

Return of Organization Exempt From Income Tax

G ONB NP. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

	For the	2009 calend	dar year, o	or tax year begin	ning		, 2009, a	and endin	g			,		
В	Check if a	pplicable:		C Name of organiz	ation					D Employ	er Ideni	ification	Number	
	Addre	ess change	Please use IRS label	The Alaska	a Communi	ty Founda	tion			92-0				
	Name	e change	or print or type.	Number and stre	eet (or P.O. box if	mail is not delivered	to street add	lr) Room/s	uite	E Telepho	ne num	ber		
	Initia	l return	See specific	400 L Stre	eet			100		(90	7) 3	34-6	700	
	==	ination	Instruc- tions.	City, town or cou			State	ZIP code + 4	ļ.		,			
	-	nded return		Anchorage			AK	99501		G Gross re	eceipts	\$ 19,2	230,111	L.
	 	cation pending	F Name a	and address of principa	al officer:				H(a) Is this	a group retur			Yes	X No
		cation pending		Winkler 400 L		Anchorag	e AK	99501		l affiliates incl			Yes	No
	Tay-a	xempt statu	- Janeary		(insert no.)	4947(a)	7000	527	If 'No,'	' attach a list.	(see in:	structions)	
<u>.</u> J				www.alaskac		4547 (α)	(1) 01	327	H(c) Croup	exemption nu	ımbor I	-		
		f organization:			Association	Other ►	I v	oar of Forms	tion: 199	·			nicile: AK	
K Pa		Summa		ation Trust	ASSOCIATION	1 Other.	 - 10	ear or ronna	1011. 1	O jin s	itate or	icyai uon	none. Zizi	
Га				ganization's missi	ion or most si	unificant activiti	ies: En	courag	e and	Nurtur	ъ Р.	hilar	thror	
	1 0	neny descri	be the org	janization s missi	1011 01 111030 31	gimicani activiti			<u> </u>	1141-41	<u> </u>			z- <u>ı</u>
5 e	_													
Governance														
λe	2 C	heck this bo	x ►	if the organization	n discontinue	d its operations	or dispos	ed of mor	e than 25	% of its as	sets.			
ŏ				bers of the gover								14		
න්				t voting members							4	14		
itie				yees (Part V, line							5	7		
Activities &				eers (estimate if							6	64		
⋖		-		ousiness revenue							7 a			0.
	b N	et unrelated	business	taxable income	from Form 99	0-1, line 34					7 b			
									<u> </u>	Prior Year			urrent Y	
ø.				its (Part VIII, line						9,751,2				,924.
Revenue				ue (Part VIII, line						401,2				,014.
eve				art VIII, column (A						944,7	45.			,416.
Œ				II, column (A), lir										,973.
				nes 8 through 11					1	1,097,2				<u>,495.</u>
				ounts paid (Part						7,966,0	50.		4,830	,137.
				members (Part I)										
S	15 S	alaries, othe	er comper	nsation, employe	e benefits (Pa	ırt IX, column (/	A), lines 5	-10)		584,1	51.		583	,203.
)Se	16a P	rofessional	fundraisin	ng fees (Part IX, d	column (A), lii	ne 11e)							onnones de la S	ersola, vastersolater t
Expenses	bΤ	otal fundrais	sing exper	nses (Part IX, co	lumn (D), line	25) ►		0.						
ũ				IX, column (A), li						4,533,9	68.		2,349	,624.
				nes 13-17 (must						3,084,1				,964.
				s. Subtract line 1						8,013,0				,469.
- 0	13	CVCHUC 1033	Схранов	5, 0 451 461 1110 .	<u> </u>					inning of Y		1	End of Y	
ance	20 T	otal accata	(Part V li	ne 16)						0,310,5				,188.
Asse	i			, line 26)						95,8				,945.
Net Assets or Fund Balances			•	ances. Subtract l						0,214,6		4		,243.
	22 N		ure Blo		ille 21 illoillilli	16 20				0,211,	, , , ,		<u> </u>	,
1 6		<u> </u>			aversised this set	rn, including accom	nanyina scher	dulae and ets	atements an	d to the hest	of my ki	nowledge	and helief.	it is
		true, corrèct, a	and complete	I deofare that I have on Decfaration of prepa	irer (other than off	icer) is based on all	information of	of which prep	arer has any	/ knowledge.	1	1	_	
c:		▶ (,	XL							- 11,	/ [[110)	
Sig He	jii re	Signature	of officer		[00]	~ M	`		D	ate /		1		···········
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Pre		Preparer's signature	×		- 6 . 7		1	1/10/1		pioyou				
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On		employed), address, and		Box 872194						EIN 🟲				
		ZIP + 4		illa		AK				Phone no. 🕨		[-,-]	Voc	NI.
May	the IR	S discuss th	is return v	with the preparer	shown above	:? (see instructi	ons)					X	Yes	No

