

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

Return of Private Foundation
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 www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052
2020
Open to Public Inspection

For calendar year 2020, or tax year beginning 01-01-2020 , and ending 12-31-2020

Name of foundation UIC Foundation Inc		A Employer identification number 92-0157584	
% BOB CRONEN			
Number and street (or P.O. box number if mail is not delivered to street address) 6700 Arctic Spur Rd	Room/suite	B Telephone number (see instructions) (907) 677-5200	
City or town, state or province, country, and ZIP or foreign postal code Anchorage, AK 99518		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>75,359</u>		J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	165,042			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	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)					
12 Total. Add lines 1 through 11	165,042		0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	72			72
	b Accounting fees (attach schedule)	15,250			15,250
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	11,809			892
	24 Total operating and administrative expenses. Add lines 13 through 23	27,131		0	16,214
	25 Contributions, gifts, grants paid	59,000			59,000
26 Total expenses and disbursements. Add lines 24 and 25	86,131		0	75,214	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	78,911				
b Net investment income (if negative, enter -0-)			0		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	58,497	54,237	54,237
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	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 ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	0	500	500
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	0	20,622	20,622	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	58,497	75,359	75,359	
Liabilities	17 Accounts payable and accrued expenses	66,240	72	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	66,240	72	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	-7,743	75,287	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	-7,743	75,287		
30 Total liabilities and net assets/fund balances (see instructions) .	58,497	75,359		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	-7,743
2 Enter amount from Part I, line 27a	2	78,911
3 Other increases not included in line 2 (itemize) ▶ _____	3	4,119
4 Add lines 1, 2, and 3	4	75,287
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	75,287

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., 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	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	}	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	{		}	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE

1 Reserved	(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
2 Reserved				2
3 Reserved				3
4 Reserved				4
5 Reserved				5
6 Reserved				6
7 Reserved				7
8 Reserved				8

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, tax based on investment income, and credits/payments. Total tax due and overpayment are calculated in rows 9 and 10.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, Yes, and No. Questions cover political activities, tax on political expenditures, and asset requirements.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

Located at PO BOX 890 Barrow AK ZIP+4 99723

Table with 3 columns: Question, Yes, No. Rows 15-16 regarding nonexempt charitable trusts and foreign accounts.

Part 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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	51,221
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	51,221
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	51,221
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	768
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	50,453
6	Minimum investment return. Enter 5% of line 5.	6	2,523

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	2,523
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	0
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	2,523
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	2,523
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	2,523

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	75,214
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	0
b	Cash distribution test (attach the required schedule).	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	75,214
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	75,214

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				2,523
2 Undistributed income, if any, as of the end of the end of 2020:				
a Enter amount for 2019 only.				
b Total for prior years: 2018, 2017, 2016				
3 Excess distributions carryover, if any, to 2020:				
a From 2015.	255,560			
b From 2016.	421,945			
c From 2017.	368,190			
d From 2018.	91,961			
e From 2019.	58,321			
f Total of lines 3a through e.	1,195,977			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ <u>75,214</u>				
a Applied to 2019, 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 2020 distributable amount.				2,523
e Remaining amount distributed out of corpus	72,691			
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,268,668			
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—see instructions				
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions				
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
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 2015 not applied on line 5 or line 7 (see instructions).	255,560			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	1,013,108			
10 Analysis of line 9:				
a Excess from 2016.	421,945			
b Excess from 2017.	368,190			
c Excess from 2018.	91,961			
d Excess from 2019.	58,321			
e Excess from 2020.	72,691			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:
 UIC Foundation Inc
 PO Box 890
 Barrow, AK 99723
 (907) 852-4460

b The form in which applications should be submitted and information and materials they should include:
 ELECTRONIC APPLICATION SUBMITTED VIA HTTP://UIC-FOUNDATION.COM/

c Any submission deadlines:
 MAY 15: SUMMER TERM; AUGUST 15: FALL TERM; JANUARY 15: WINTER TERM

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
 SCHOLARSHIPS ARE AWARDED TO UIC SHAREHOLDERS AND THEIR CHILDREN.

