid the foundation receive any proceeds or have	on?	. 7b				
8		ndation subject to the section 4960 tax on pay						1
		tion or excess parachute payment(s) during the						1
Pai	t VIII	Information About Officers, Director and Contractors	rs, Trustees, Fou	ndation Managers	s, Hignly Paid Emp	oloyees,		
1	List all of	ficers, directors, trustees, and foundat	ion managers and		See instructions.			
		(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expens		
-			devoted to position	enter -0-)	and deferred compensation	other al	owance	<u> </u>
ATC	1_3			0				
MICI			_	0.	0.			<u> </u>
	_							
2	"NONE."	ation of five highest-paid employees	(other than thos	e included on line	e 1 - see instructi	ons). If n	one, (enter
	HOIL.		(b) Title, and average		(d) Contributions to			
(a)	Name and a	ddress of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expens other al		
_			devoted to position		compensation			
	NONE							
_	NONE							
_				1				
			_					
	_							_
	_							
<u>Total</u>	number c	f other employees paid over \$50,000	<u></u>	<u> </u>	<u></u> ▶			

3	and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	NONE	
		-
ota	I number of others receiving over \$50,000 for professional services ▶	-
	t IX-A Summary of Direct Charitable Activities	
	It the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	·
_		
2 _		
-		
3 _		
_		
4 -		
-		
	t IX-B Summary of Program-Related Investments (see instructions)	
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 NONE	Amount
1 _	NONE	
-		
2 _		
-		
AI	other program-related investments. See instructions	
3 _		
	NONE	

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Amounts set aside for specific charitable projects that satisfy the

qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2019)

22,900.

22,898.

3b

5

6

Page **9**

Part XIII	Undistributed Income (see instri	uctions)			
1 Distribu	table amount for 2019 from Part XI.	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
					11,481.
	uted income, if any, as of the end of 2019				, , , , , , , , , , , , , , , , , , ,
	mount for 2018 only				
h Total for	pnor years 20 17 ,20 16 ,20 15				
	distributions carryover, if any, to 2019	-			
	014				
	1,476			'	
	11,913.				
	8,918.				
	12,405.		4	,	• 1
	lines 3a through e	34,712.	······································		
	ng distributions for 2019 from Part XII,		·		
line 4	\$ 22,900.				
a Applied	to 2018, but not more than line 2a		·		
	to undistributed income of prior years n required - see instructions)		· *****		
	as distributions out of corpus (Election				, .
required	- see instructions)		· ·	*	12 401
a Applied	to 2019 distributable amount		·		11,481.
	ing amount distributed out of corpus	11,419.	·	•• •	
(If an ai	distributions carryover applied to 2019 mount appears in column (d), the same must be shown in column (a))	_			
	the net total of each column as ed below:				
a Corpus	Add lines 3f, 4c, and 4e Subtract line 5	46,131.			
b Prior ye	ears' undistributed income Subtract			'	•
line 4b f	rom line 2b				
income been iss	e amount of prior years' undistributed for which a notice of deficiency has sued, or on which the section 4942(a) been previously assessed				
	line 6c from line 6b Taxable				
	- see instructions				
4a fror	outed income for 2018 Subtract line in line 2a Taxable amount - see ons				
f Hodistril	outed income for 2019 Subtract lines				
4d and	5 from line 1 This amount must be ed in 2020				
7 Amounts	s treated as distributions out of corpus		}		1
	fy requirements imposed by section				
)(F) or 4942(g)(3) (Election may be		,		
required	- see instructions)				
8 Excess	distributions carryover from 2014 not				1
applied o	on line 5 or line 7 (see instructions)				
9 Excess	distributions carryover to 2020.		j		
Subtract	lines 7 and 8 from line 6a	46,131.			
10 Analysis	1 1 17 1				1
a Excess f	rom 2015 1,476.				†
b Excess f	rom 2016 11,913.		j		j
c Excess f	rom 2017 8, 918.				į
d Excess f	rom 2018 12,405.				
e Excess f	rom 2019 11,419.				
					Form 990-PF (2019)

a The name, address, and telephone number or email address of the person to whom applications should be addressed b The form in which applications should be submitted and information and materials they should include c Any submission deadlines d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Form 990-PF (2019)

25790N 4296 3/25/2020 1:21:41 AM V 19-4F

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contribution Name and address (home or business) Purpose of grant or contribution Amount Amount											
3 Grants and Contributions Paid Dur	ing the Year or App	roved for	Future Payment	_							
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount							
Name and address (home or business)	or substantial contributor	recipient	Contribution								
a Paid during the year											
ATCH 5											
				-							
- -		· -									
İ											
i											
·											
•											
			·								
Total	<u> </u>	<u></u>	<u>▶</u> 3a	22,900.							
b Approved for future payment											
. ,											
		ļ									
	<u> </u>		<u> </u>								
Total	<u></u>	<u></u>	▶ 3b								