orm 990 (2009) The Alaska Commu ty Foundation	92-0155067	Page 2
art III Statement of Program Service Accomplishments		
1 Briefly describe the organization's mission:		
Encourage and Nurture Philanthropy		
in the wing the year which y	vere not listed on the prior	
2 Did the organization undertake any significant program services during the year which w Form 990 or 990-EZ?	Yes X	No
Form 990 or 990-EZ? If 'Yes,' describe these new services on Schedule O.		-
and the second s	any program services? Yes	No
If 'Yes,' describe these changes on Schedule O.		
the state of the supplication of three largest	program services by expenses. Section 501(c)	(3)
4 Describe the exempt purpose achievements for each of the organizations the largest and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amore expenses, and revenue, if any, for each program service reported.	ount of grants and allocations to others, the tot	aı
expenses, and revenue, if any, for each program service reported.		
	ndowment funds ls, non-profit and the interest grants in 2009	
4b (Code:) (Expenses \$2,138,589. including grants of \$	680,940.)(Revenue \$ 1,332	,718.
4b (Code:) (Expenses \$2,138,589. including grants of \$ The Alaska Community Foundation directly supported p Alaska such as the development and maintenance of loanniversary of Alaska statehood celebration, and the	680,940.)(Revenue \$ 1,332 rojects throughout cal parks, the 50th renovation of the West	
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	<u></u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III.	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6	х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
10	and the state of t	10		х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	x	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			
	• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	x	
	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional	13		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	14a		X
	and the state of t	14b		
	business, and program service activities outside the ornited states? If res, complete scheduler, rater	15	x	
	or entity located outside the United States? If Yes, complete Scriedule P, Part II.	16	1	x
	individuals located outside the United States? If res, complete Scredule 1, 1 art in	17		x
	Column (A), lines 6 and TTe? If Yes, complete Scriedule G, Fart T	18		X
	lines 1c and 8a? If 'Yes,' complete Schedule G, Part II			x
	complete Schedule G, Part III Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

Form 990 (2009) The Alaska Community Foundation

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		37
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000	23		X
	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
i	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		
20	disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27		x
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	х	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	

BAA Form 990 (2009)

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. 1 a 39 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3 a X **b** If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3 b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a Х **b** If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X 5b Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a Х **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7 a X provided to the payor? **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c X Form 828Ž? e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e Х benefit contract? 7 f х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 g g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Х Sponsoring organizations maintaining donor advised funds. 9a X a Did the organization make any taxable distributions under section 4966? 9b X **b** Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10 a **b** Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b |f 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b

BAA Form **990** (2009)

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A.	Governing Body and Management							
			ı	1		ı	7722332	Yes	<u>No</u>
1 a	Enter the	number of voting members of the governing body		1 a	14				
		number of voting members that are independent							
	officer, d	officer, director, trustee, or key employee have a family relationship or a irector, trustee or key employee?					2		x
3	Did the o	rganization delegate control over management duties customarily perfo s, directors or trustees, or key employees to a management company o	rmed by or un r other persor	der th	e direct su	pervision	3		x
4	Did the o	rganization make any significant changes to its organizational documer	nts				4	Х	
	since the	prior Form 990 was filed?						٠	
5	Did the o	rganization become aware during the year of a material diversion of the	e organization'	s asse	ets?		5		X
6		organization have members or stockholders?					6		x
	governing	organization have members, stockholders, or other persons who may eg body?					7 a		х
b	Are any	decisions of the governing body subject to approval by members, stockl	nolders, or oth	er per	sons?		7 b	reference on a son	X
8	Did the o	rganization contemporaneously document the meetings held or written ving:	actions under	aken	during the	year by			
а		erning body?					8a	X	
b	Each cor	nmittee with authority to act on behalf of the governing body?					8b	Х	
		any officer, director or trustee, or key employee listed in Part VII, Section mailing address? <i>If 'Yes,' provide the names and addresses in So</i>	n Δ who can	not he	reached:	at the	9		х
Sec	tion B.	Policies (This Section B requests information about p	olicies not	requ	ired by 1	he Interna	/		
Reve	nue Code	.)						1	T
							Г <u>.</u>	Yes	
10 a	Does the	organization have local chapters, branches, or affiliates?					10 a		X
b	If 'Yes,' o and bran	does the organization have written policies and procedures governing the ches to ensure their operations are consistent with those of the organiz	ne activities of ation?	such	chapters,	affiliates,	10 b	 	
11	Has the	organization provided a copy of this Form 990 to all members of its gov	erning body b	efore	filing the f	orm?	11	x	Nagarani.
11 /	Describe	in Schedule O the process, if any, used by the organization to review t	his Form 990.					l	
12 a	Does the	organization have a written conflict of interest policy? If 'No,' go to line	• 13				12 a	X	
	to conflic	ers, directors or trustees, and key employees required to disclose annu- tts?		• • • • •			12b	x	
	Schedule	organization regularly and consistently monitor and enforce compliance O how this is done					120		
13	Does the	organization have a written whistleblower policy?					13	X	┼──
14	Does the	organization have a written document retention and destruction policy	?				. 14	X	
15	Did the p persons,	process for determining compensation of the following persons include a comparability data, and contemporaneous substantiation of the deliber	a review and a ration and dec	approvision?	al by inde	pendent			
ā	The orga	nization's CEO, Executive Director, or top management official					. 15a		42
b	Other off	ficers of key employees of the organization					. 15 t)	X
		o line 15a or 15b, describe the process in Schedule O. (See instructions							
	entity du	organization invest in, contribute assets to, or participate in a joint ventoring the year?					. 16	3	х
ŀ	If 'Yes,' I in joint v status wi	has the organization adopted a written policy or procedure requiring the enture arrangements under applicable federal tax law, and taken steps ith respect to such arrangements?	e organization to safeguard	to eva	aluate its p ganization	participation n's exempt	. 161))	
Sec		Disclosures							
17	List the	states with which a copy of this Form 990 is required to be filed <pre></pre>							
18	Section (6104 requires an organization to make its Forms 1023 (or 1024 if appliance. Indicate how you make these available. Check all that apply.	cable), 990, a	nd 990	D-T (501(c)(3)s only) av	ailabl	e for p	ublic
	X Own	website Another's website X Upon request							
	Describe	e in Schedule O whether (and if so, how) the organization makes its governers available to the public.							icial
20	State the	e name, physical address, and telephone number of the person who po	ssesses the b	ooks a	and record	ls of the orga	nizatio	n:	
1	• Kate	Gerlek 400 L Street, Suite 100, Anchor	<u>age,</u>	AK_	99501	<u>(</u>	907)	334	-67 <u>0</u> 0
		MMA. 17							

