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OMB No. 1545-0052

2019

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 01-01-20)19 , aı	nd ending 12-31-	2019	
		ındation tage Foundation		A Employer id	entification numbe	r
		HERITAGE FOUNDATION		94-3113818		
Num	ber and	d street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone nu	mber (see instruction	 ns)
9.	301 Gla	cier Hwy Suite 210		(907) 523-3682	2	
		n, state or province, country, and ZIP or foreign postal code 99801	1	C If exemption	application is pending	g, check here
G C	neck al	that apply: Initial return Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	ere 🗆
u c.	icck ui	Final return Amended return	Torrier public charley		ganizations meeting	▶ ⊔
		Address change Name change	test, chec	k here and attach cor	mputation 🕨 🔲	
H Ch	neck ty	pe of organization: ✓ Section 501(c)(3) exempt private	foundation		undation status was t n 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust \Box Other taxable	e private foundation			
of	year (f	xet value of all assets at end from Part II, col. (c), ▶\$ 238,695 J Accounting method: □ Other (specify) (Part I, column (d) must			ation is in a 60-month n 507(b)(1)(B), chec	
			I		Γ	<u></u>
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	269,532			
	2	Check ► ☐ if the foundation is not required to attach				
	3	Sch. B Interest on savings and temporary cash investments	35	35		
	4	Dividends and interest from securities	33]		
	5a	Gross rents	5,591	5,591		
Revenue	b	Net rental income or (loss) 5,591				
	6a	Net gain or (loss) from sale of assets not on line 10				
	b	Gross sales price for all assets on line 6a				
~	7 8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	10,014			
	12	Total. Add lines 1 through 11	285,172	5,626		
	13	Compensation of officers, directors, trustees, etc.	80,434			80,434
	14	Other employee salaries and wages	62,630			62,630
ses	15	Pension plans, employee benefits	36,842			36,843
ens	16a	Legal fees (attach schedule)				
Ξxp	b	Accounting fees (attach schedule)	29,860			
ve l	_ c	Other professional fees (attach schedule)	20,979			10,490
rati	17	Interest				
and Administrative Expenses	18	Taxes (attach schedule) (see instructions)	66-1 4.000	4.000	0	
mir	19	Depreciation (attach schedule) and depletion	1,833		<u> </u>	
Ad	20 21	Occupancy	10,000 26,532			5,000 13,266
pu	22	Printing and publications	300			300
g g	23	Other expenses (attach schedule)	23,930			14,089
Operating	24	Total operating and administrative expenses.				, ==
)er:		Add lines 13 through 23	293,340	1,833	0	223,052
Ö	25	Contributions, gifts, grants paid	61,750			61,750
	26	Total expenses and disbursements. Add lines 24 and 25	355,090	1,833	0	284,802
	27	Subtract line 26 from line 12:	333,030	1,000		251,502
	а	Excess of revenue over expenses and				
	ь	disbursements Net investment income (if negative, enter -0-)	-69,918			
	C	Adjusted net income (if negative, enter -0-)		3,793		
For		work Reduction Act Notice, see instructions.	l	Cat. No. 11289)	<u> </u> < For	<u> </u> m 990-PF (2019)

Beginning of year

246,879

22,604

22,604

224,275

224,275

246,879

238,695

84,338

84,338

154.357

154,357

238,695

1

2

3 4

5

6

224,275

-69,918

154,357

154,357 Form **990-PF** (2019)

Page 2

238,695

End of year

Form 990-PF (2019)

16

17

18

19

20 21

22 23

24

25

26 27

28

29

30

Part III

2

3

4

Liabilities

Net Assets or Fund Balances

Total assets (to be completed by all filers—see the

Loans from officers, directors, trustees, and other disqualified persons

Foundations that do not follow FASB ASC 958, check here 🕨 🗀

Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that follow FASB ASC 958, check here

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg., and equipment fund

instructions. Also, see page 1, item I)

Grants payable

Other liabilities (describe ...

Accounts payable and accrued expenses .

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Net assets with donor restrictions .

	1	Cash—non-interest-bearing		38,008		215		215
	2	Savings and temporary cash investments		62,043		60,235		60,235
	3	Accounts receivable ►						
		Less: allowance for doubtful accounts ▶		0		33,250		33,250
	4	Pledges receivable ▶						
		Less: allowance for doubtful accounts ▶						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
		disqualified persons (attach schedule) (see instructions)						
	7	Other notes and loans receivable (attach schedule)						
		Less: allowance for doubtful accounts ▶						
S	8	Inventories for sale or use						
Assets	9	Prepaid expenses and deferred charges						
As	10a	Investments—U.S. and state government obligations (attach schedule)						
	b	Investments—corporate stock (attach schedule)						
	С	Investments—corporate bonds (attach schedule)						
	11	Investments—land, buildings, and equipment: basis ▶55,000						
		Less: accumulated depreciation (attach schedule) ►		12,651	% j	10,818		10,818
	12	Investments—mortgage loans						
	13	Investments—other (attach schedule)						
	14	Land, buildings, and equipment: basis ►						
		Less: accumulated depreciation (attach schedule) > 24,073						
	15	Other assets (describe >)	9	134,177	% J	134,177	* J	134,177