' Page 12

Part	XVI-A Analysis of Income-Prod	ucing Act	ivities			,
Enter	gross amounts unless otherwise indicated	Unrel	ated business income (b)	Excluded b	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Pr	ogram service revenue	Business code	Amount	Exclusion code		(See instructions)
а						
b						
С				ļ		
d				ļ		
e f				1		-
g	Fees and contracts from government agencies					
2 M	embership dues and assessments					
	erest on savings and temporary cash investments -			14	157.	
	vidends and interest from securities					
5 Ne	et rental income or (loss) from real estate			<u> </u>		
а	Debt-financed property			1		
b	Not debt-financed property					
6 Ne	t rental income or (loss) from personal property			-		
7 Ot	her investment income					
8 Ga	iin or (loss) from sales of assets other than inventory					
9 Ne	et income or (loss) from special events					
10 Gr	oss profit or (loss) from sales of inventory					
11 01	her revenue a			ļ		
b						
L				11		
d		- <u>-</u>	-	ļ		A*
е				-	157	
12 St	ubtotal Add columns (b), (d), and (e)			<u> </u>	157.	1.57
	otal. Add line 12, columns (b), (d), and (e)		• • • • • • • • • • • • •		13	157.
	worksheet in line 13 instructions to verify calcilors. XVI-B Relationship of Activities		and the latest and th			
			•	•		
Line	Explain below now each activity					
7	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purpose:	s) (See instructions)
			***		-	
	· · · · · · · · · · · · · · · · · · ·					
						
		-				
				-		
						
					•	
						
	-					
			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
						
						
•						_
			-			
						
			·			100 1000 1

Part	V:VII	Information R				eactions ar		ins With	Nonchai	ritabl		emni
Fart		Organizations	egarumy ira	msiers to	and man	sactions ai	iu itelationsii			TUB DI		cmp
1 [old the	organization direc	tly or indirectly	engage in	any of the f	ollowing with	h any other org	anization	described		Yes	No
		on 501(c) (other										1
	rganiza									1		
a T	ransfe	rs from the reportir	ng foundation to	o a nonchar	itable exem	pt organizatio	n of				.	
		1										X
(2) Othe	er assets								1a(2)		X
ьс	ther tr	ansactions										
		s of assets to a no										X
		hases of assets fr										X
	-	tal of facilities, equ	*									X
	-	nbursement arrang								•		X
		ns or loan guarante										X
		ormance of service										X
		of facilities, equipm										
d If	the a	nswer to any of th	ne above is "Yo	es," comple	te the follo	wing schedu	ile Column (b)	should al	ways show	the	tair m	larke
v 	alue of	the goods, other any transaction o	assets, or serv	vices given i	by the repo	rting toundat	tion if the foun	idation red de other s	ceived less	unan	iali ii	awad
			T) Description of tran					
(a) Line	no	(b) Amount involved N/A	(c) Name or	noncharitable	exempt organiza	N/		isieis, iraiisad	Cloris, and snai	ing ana	ii igei iie	
		N/A	-									
			+				·					
			+		·		·-·-					
		 -	 · · · · · · · · · · · · · · · · · 									
								· -				
			-								_	
							_					
				-	<u> </u>		_					
												_
									,			
2a ls	the fo	oundation directly	or indirectly a	ffiliated with	n, or related	to, one or	more tax-exem	pt organiz	ations _			_
d	escribe	d in section 501(c) (other than se	ection 501(c)(3)) or in se	ction 527?.				X Y	es [No
b if	"Yes,"	complete the follo	wing schedule									
		(a) Name of organization	ın) Type of organ	ization			tion of relations	hip		
		LY ELECTRIC		501 (C) (12)		COMMON D	IRECTOR	RS			
ASS	OCIAT	ION, INC.										
								<u>-</u>				
				ļ								
	T			1				to the best	af any bandada		aliaf it	
	Under p	enalties of perjury, I decl and complete Declaration o	are that I have exam of preparer (other than	nined this return, taxpayer) is based	including accom on all information	ipanying schedules n of which preparer	i and statements, and rhas any knowledge	to the best of	or my knowledg	e and o	eller, it	is true,
Sign		7	livall	4 -		.	CCO		May the IRS	discus	s this	retum
Here		Jaune	<u>Livour</u>		11-20		CFC	, <u> </u>	with the pre	`	, r	below
11010	Signa	ture of officer or trustee		Date	9	Title			See instructions	, <u>r</u>	Yes	No
	 	J		D	Anandres	5/	Date	Ι.		TIN		
Paid		Print/Type preparer's na		Prepare	2 1 X	Huston	Date 5/44/04	-	" "	2008	1600	6
Prepa	aror H	BRETT V HUSTO		^	- 0001	1	5/11/20	7<u>-</u>-0				-
•			PMG LLP 00 CAPITOL	MATT CI	JITE 2100	<u>.</u>		Firm's EIN	► 1222	. 552	, ,	
Use C	лиу	Firm's address 🕨 🌣	O CALITOR	ותחשה, סל	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•		I				

916-448-4700

SACRAMENTO, CA

Phone no

95814

Schedule B (Form 990, 990-EZ.