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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				59,000
b <i>Approved for future payment</i>				
Total ▶ 3b				

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALISON BANKSTON PO BOX 756360 FAIRBANKS, AK 997756360	none	I	scholarship	1,750
MEDA SNYDER 3211 PROVIDENCE DRIVE UC 105 ANCHORAGE, AK 99508	none	I	Scholarship	1,500
MILISSA VENT 1000 ASP AVE ROOM 105 NORMAN, OK 73019	none	I	Scholarship	1,500
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ABBEY SALMON13 DEVON RD EDISON, NJ 08820	none	I	Scholarship	1,375
ADAM LAFOUNTAIN 414 N MERIDIAN STREET 6068 NEWBERG, OR 97132	none	I	Scholarship	1,250
AKSIIN STORERPO BOX 756360 FAIRBANKS, AK 997756360	none	I	Scholarship	1,250
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALYNNE BANKSTON1 AEROSPACE BLVD DAYTONA BEACH, FL 32114	none	I	scholarship	1,250
ANGELICA TELFAIR 333 EAGLE LN - 102 SUTTON HALL CHENEY, WA 99004	none	I	Scholarship	1,250
AUDREY SAGANNA SRPO BOX 749 BARROW, AK 99723	none	I	Scholarship	1,250
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DAVID ELAVGAKPO BOX 756360 FAIRBANKS, AK 997756360	none	I	scholarship	1,250
JARED WILLIAMSPO BOX 749 BARROW, AK 99723	none	I	Scholarship	1,250
JORDAN AHGEAK 3211 PROVIDENCE DR UC 105 ANCHORAGE, AK 99508	none	I	scholarship	1,250
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KALEY NELSON 3211 PROVIDENCE DR UC 105 ANCHORAGE, AK 99508	none	I	Scholarship	1,250
KARL AHGEAKPO BOX 141608 ANCHORAGE, AK 995141608	none	I	Scholarship	1,250
KATHERINE SAKEAGAK 3211 PROVIDENCE DRIVE ESC ANCHORAGE, AK 99508	none	I	Scholarship	1,250
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MICHELLE KALEAKPO BOX 756360 FAIRBANKS, AK 997756360	none	I	Scholarship	1,250
NIKKI PEIDLOW 3211 PROVIDENCE DRIVE ESC ANCHORAGE, AK 99508	none	I	Scholarship	1,250
ROBERTA JO GLENNPO BOX 756360 FAIRBANKS, AK 997756360	none	I	scholarship	1,250
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ROMAN SNYDER 3211 PROVIDENCE DR UC 105 ANCHORAGE, AK 99508	none	I	Scholarship	1,250
SHADOW AIKEN3900 UNIVERSITY BLVD TYLER, TX 75799	none	I	Scholarship	1,250
EDALEE AHMOAGAKPO BOX 756360 FAIRBANKS, AK 997756360	none	I	scholarship	1,125
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COLLEEN ABAD120 BOYLSTON ST BOSTON, MA 021164624	none	I	Scholarship	1,000
KRISTINA GIBSON 3211 PROVIDENCE DRIVE UC 105 ANCHORAGE, AK 99508	none	I	Scholarship	1,000
LILLIAN MARREROPO BOX 756360 FAIRBANKS, AK 997756360	none	I	Scholarship	1,000
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
APRIL FISHER 3211 PROVIDENCE DRIVE UC 105 ANCHORAGE, AK 99508	none	I	scholarship	875
TARA RICHARDSPO BOX 756360 FAIRBANKS, AK 997756360	none	I	Scholarship	875
ABRAHAM BJORKKLUNG35109 ROYAL PL SOLDOTNA, AK 99669	none	I	scholarship	750
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALAINA BANKSTON PO BOX 756360 FAIRBANKS, AK 997756360	none	I	scholarship	750
GABRIELLE CAIN PO BOX 141608 ANCHORAGE, AK 995141608	none	I	scholarship	750
JENESSA OVIOKPO PO BOX 756360 FAIRBANKS, AK 997756360	none	I	Scholarship	750
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JENNIFER FELDERPO BOX 756360 FAIRBANKS, AK 997756360	none	I	scholarship	750
JEREMY MILLER1740 N TERRILOU CT PALMER, AK 99645	none	I	Scholarship	750
JOSLYN EDWARDSPO BOX 749 BARROW, AK 99723	none	I	scholarship	750
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KEIFER KANAYURAKPO BOX 756360 FAIRBANKS, AK 997756360	none	I	Scholarship	750
LINDSAY PANIGEO502 E BOONE SPOKANE, WA 99258	none	I	Scholarship	750
MCKENZIE KANAYURAKPO BOX 141609 ANCHORAGE, AK 99514	none	I	Scholarship	750
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MICHELLE MCCOYPO BOX 141608 ANCHORAGE, AK 995141608	none	I	Scholarship	750
MIRANDA REXFORD35109 ROYAL PL SOLDOTNA, AK 99669	none	I	Scholarship	750