Page **3**

	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs		ase mo	(c) ce acquired o., day, yr.)	(d) Date sold (mo., day, yr
1a					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		Gain o	n) r (loss)) minus (g)
a					
<u>b</u>					
d					
e					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation on 12/31/69			I)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col	. (k), but not	h) gain minus less than -0-) o om col.(h))
a					
b					
C					
d e					
·	e or (net capital loss) gain or (loss) as defined in sections : art I, line 8, column (c) (see instructi	. , , , ,	2 3		
	Under Section 4940(e) for Re	educed Tax on Net Investme			
(For optional use by domestic	private foundations subject to the sec	ction 4940(a) tax on net investment	income.)		
If section 4940(d)(2) applies,	eave this part blank.				
	he section 4942 tax on the distributal ot qualify under section 4940(e). Do	• • • • • • • • • • • • • • • • • • • •	period?	☐ Ye	es 🗹 No
	mount in each column for each year;	see instructions before making any	entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(col.	(d) Distribution ration (b) divided by continuous	ol. (c))
2018	266,962	66,457			4.017064
2017	195,911	59,942 63,424			3.268343 3.187185
2015	161,209				2.337412
2014	107,545	68,721			1.564951
2 Total of line 1, column	(d)		2		14.374955
number of years the fou	o for the 5-year base period—divide b ndation has been in existence if less oncharitable-use assets for 2019 fron	than 5 years . ´ ´	3 4		2.874991 65,685
5 Multiply line 4 by line 3		·	5		188,844
• • •	ent income (1% of Part I, line 27b)		6		38
7 Add lines 5 and 6			7		188,882
. , ,	tions from Part XII, line 4 ,		8		284,802
If line 8 is equal to or gr instructions.	reater than line 7, check the box in Pa	art VI, line 1b, and complete that pa	rt using a 1%	o tax rate. See	e the Part VI

Page **6**

ia	During the year did the foundation p	ау о	r incur any amount to:							Yes	No
	(1) Carry on propaganda, or otherw	ise a	ttempt to influence legisla	ation (section 4945(e))?		☐ Yes	✓	No			
	(2) Influence the outcome of any sp	ecifi	public election (see sect	ion 4955); or to carry				110			
	on, directly or indirectly, any vo	ter re	egistration drive?			☐ Yes		No			
	(3) Provide a grant to an individual	for t	ravel, study, or other sim	ilar purposes?		✓ Yes		No			
	(4) Provide a grant to an organizati	on ot	her than a charitable, etc	, organization described	l		_				
	in section 4945(d)(4)(A)? See ir	ıstru	ctions			☐ Yes	✓	No			
	(5) Provide for any purpose other the	nan r	eligious, charitable, scien	tific, literary, or							
	educational purposes, or for the		•			Yes	✓	No			
b	If any answer is "Yes" to $5a(1)-(5)$,		=			cribed in					
	Regulations section 53.4945 or in a				uctions		•		5b		No
	Organizations relying on a current n		5 5			▶]			
С	If the answer is "Yes" to question 5a										
	tax because it maintained expenditu					Yes	. 🗌	No			
	If "Yes," attach the statement requir		-								
ia	Did the foundation, during the year,										
	a personal benefit contract?					Yes	✓	No			
b	Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal be	nefit contract	:?	•		6b		No
	If "Yes" to 6b, file Form 8870.	_									
'a	At any time during the tax year, was					Yes	✓	No			
b	If "Yes", did the foundation receive		,				•		7b		
3	Is the foundation subject to the sect					tion or					
	excess parachute payment during th					☐ Yes		No			
Pai	t VIII	offic	ers, Directors, Trust	ees, Foundation Ma	inagers, H	ighly Pa	id E	mplo	yees,		
	and Contractors										
1	List all officers, directors, trustee							_			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Cont employee be	tributions enefit plan				se acc	
	(a) Name and address		devoted to position	-0-)	deferred o			'∣ ∘	ther al	lowanc	es
ee A	Additional Data Table										
		1									
		1									
		1									
		1									
2	Compensation of five highest-pai	d en	nployees (other than th	ose included on line 1	see instru	uctions).	If no	ne, e	nter "	NONE.	"
			(b) Title, and average			tributions			_		
a)	Name and address of each employee more than \$50,000	paid	hours per week	(c) Compensation		/ee benef nd deferre				se acco owance	
	more than \$50,000		devoted to position			ensation		0.	inci un	o mane.	
ota	I number of other employees paid over	er \$5	0,000			. ▶					
								For	m 99 ()-PF (2019