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2019

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information.

Name of the organization Employer identification number COPPER VALLEY ELECTRIC ASSOCIATION COMMUNITY FOUNDATION, INC. 38-3737079 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See = = = instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

JSA

9E1251 1 000

Employer identification number 38-3737079

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	COPPER VALLEY ELECTRIC ASSOCIATION, INC. P.O. BOX 45 GLENNALLEN,, AK 99588	\$ 50,676.	Person X Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				

Name of organization COPPER VALLEY ELECTRIC ASSOCIATION

Employer identification number

	COMMONITY FOUNDATION, INC.		13/0/9
Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Employer identification number Name of organization COPPER VALLEY ELECTRIC ASSOCIATION 38-3737079 COMMUNITY FOUNDATION, INC. Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.) ▶\$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (c) Use of gift (d) Description of how gift is held (b) Purpose of gift

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

38-3737079 UT 1	CHARITABLE PURPOSES			,	ATTACHMENT 1 PAGE 20
ATTACHMENT	ADJUSTED NET INCOME				
- •	INVESTMENT INCESTMENT				
2019 FORM 990-PF	= REVENUE AND EXPENSES PER BOOKS	500.			V 19-4F 2129214
COPPER VALLEY ELECTRIC ASSOCIATION	FORM 990PF, PART I - ACCOUNTING FEES DESCRIPTION	990-PF RETURN PREPARATION TOTALS			25790N 4296 3/25/2020 1:21:41 AM V

38-3737079

ATTACHMENT 2

EXPENSES	
OTHER	
· Н	
PART	
990PF,	
FORM	

CHARITABLE PURPOSES_	
ADJUSTED NET INCOME	
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS 156.	156.
	TOTALS
DESCRIPTION OTHER EXPENSES	

2019 FORM 990-PF

ATTACHMENT 3

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 3	DAGE 22

TIONS EXPENSE ACCT NEE AND OTHER PLANS ALLOWANCES	0.	0.	0.	0.	0.	0.
CONTRIBUTIONS TO EMPLOYEE COMPENSATION BENEFIT PLANS	.0	·	· O	· o	·	· O
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	SECRETARY .15	PRESIDENT .15	DIRECTOR .15	VICE PRESIDENT .15	DIRECTOR .15	DIRECTOR .15
NAME AND ADDRESS	DAN STOWE P.O. BOX 95 VALDEZ, AK 99686	PAUL KILDAL P.O. BOX 456 GLENNALLEN, AK 99588	LON RAKE P.O. BOX 1936 VALDEZ, AK 99686	WILL STARK P.O. BOX 3337 VALDEZ, AK 99686	JEFF SAXE P.O. BOX 1445 VALDEZ, AK 99686	FRED WILLIAMS P.O. BOX 88 COPPER CENTER, AK 99573

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TENT 3 (CONT'D)	EXPENSE ACCT AND OTHER ALLOWANCES	· ·	· · · · · · · · · · · · · · · · · · ·	o	ATTACHMENT 3
ATTACHN	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS		.0		
	COMPENSATION	Ö	.0	o o	
, AND TRUSTEES	ERAGE HOURS PER TO POSITION			'ALS	2129214
DFFICERS, DIRECTORS	TITLE AND AVI	TREASURER .15	DIRECTOR .15	GRAND TO'	1:21:41 AM V 19-4F
PART VIII - LIST	ME AND ADDRESS	VETTE DELAQUITO C 01 BOX 1716 LENNALLEN, AK 99588	ARK SHORTEN .O. BOX 139 OPPER CENTER, AK 99573		25790N 4296 3/25/2020 1:
	- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES ATTACHMENT 3 (CONT'D) CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER DRESS WEEK DEVOTED TO POSITION COMPENSATION BENEFIT PLANS ALLOWANCES	PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES ATTACHMENT 3 (CONT'D)	PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES DRESS QUITO TREASURER ATTACHMENT 3 (CONT'D) CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ATTACHMENT 3 (CONT'D) CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER ALLOWANCES AND OTHER ALLOWANCES AND OTHER BENEFIT PLANS AND OTHER BENEFIT PLANS AND OTHER BENEFIT PLANS ALLOWANCES CONTRIBUTIONS BENEFIT PLANS ALLOWANCES ALLOWANCES BENEFIT PLANS ALLOWANCES ALLOWANCES ALLOWANCES ALLOWANCES ALLOWANCES ALLOWANCES ALLOWANCES BENEFIT PLANS ALLOWANCES ALLOWANCES ALLOWANCES AND OTHER ALLOWANCES	PART VIII - LIST OF OFFICENS, AND TRUSTEES RESS TITLE AND AVERAGE HOURS PER TO COMPRESSATION SEASONT STAND OTHER AND
ATTACHMENT 4

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

SHARON CRISP CVEA MANAGER OF MEMBER SERVICES 907-822-5506

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

APPLICATIONS SHOULD BE SUBMITTED ONLINE TO CVEA.ORG OR TO THE CONTACT PERSON LISTED ABOVE.