WRENNY NAYAKIK 3211 PROVIDENCE DRIVE ESC ANCHORAGE, AK 99508	none	I	Scholarship	750
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOBBYJO EDWARDS 4101 UNIVERSITY DRIVE ANCHORAGE, AK 99508	none	I	scholarship	625
MONICA WIEHLPO BOX 141609 ANCHORAGE, AK 99514	none	I	Scholarship	625
ADAM NAYAKIK10695 W PIERCE ST AVONDALE, AZ 85323	none	I	Scholarship	500
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALEXIA BANKSTON 2800 S LONE TREE RD FLAGSTAFF, AZ 86005	none	I	Scholarship	500
AMANDA BURNELLPO BOX 141609 ANCHORAGE, AK 99514	none	I	Scholarship	500
ANGELIE RABADJIYSKYPO BOX 749 BARROW, AK 99723	none	I	Scholarship	500
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANGELINE NAGEAK FIN AID 208 EDGEMONT BLVD ALAMOSA, CO 81101	none	I	Scholarship	500
CHAELE IDZINSKI PO BOX 749 BARROW, AK 99723	none	I	Scholarship	500
CHLOE M GREENE PO BOX 141609 ANCHORAGE, AK 99514	none	I	Scholarship	500
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHRISTIAN TULAI851 30TH AVE SE ROCHESTER, MN 559044999	none	I	Scholarship	500
EDITH SPEARPO BOX 749 BARROW, AK 99723	none	I	Scholarship	500
ESAU WEYIOUANNA700 LUTHER DR MANKATO, MN 56001	none	I	Scholarship	500
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FAYE SERRANOPO BOX 749 BARROW, AK 99723	none	I	Scholarship	500
GEORGIANNA SIELAK 4101 UNIVERSITY DR ANCHORAGE, AK 99508	none	I	Scholarship	500
HALEY FISCHERPO BOX 749 BARROW, AK 99723	none	I	Scholarship	500
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ISIAH MONGOYAK 3211 PROVIDENCE DR UC 105 ANCHORAGE, AK 99508	none	I	Scholarship	500
JAMES MILLERPO BOX 756360 FAIRBANKS, AK 997756360	none	I	Scholarship	500
JAYCE LAKSHAS SKYHAWK STATION 1000 RIM DRIVE DURANGO, CO 81301	none	I	Scholarship	500
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JAYNA WOLGEMUTH 333 EAGLE LN - 102 SUTTON HALL CHENEY, WA 990042447	none	I	Scholarship	500
JOANNE GLENNPO BOX 174160 BOZEMAN, MT 597174160	none	I	Scholarship	500
KEONI HEPA MBC 3200 8888 UNIVERSITY DR BURNABY, BRITISH COLUMBIA V5A 1S6 CA	none	I	Scholarship	500
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARIE MONEXAYPO BOX 749 BARROW, AK 99723	none	I	Scholarship	500
PAIGE LAFOUNTAIN 900 SE BAKER ST MELROSE STE 030 MCMINNVILLE, OR 97128	none	I	Scholarship	500
REGAN MUKPIK5500 CAMPANILE DRIVE SAN DIEGO, CA 921827436	none	I	Scholarship	500
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SAVANNA SNYDER4101 UNIVERSITY DR ANCHORAGE, AK 99508	none	I	Scholarship	500
SEAN CAMPBELL18401 N 32ND ST PHOENIX, AZ 85032	none	I	Scholarship	500
AUTUMN STEVENS1100 NORTH AVENUE GRAND JUNCTION, CO 815013122	none	I	Scholarship	375
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRITTANY BURNS LHL G20 1720 2ND AVENUE SOUTH BIRMINGHAM, AL 352940013	none	I	scholarship	375
PAXTON ITTAPO BOX 141608 ANCHORAGE, AK 995141608	none	I	Scholarship	375
TAMARA FEATHERLY 3885 WEST CAMPUS DR DEPT 1136 OGDEN, UT 844081136	none	I	scholarship	375
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HALEY SIELAKPO BOX 756360 FAIRBANKS, AK 99775	none	I	Scholarship	250
JAIME JONESPO BOX 756360 FAIRBANKS, AK 99775	none	I	Scholarship	250
KELSEY HAAKE3451 WALNUT ST PHILADELPHIA, PA 19104	none	I	Scholarship	250
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LILLY AHVAKANAPO BOX 749 BARROW, AK 99723	none	I	Scholarship	250
MURIEL BROWERPO BOX 141609 ANCHORAGE, AK 99514	none	I	Scholarship	250
PATRICIA HOPSONPO BOX 749 BARROW, AK 99723	none	I	Scholarship	250
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PATRICIA IVANOFF 618 LERNER HALL 2920 BROADWAY NEW YORK, NY 10027	none	I	Scholarship	250
QUINTON CARROLL 800 21ST ST NW STUDENT SVC HUB WASHINGTON, DC 20052	none	I	Scholarship	250
TERANCE BROWER 3211 PROVIDENCE DR UC 105 ANCHORAGE, AK 99508	none	I	Scholarship	250
Total ▶ 3a				59,000