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

Form 990-PF (2019)		Page 7
Part VIII Information About Officers, Directors, Trustees, Foundaries and Contractors (continued)	oundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services	s (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include releva organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1 41 EDUCATIONAL SCHOLARSHIPS DISTRIBUTED		54,450
2 CANCER CONNECTION		4,000
3 JUNEAU ANIMAL RESCUE		2,500
4 HOONAH CITY SCHOOL: DONATION TO CLOSE UP TRIP		800
Part IX-B Summary of Program-Related Investments (see ins	structions)	
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2.	Amount
1		
7		
<u>-</u>		
All other program-related investments. See instructions.		
3		
1 - 1 - 1 - 1 - 2		
Total. Add lines 1 through 3		
		Form 990-PF (2019)

5 6

7

1a

1b

2

3a 3b

4

5

284,802

284,802

284,764

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38

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

5

6

1

2

3

4

5

b

Part XII

Form 990-PF (2019)				Page 9
Part XIII Undistributed Income (see instruc	ctions)			
	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				0
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			0	
b Total for prior years: 2017, 2016, 2015		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
		ı		

From 2017. e From 2018. . . .

XII, line 4: ▶ \$

indicated below:

f Total of lines 3a through e. 4 Qualifying distributions for 2019 from Part

6 Enter the net total of each column as

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not

applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9:

a Excess from 2015.

b Excess from 2016. .

c Excess from 2017. . d Excess from 2018. . e Excess from 2019. .

Subtract lines 7 and 8 from line 6a

a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions).

c Treated as distributions out of corpus (Election

required—see instructions).

d Applied to 2019 distributable amount. . .

e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2019.

(If an amount appears in column (d), the

same amount must be shown in column (a).)

157.831

199,041

192.982

104.177

549,854

654.031

654,031

Form **990-PF** (2019)

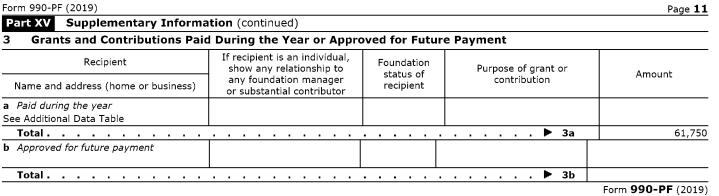
EDUCATIONAL SCHOLARSHIP: A COMPLETED APPLICATION MUST BE SUBMITTED ALONG WITH A FINANCIAL NEEDS ASSESSMENT, CURRENT AVAILABLE RESOURCE STATEMENT, PROJECTED BUDGET, WAIVER, HIGH SCHOOL TRANSCRIPTS OR GED CERTIFICATE LETTER, WRITTEN NOTIFICATION OF ACCEPTANCE FROM THE COLLEGE OR UNIVERSITY, ETC. VOCATIONAL EDUCATION ASSISTANCE: MAIL OR FAX A COMPLETED APPLICATION. MUST BE SUBMITTED ALONG WITH A FINANCIAL NEEDS ASSESSMENT, CURRENT AVAILABLE RESOURCE STATEMENT, PROJECTED BUDGET, HIGH SCHOOL TRANSCRIPTS OR GED CERTIFICATE, WAIVER FOR RELEASE OF INFORMATION, LETTER OR WRITTEN NOTIFICATION OF ACCEPTANCE FROM THE VOCATIONAL PROGRAM, ETC. CULTURAL EDUCATION ASSISTANCE PROGRAM: MAIL OR FAX COMPLETED APPLICATION WITH A DESCRIPTION OF THE TRAINING PROGRAM, INCLUDING COSTS ASSOCIATED WITH THIS COURSE OF INSTRUCTION. BROCHURES FROM THE TRAINING PROGRAM WILL MEET THIS REQUIREMENT.

c Any submission deadlines:

EDUCATIONAL SCHOLARSHIP: SEPTEMBER 30 FOR 1ST/2ND QUARTER OR 1ST SEMESTER JANUARY 30 FOR 3RD/4TH OR

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

EDUCATIONAL SCHOLARSHIP: SOME OF THE REQUIREMENTS ARE: - BE A HUNA TOTEM CORPORATION SHAREHOLDER OR DESCENDANT - HAVE A HIGH SCHOOL DIPLOMA OR GED CERTIFICATE - BE ACCEPTED BY OR ATTENDING AN ACCREDITED COLLEGE OR UNIVERSITY - BE ENROLLED IN A MINIMUM OF SIX (6) SEMESTER HOURS - BE IN GOOD ACADEMIC STANDING - HAVE SUBMITTED YOUR FREE APPLICATION FOR FEDERAL STUDENT AID VOCATIONAL EDUCATION ASSISTANCE: - BE HUNA TOTEM SHAREHOLDER OR DESCENDANT. THE TERM DESCENDANT REFERS TO 'A PERSON WHO IS DESCENDANT FROM A NATIVE, OR ADOPTED BY A NATIVE, OR ADOPTED BY A DESCENDANT OF A NATIVE' (AS DEFINED IN THE ALASKA NATIVE CLAIMS SETTLEMENT ACT AMENDMENTS OF 1987) - BE UNEMPLOYED OR UNDEREMPLOYED - BE AT LEAST 18 YEARS OF AGE. HIGH SCHOOL STUDENTS ARE ELIGIBLE AT AGE 17 - IF ELIGIBLE, APPLY TO THE BUREAU OF INDIAN AFFAIRS AGENCY CONTRACTED TO PROVIDE VOCATIONAL EDUCATION FUNDING ASSISTANCE IN YOUR AREA - VOCATIONAL EDUCATION COURSES MUST BE APPROVED BY A NATIONAL ACCREDITATION ASSOCIATION OR THE AL