SUBMISSION DEADLINES:

SUBMISSION DEADLINES CHANGE ON AN ANNUAL BASIS.

RESTRICTIONS OR LIMITATIONS ON AWARDS:

AWARDS ARE LIMITED TO CVEA SERVICE AREA AND TO THE APPLICANTS' NON-PROFIT STATUS. FURTHER GUIDELINES ARE LISTED ON THE FOLLOWING

HTTP://WWW.CVEA.ORG/COMMUNITYSUPPORT/COMMUNITYFOUNDATION.HTM

SHARON CRISP CRISP@CVEA.ORG

ASSOCIATION	
ELECTRIC	
VALLEY	
COPPER	

2019 FORM 990-PF

38-3737079

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PURPOSE OF GRANT OR CONTRIBUTION RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT RECIPIENT NAME AND ADDRESS YOUTH RALLY

501 (C) (3)

PRODUCTION, IMPLEMENTATION, AND PROGRAMMING FOR FOUR TEMPORARY FINE ART EXHIBITIONS POOL RENTAL FOR THE UPCOMING SEASON 501 (C) (3) 501 (C) (3) VALEDZ MUSEUM & HISTORICAL ARCHIVE 703 WEST TUDOR ROAD SUITE 200 VALEDZ TORPEDOES SWIM CLUB ALASKA POWER ASSOCIATION ANCHORAGE, AK 99503 VALEDZ, AK 99686 P O BOX 3106 P O BOX 8

1,500

200

3,718

YOUTH LEADERSHIP TRAINING (EDUCATION)

AMOUNT

3,000

832

SUPPORT THE SENIOR ACTIVITY PROGRAM RECEI DEC 1 4 2020 C153 OGDEN, UT 501 (C) (3) 501 (C) (3) 501 (C) (3) COPPER RIVER WATERSHED PROJECT VALED2 ADVENTURE ALLIANCE VALEDZ SENIOR CENTER CORDOVA, AK 99574 VALEDZ, AK 99686 VALEDZ, AK 99686 P O BOX 1560 P O BOX 1635

P O BOX 33

VALED2, AK 99686

ATTACHMENT 5

1,750 SLANA, AND MENTATA SCHOOLS, AS WELL AS HOMESCHOOL IMPLEMENTATION OF UP TO 6 AQUATIC ECOLOGY FIELD FAMILIES SUPPORTS FERRY TRAVEL, MILEAGE, FND TRIPS FOR STUDENTS IN KENNY LAKE, GLENNALLEN, DISCOUNTED PER DIEM FOR FOOD AND LODGING TEEN INTRO TO ICE CLIMBING TRAINING

PAGE 25 ATTACHMENT 5

V 19-4F

2129214

38-3737079

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 5 (CONT'D)

. EDUCATIONAL

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25790N 4296 3/25/2020

ASSOCIATION	
ELECTRIC	
VALLEY	
COPPER	

2019 FORM 990-PF

38-3737079

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 5 (CONT'D)

LATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT AMOUNT	DIVIDUAL - NO RELATIONSHIP EDUCATIONAL 1,000	DIVIDUAL - NO RELATIONSHIP EDUCATIONAL 500	SIVIDUAL - NO RELATIONSHIP SOO	SIVIDUAL - NO RELATIONSHIP SOU	DIVIDUAL - NO RELATIONSHIP EDUCATIONAL 500
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	INDIVIDUAL - NO RELATIONSHIP	INDIVIDUAL - NO RELATIONSHIP	INDIVIDUAL - NO RELATIONSHIP	INDIVIDUAL - NO RELATIONSHIP	INDIVIDUAL - NO RELATIONSHIP
RECIPIENT NAME AND ADDRESS	KASSANDRA HOWARD P O BOX 3158 VALDEZ, AK 99686	CADEN GERLACH P O BOX 168 GAKONA, AK 99586	LUKE WEIMER P O BOX 817 GLENNALEN, AK 99586	KENDALL WESENBERG P O BOX 2896 VALDE2, AK 99686	DESTINY GRAY P O BOX 3218 VALDEZ, AK 99686

TOTAL CONTRIBUTIONS PAID

22,900

ATTACHMENT 5 PAGE 27