Form 990PF Part XV Line 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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ERIK DARIAN DANNER 9417 PRINCESS PALM AVENUE TAMPA, FL 33619	none	I	Scholarship	250
Total ▶ 3a				59,000

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2020 Depreciation Schedule

Name: UIC Foundation Inc

EIN: 92-0157584

TY 2020 Explanation of Non-Filing with Attorney General Statement**Name:** UIC Foundation Inc**EIN:** 92-0157584**Statement:**

The Alaska State Attorney General does not require the submission of the 990-PF unless there is a tax liability.

TY 2020 Other Assets Schedule**Name:** UIC Foundation Inc**EIN:** 92-0157584**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DUE FROM UIC	0	20,622	20,622

TY 2020 Other Expenses Schedule**Name:** UIC Foundation Inc**EIN:** 92-0157584**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SERVICE FEE	10,917			
ADVERTISING	827			827
OFFICE SUPPLIES	40			40
BUSINESS LICENSE	25			25

TY 2020 Other Increases Schedule**Name:** UIC Foundation Inc**EIN:** 92-0157584**Other Increases Schedule**

Description	Amount
PRIOR YEAR SCHOLARSHIPS RETURNED	4,119

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047
2020

Name of the organization
UIC Foundation Inc

Employer identification number
92-0157584

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 other 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 33¹/₃% 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 **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
UIC Foundation Inc

Employer identification number
92-0157584

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	Ukpeagvik Inupiat Corporation 6700 Arctic Spur Rd Anchorage, AK 99518	\$ 139,330	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization UIC Foundation Inc	Employer identification number 92-0157584
--	--

Part II			
Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(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
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

Name of organization
UIC Foundation Inc

Employer identification number

92-0157584

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	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	