	me-Producing Activities Unrelated by	ousiness income	Excluded by section	512 513 or 514	(e)
inter gross amounts unless otherwise	indicated. (a)	(b)	(c)	(d)	Related or exempt function income
Program service revenue: a	Business code	Amount	Exclusion code	Amount	(See instructions.)
b					
c					
d e					
f					
g Fees and contracts from governm					
 Membership dues and assessments Interest on savings and temporary investments 	cash				
4 Dividends and interest from securit			14	35	
5 Net rental income or (loss) from re					
a Debt-financed property.					
b Not debt-financed property.6 Net rental income or (loss) from per			16	5,591	
7 Other investment income					
3 Gain or (loss) from sales of assets inventory					
9 Net income or (loss) from special e					
O Gross profit or (loss) from sales of					
1 Other revenue:				40.044	
a RRVC EVENT b			01	10,014	
С					
d					
de				15 640	
de 2 Subtotal. Add columns (b), (d), an 3 Total. Add line 12, columns (b), (d)	d (e)		13	15,640	
de 2 Subtotal. Add columns (b), (d), an 3 Total. Add line 12, columns (b), (c) (See worksheet in line 13 instructions)	d (e). d), and (e). ons to verify calculations.)			•	
d e 2 Subtotal. Add columns (b), (d), an 3 Total. Add line 12, columns (b), (c) (See worksheet in line 13 instruction Part XVI-B Relationship of A	d (e) d), and (e)	hment of Exem	ıpt Purposes		
de 2 Subtotal. Add columns (b), (d), an 3 Total. Add line 12, columns (b), (c), (c) (See worksheet in line 13 instruction Part XVI-B Relationship of Actions No. Explain below how each	d (e). d), and (e). ons to verify calculations.)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d e 2 Subtotal. Add columns (b), (d), an 3 Total. Add line 12, columns (b), (c) (See worksheet in line 13 instruction Part XVI-B Relationship of A Line No. Explain below how each the accomplishment of the	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d e 2 Subtotal. Add columns (b), (d), an 3 Total. Add line 12, columns (b), (c) (See worksheet in line 13 instruction Part XVI-B Relationship of A Line No. Explain below how each the accomplishment of the	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d e 2 Subtotal. Add columns (b), (d), an 3 Total. Add line 12, columns (b), (c) (See worksheet in line 13 instruction Part XVI-B Relationship of A Explain below how each the accomplishment of the	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
d e 2 Subtotal. Add columns (b), (d), an 3 Total. Add line 12, columns (b), (c) (See worksheet in line 13 instruction Part XVI-B Relationship of A Line No. Explain below how each the accomplishment of the	d (e) d), and (e)	hment of Exem ted in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	15,640

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharita Exempt Organizations	able	
L Did the organ	nization directly or indirectly engage in any of the following with any other organization described in section 501		

Part	XVII	Exempt Organia	zations						•			
		anization directly or in than section 501(c)(3)								ion 501	Yes	No
a Tran	nsfers f	rom the reporting foun	dation to a no	onchar	itable exe	empt organizatio	n of:					
(1)	Cash.									. 1a(1)		No
(2)	Other	assets								1a(2)		No
b Oth	er trans	sactions:										
		of assets to a nonchari	•	-						1b(1)		No
(2)	Purcha	ases of assets from a n	oncharitable	exemp	ot organiz	zation				1b(2)		No
(3)	Renta	l of facilities, equipmer	nt, or other as	sets.						1b(3)	_	No
(4)	Reimb	oursement arrangemen	ts							. 1b(4)	+ +	No
		or loan guarantees.								. 1b(5)	 	No
		mance of services or m	•		_					. 1b(6)		No
	-	facilities, equipment, n	-									No
		er to any of the above ls, other assets, or ser										
		saction or sharing arra										
		_	_				_					
(a) Line	No.	(b) Amount involved	(c) Name of r	nonchai	ritable exe	mpt organization	(d) De	scription of	transfers, transactions	s, and sharing arr	angemen	ts
2a Is th	ne foun	dation directly or indire	ectly affiliated	with.	or relate	d to, one or mor	e tax-exen	not organ	izations			
		n section 501(c) (other	•			•				′es 🔽 No		
		mplete the following so		301(0	.,(3), 0, 1	30000011 327. 1				C3		
D 11	163, 60	(a) Name of organization		- 1	(E	Type of organiza	tion		(c) Descriptio	n of relationship		
		. , , , , , , , , , , , , , , , , , , ,				,,,			, , ,	•		
	of my	r penalties of perjury, y knowledge and belief n preparer has any kno	, it is true, co									
Sign		, ,	····cuge·			1				May the IRS o	liscuss th	iis
Here	*	****				2020-11-15	, k	*****		return		
	 ▶ −					1	—) ·			with the prepared below	arer snov	vn
	ľ s	Signature of officer or to	rustee			Date	•	Title		(see instr.)	Z γes □] No
		D : ./=										
		Print/Type preparer's	name	rrepa	rer's Sigr	іасиге	Date		Check if self-	PTIN		
									employed ▶ □	P0177	2194	
Paid		Nayyir Rawhani CP	'A				2020	0-11-10				
Prep	arer	Firm's name ▶ BDO	USA LLP						l .			
Jse (I I I I I I I I I I I I I I I I I I I	OSA LLP							Firm's EIN ▶		
		Firm's address ▶ 36	01 C STREET	STE 6	500							
		A N	ICHODACE A	V 005	203					Phone no. (90)	7) 278-8	3878
		I AN	ICHORAGE, A	N 995	503						,	
		1										

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account. hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation WILLIAM 'OZZIE' SHEAKLEY CHAIRMAN O 1.0 6002 Gull Way JUNEAU, AK 99801 850 MARY PETERSON SECRETARY/TREASURER n n 1.0 PO Box 523 Hoonah, AK 99829 BERTHA FRANULOVICH TRUSTEE 1.0 PO Box 504 Anacortes, WA 98221 GORDON GREENWALD TRUSTEE 1,050 0 0 1.0 PO Box 231 Hoonah, AK 99829 ANTHONY LINDOFF TRUSTEE 0 1.0 1012 Edwin Place JUNEAU, AK 99801 ANGELA MICHAUD TRUSTEE 850 0 1.0 6627 Notting Hill Drive ANCHORAGE, AK 99504 VALARIE VELER TRUSTEE 650 0 1.0 PO Box 387 HOONAH, AK 99829 AMELIA WILSON EXECUTIVE DIRECTOR 72,680 4,354

40.0

PO BOX 524 HOONAH, AK 99829

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

Breylan MartinPO Box 1264 None I Education Assistance 2,000 Sandpoint, ID 83864	a Paid during the year				
	,	None	I	Education Assistance	2,000

Sandpoint, 1D 03004				
Clare Martin1818 37th Street Anacortes, WA 98221	Grandchild of Trustee Bertha Franulovich	I	Education Assistance	2,000
Corbin McCordPO Box 7213	None	I	Education Assistance	2,000

61,750

Anacortes, WA 98221	Franulovich	1	Education Assistance	2,000
Corbin McCordPO Box 7213 Ketchikan, AK 99901	None	I	Education Assistance	2,000

Total.

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor.

	or substantial continuator			
a Paid during the year				
Daniel Felton12125 Woodchase Circle	None	I	Education Assistance	2,000

Anchorage, AK 99556	Hone	•	Eadeasion / sociation	2,000
Ethan Sargent7529 Braemar Drive Edmonds, WA 98026	None	I	Education Assistance	2,000

Ethan Sargent7529 Braemar Drive Edmonds, WA 98026	None	I	Education Assistance	2,000
Jacqueline BennumPO Box 539	None	I	Education Assistance	2,000

Edmonds, WA 98026				·
Jacqueline BennumPO Box 539	None	I	Education Assistance	2,000

Dacqueline BennumPO Box 539 N Kake, AK 99830	None	I	Education Assistance	2,000

61,750

Jacqueline BennumPO Box 539	None	I	Education Assistance	2,0
Kake, AK 99830				

Total.

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

T			_	
I	a Paid during the year			
l	Hame and dadress (nome or business)	or substantial contributor		

Marlis Boord711 Monastery Street	None	т	Education Assistance	2 000
Margaret Haube4056 Granite Drive Juneau, AK 99801	None	I	Education Assistance	2,000

Juneau, AK 99801				
Marlis Boord711 Monastery Street Sitka, AK 99835	None	I	Education Assistance	2,000

t	Nielessies Austistand Assessite De NIM	NI		E 1	2.000
	Marlis Boord711 Monastery Street Sitka, AK 99835	None	I	Education Assistance	2,000

Sitka, AK 99835				
Nizhonniya Austin10901 Argonite Dr NW	None	I	Education Assistance	2,000

Nizhonniya Austin10901 Argonite Dr NW	None	I	Education Assistance	2,000
Albuquerque, NM 87114				

61,750

Mizhonniya Austini10901 Argonite Di MW	None	1	Education Assistance	i ∠,\
Albuquerque, NM 87114				

Total .

Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Peter Shirley10714 NE 86th Cir Vancouver, WA 98662	None	I	Education Assistance	2,000

Vancouver, WA 98662				
Richard Jack SiverlyPO Box 210792 Auke Bay, AK 99821	None	I	Education Assistance	2,000
				i l

Auke Bay, AK 99821	None	1	Education Assistance	2,000
Rodney Williamson JrPO Box 1296	None	I	Education Assistance	2,000

61,750

rake bay/rak bbozz				<u> </u>
Rodney Williamson JrPO Box 1296 Haines, AK 99827	None	I	Education Assistance	2,00

Rodney Williamson JrPO Box 1296	None	I	Education Assistance	2,0
Haines, AK 99827				

Rodney Williamson JrPO Box 1296	None	I	Education Assistance	2,
Haines, AK 99827				

Total.

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Ronin Ruerup3529 Blue Jay Way North Pole, AK 99705	Son of Executive Director Amelia Wilson	I	Education Assistance	2,000

2,000

61,750

North Pole, AK 99705	Amena Wilson			
Samuel Marqueda Lamebull 7431 Tangle Ct Anchorage, AK 99504	None	I	Education Assistance	

Samuel Marqueda Lamebull	None	I	Education Assistance	
7431 Tangle Ct				
Anchorage, AK 99504				

Total .

7431 Tangle Ct Anchorage, AK 99504				
Shannon Bible4032 Delta Drive Apt 2	None	I	Education Assistance	2.0

Anchorage, AK 99504				
Shannon Bible4032 Delta Drive Apt 2	None	I	Education Assistance	2,000

· · · · · · · · · · · · · · · · · · ·				i .
Shannon Bible4032 Delta Drive Apt 2 Juneau, AK 99803	None	I	Education Assistance	2,000

Shannon Bible4032 Delta Drive Apt 2 Juneau, AK 99803	None	Ι	Education Assistance	2,0
Julieau, AK 99803				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

, ,	or substantial contributor			
a Paid during the year				
Alice JohnsonPO Box 32096	None	I	Education Assistance	1,000

Juneau, AK 99803				
Ashley WilliamsonPO Box 1296 Haines, AK 99827	None	I	Education Assistance	1,00

Ashley WilliamsonPO Box 1296 Haines, AK 99827	None	I	Education Assistance	1,000
Ava Martin1818 37th Street	Grandchild of Trustee Bertha	I	Education Assistance	1,000

Hallies, Alt 33027				
Ava Martin1818 37th Street	Grandchild of Trustee Bertha	I	Education Assistance	1,000
Anacortes, WA 98221	Franulovich			

61,750

Ava Martin1818 37th Street	Grandchild of Trustee Bertha	I	Education Assistance	1,00
Anacortes, WA 98221	Franulovich			

Total .

Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Brenden Martin1248 Kina Street Kailua, HI 96734	None	I	Education Assistance	1,000

Kallua, HI 96734				
Cheyenne SiverlyPO Box 210792 Auke Bay, AK 99821	NONE	I	Education Assistance	

Cheyenne SiverlyPO Box 210792 Auke Bay, AK 99821	NONE	I	Education Assistance	1,000
Curtis Whitman24308 Meridian Ave S	None	ī	Education Assistance	1.000

Auke Bay, AK 99821				·
Curtis Whitman24308 Meridian Ave S	None	I	Education Assistance	1,000

				i .
Curtis Whitman24308 Meridian Ave S	None	I	Education Assistance	1,00
Bothell, WA 98021				i

othen, www. booli		
Total	 ▶ 3a	61,750

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year				
David Hinchman 2690 W Calle Cuero De Vaca	None	I	Education Assistance	1,000

Tucson, AZ 85745				
David Lindstrom632 Douglas Drive Hoonah, AK 99829	None	I	Vocational	1,

David Lindstrom632 Douglas Drive Hoonah, AK 99829	None	I	Vocational	1,000
Eric Norman7835 West List Lane Parma, OH 44130	None	I	Education Assistance	1,000

Hoonah, AK 99829				
Eric Norman7835 West List Lane Parma, OH 44130	None	I	Education Assistance	1,000

Eric Norman7835 West List Lane Parma, OH 44130	None	I	Education Assistance	1,00

Parma, OH 44130		
Total	 ▶ 3a	61,750

Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Ethan Gray230 Hemlock St Hoonah AK 99801	NONE	I	Education Assistance	1,000

Hoonan, AK 99801				
Haley Mercer1250 18 Mile Rd Barryton, MI 49305	None	I	Education Assistance	1,000

Barryton, MI 49305				
Heather PowellPO Box 385	None	I	Cultural	1,000

Bull 7 to 11/112 13 5 6 5				
Heather PowellPO Box 385	None	I	Cultural	1,00
Hoonah, AK 99829				

Heather PowellPO Box 385	None	I	Cultural	1,
Hoonah, AK 99829				I

<u> </u>		
oonah, AK 99829		1

110011411,7111 55025		
Total	 ▶ 3a	61,750

Recipient Foundation Purpose of grant or If recipient is an individual, Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor			
a Paid during the year				
Jay EricksonPO Box 633 Hoonah, AK 99829	None	I	Vocational	1,000
				7

Hoonah, AK 99829				
John Hawkins5875 Glacier Hwy 48 Juneau, AK 99801	None	I	Education Assistance	1,000

John Hawkins5875 Glacier Hwy 48 Juneau, AK 99801	None	I	Education Assistance	1,000
Katelynn Drake4452 Wood Duck Ave	None	I	Education Assistance	1,000

Julieau, AK 99001				
Katelynn Drake4452 Wood Duck Ave	None	I	Education Assistance	1,000

Katelynn Drake4452 Wood Duck Ave	None	I	Education Assistance	1,0
Juneau, AK 99801				

atelynn Drake4452 Wood Duck Ave	None	I	Education Assistance	1,0
uneau, AK 99801				

uneau, AK 99801		1

	.1		
Total		3a	61 750

Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Laura Revels3705 Arctic Blvd 245 Anchorage, AK 99503	None	I	Education Assistance	1,000

	/ inchorage, / ii				
	Miranda Worl9159 Wolfram Way Juneau, AK 99801	None	I	Education Assistance	1,000
1			_		

Juneau, AK 99801				,
Morgan StevensonPO Box 434	None	I	Education Assistance	1,000

Morgan StevensonPO Box 434 Hoonah, AK 99829	None	I	Education Assistance	1,000

61,750

Morgan StevensonPO Box 434	None	I	Education Assistance	1,
Hoonah, AK 99829				

Total.

Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Nyah Martin2003 Windbrook Dr SE Palm Bay, FL 32909	None	I	Education Assistance	1,000

Palm Bay, FL 32909				
Randi Jo KubikPO Box 22469 Juneau, AK 99802	None	I	Vocational	1,000

Randi Jo KubikPO Box 22469 Juneau, AK 99802	None	I	Vocational	1,000
Ricardo Worl9159 Wolfram Way	None	I	Education Assistance	1,000

Juneau, AK 99802				
Ricardo Worl9159 Wolfram Way	None	I	Education Assistance	1,000

61,750

Ricardo Worl9159 Wolfram Way	None	I	Education Assistance	1,0
Juneau, AK 99801				

Total.

Recipient Foundation Purpose of grant or If recipient is an individual, Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Sage Revels-Garlock6004 Debarr Road Anchorage, AK 99504	None	I	Education Assistance	1,000

, in contrage, , are proof				i
Toriana Fogg5892 Mont Juneau, AK 99801	None	I	Education Assistance	1,000
Toroton Skaflostad712 Huna Court	Nana	т	Vecational	1 000

Juneau, AK 99801				
Torsten Skaflestad713 Huna Court	None	I	Vocational	1,000

61,750

Torsten Skaflestad713 Huna Court	None	I	Vocational	1,00
Hoonah, AK 99829				

orsten Skallestad/15 Hulla Court	None	1 1	Vocational	Δ,
loonah, AK 99829				

Total .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Levi MillsPO Box 385	None	I	Cultural	350

Hoonah, AK 99829	None	-	Carcarar	
Martha MosesPO Box 6142 Sitka, AK 99835	None	I	Cultural	100

Martha MosesPO Box 6142 Sitka, AK 99835	None	I	Cultural	100
Cancer ConnectionPO Box 20329	none	NC	Donation	4 000

Sitka, AK 99835		-	- Curtain ar	100
Cancer ConnectionPO Box 20329	none	NC	Donation	4,000

Cancer ConnectionPO Box 20329 none NC Donation	4,000

61,750

Cancer ConnectionPO Box 20329	none	NC	Donation	4,0
Juneau, AK 99802				

Total.

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor			
a Paid during the year				
Juneau Animal Rescue7705 Glacier Hwy Juneau, AK 99801	none	NC	Donation	2,500

Juneau Animal Rescue7705 Glacier Hwy Juneau, AK 99801	none	NC	Donation	2,500
Hoonah City School366 Garteeni Hwy	none	NC	Donation	800

Hoonah City School366 Garteeni Hwy Hoonah, AK 99829	none	NC	Donation	800

61,750

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491321022320				
Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.						
TY 2019 Depreciation Schedule						
Name: H	Huna Heritage Fo	undation				

EIN:	94-3113818

2000-08-19

55,000

42,349 SL

BUILDING

Depreciation Schedule										
I	Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
I	MISC FURN & EQUIP	2003-03-19	21,768	21,768	SL	15				
I	WEBSITE CREATION	2001-10-14	2,305	2,305	SL	5				

30

1,833

1,833

1,833

Name: Huna Heritage Foundation

55,000

	EIN: 94-3113818		
Category/ Item	Cost/Other Basis	Accumulated Depreciation	

BUILDING

10,818

44,182

Book Value

End of Year Fair Market Value

Name: Huna Heritage Foundation

21,768

2,305

As Filed Data -

	EIN: 94-3113818	
Category / Item	Cost / Other Basis	Accumulated Depreciation

efile GRAPHIC print - DO NOT PROCESS

MISC FURN & EQUIP

WEBSITE CREATION

13818	

DLN: 93491321022320

ated

21,768

2,305

Book Value

End of Year Fair Market Value

Name: Huna Heritage Foundation

ETN: 0/-3113818

OTHER ASSETS

Other Assets Schedule	-3113010		
Description	Beginning of Year -	End of Year - Book	End of

Other Assets Schedule					
Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value			
131,800	131,800	131,800			
	Book Value	Book Value Value			

2,377

2,377

2,377

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491321022320			
TY 2019 Other Expenses Schedule							
Name:	Huna Heritage F	Foundation					
EIN: 94-3113818							
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
SUPPLIES	8,506			8,506			
UTILITIES	7,331						
MISCELLANEOUS EXPENSE	3,918			3,918			

3,329

537

309

1,665

INSURANCE

OFFICE EXPENSE

MEALS

DLN: 93491321022320

Name: Huna Heritage Foundation

EIN: 94-3113818

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Other Income Schedule

Other Income Schedule						
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			
RRVC Event Net Revenue	10,014					

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491321022320								
TY 2019 Other Professional Fees Schedule								
Name: Huna Heritage Foundation								
EIN: 94-3113818								
<u> </u>		· 		† 1				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable				
Purposes								
CONTRACT SERVICES	17,601		1	8,800				
IT SERVICES	2,531			1,266				

OTHER PROFESSIONAL SERVICES

efile GRAPHIC print - DO NOT	As Filed Data -		DL	N: 93491321022320				
TY 2019 Taxes Schedule								
	Name: Huna Heritage Foundation							
	EIN:	94-3113818						
Category Amount Net Investment Adjusted Net Disbursements Income Income Purposes								
EXCISE TAX								

efile GRAPHIC print - DC	NOT PROCESS As Filed Data	-		DLN: 93491321022320
Schedule B	Sche	dule of Contributors		OMB No. 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		to Form 990, 990-EZ, or 990-PF. .gov/Form990 for the latest infor	mation.	2019
Name of the organization Huna Heritage Foundation			Employer	dentification number
	(ano):		94-3113818	3
Organization type (chec	Conej.			
Filers of:	Section:			
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization		
	☐ 4947(a)(1) nonexempt ch	naritable trust not treated as a p	private foundation	
	☐ 527 political organization			
Form 990-PF	✓ 501(c)(3) exempt private	foundation		
	4947(a)(1) nonexempt ch	naritable trust treated as a priva	te foundation	
	501(c)(3) taxable private	foundation		
	ion filing Form 990, 990-EZ, or 990 property) from any one contributor.			
Special Rules				
under sections 50 received from any	n described in section 501(c)(3) fil 9(a)(1) and 170(b)(1)(A)(vi), that c one contributor, during the year, t 1h, or (ii) Form 990-EZ, line 1. Co	hecked Schedule A (Form 990 otal contributions of the greater	or 990-EZ), Part II, line 13	, 16a, or 16b, and that
during the year, to	n described in section 501(c)(7), (tal contributions of more than \$1,0 e prevention of cruelty to children	000 <i>exclusively</i> for religious, ch	aritable, scientific, literary,	
during the year, co If this box is check purpose. Don't co	n described in section 501(c)(7), (ontributions exclusively for religious ted, enter here the total contribution mplete any of the parts unless the e, etc., contributions totaling \$5,00	s, charitable, etc., purposes, bu ons that were received during th General Rule applies to this o	it no such contributions tot e year for an e <i>xclusively</i> r ganization because it rece	aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i>
990-EZ, or 990-PF), but it	that isn't covered by the General must answer "No" on Part IV, line t I, line 2, to certify that it doesn't i	e 2, of its Form 990; or check th	e box on line H of its Form	·
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2019)

for Form 990, 990-EZ, or 990-PF.

ame of organizat una Heritage Fou		Employer identification 94-3113818	Employer identification number 94-3113818		
Part I ontributors	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	Huna Totem Corporation 9301 Glacier Hwy Suite 200 Juneau, AK 99801	\$ 206,278	✓ Person☐ Payroll☐ Noncash		
(2)		(5)	(Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	Institute of Museum and Library Ser 955 LEnfant Plaza North SW Suite Washington, DC 20024	\$ 61,184	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.)		

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4	
Name of organization Huna Heritage Foundation			Employer identification number	er	
nuna nerit	age roundation		94-3113818		
Part III	Exclusively religious, charitable, etc., contribution than \$1,000 for the year from any one contribute organizations completing Part III, enter the total the year. (Enter this information once. See instruction of the description of the description of the year.)	r. Complete columns (a of exclusively religious actions.) > \$	a) through (e) and the following line er	ntry. For	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of h	ow gift is held	
	Transferee's name, address, and ZIP 4	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relation		ship of transferor to transferee	
		_			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of h	ow gift is held	
	Transferee's name, address, and ZIP 4 (b) Purpose of gift	(e) Transfer of git	Relationship of transferor to transferor		
Part I	(b) i dipose of gill	(0) 000 01 g	(a) Besonption of the		
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Rela		ift Relationship of transferor to transfere	ationship of transferor to transferee	
	Transferoe o Hamo, addresse, and En		Troiding of transfer to transfer		
(a) No. from Part I	(b) Purpose of gift	c) Use of gift	(d) Description of h	ow gift is held	
	Transferee's name, address, and ZIP 4	(e) Transfer of git	ift Relationship of transferor to transfere	ee	
		_	Schedule B (Form 990, 990-EZ.	or 990-PF) (2019)	