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did no	t compens	ate ar	пу сі	ırrei	nt of	ficer,	dired	ctor, or trustee.		
(A)	(B)			(c)			(D)	(E)	(F)
Name and Title	Average hours per week	e andividual trustee or director	ition institutional kustee	(checi	a Key employee	at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
			it.			red.	<u> </u>			
Carla Beam Chair	2.00	v		x				0.	0.	0.
Dr. Leo Bustad	2.00	21.						0.	0.	<u> </u>
Director	1.00	x		i i				0.	0.	0.
Ken Castner	 		 							
Director	1.00	x						0.	0.	0.
Morgan Christen										
Director	1.00	x						0.	0.	0.
Angela Cox										
Director	1.00	х						0.	0.	0.
Susan Foley										
Second Vice Chair	1.00	X	ļ	x				0.	0.	0.
Rick Nerland										
Director	1.00	X						0.	0.	0.
Kris Norosz										
First Vice Chair	1.00	X	ļ	х			_	0.	0.	0.
Judith Warwick	.									
Director	1.00	_X_						0.	0.	0.
Marilyn Romano										_
Director	1.00	X						0.	0.	0.
John Abreu								_	_	
Secretary	1.00	X		X				0.	0.	0.
Kate Gerlek								04 000	•	0
Chief Financial Officer	40.00		-	x	_			84,002.	0.	0.
Bernie Washington	1.00	35		х				0.	0.	0
Treasurer	1.00	X		A.	-			0.	U •	0.
Steve Yoshida	1.00	x						0.	0.	0.
Director Pand Stooms	1.00		\vdash		-			0.	V.	
Reed Stoops Director	1.00	х						0.	0.	0.
Carol Simonetti	1.00	42	 					0.	0.	<u> </u>
Executive Director	40.00	x		х	х			110,340.	0.	8,400.
EVECUCIAE DITECTOI	10.00							220,010.		-,

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Part VII Section A. Officers, Directors, Trust (A)	(B)			(0		,		(D)	(E)		(F)
Name and Title	Average	Posi	tion (check	all t	hat a	pply)	Reportable compensation from	Reportable compensation from	E	stimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation froi related organizatio (W-2/1099-MISC)	ns com f org ar	unt of other ipensation rom the janization and related anizations
					-						
						j					,,,,,,,
									1,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4		
1 b Total							•	194,342.	·	0.	8,400
Total number of individuals (including but not limited from the organization1	to those	e list	ted i	abov	e) v	vho	rece	eived more than \$	100,000 in repor	table comp	ensation
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such inc 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the individual 	dividual ortable an \$150	com 0,000	pen)? <i>It</i>	satio	on a s' c	 nd (omp	other	r compensation fro Schedule J for su	om ch	_	Yes No
5 Did any person listed on line 1a receive or accrue co rendered to the organization? <i>If 'Yes,' complete Sche</i>	mpensa edule J	ation for s	froi uch	n ar per:	iy u son	nrel:	ated	organization for s	services	5	х
Complete this table for your five highest compensate compensation from the organization.	d indep	ende	ent d	conti	acto	ors t	that	received more tha	n \$100,000 of		
(A) Name and business address	S							Description) of Services	Comp	(C) ensation
2 Total number of independent contractors (including b \$100,000 in compensation from the organization >		mite	ed to	tho	se l	iste	d ab	ove) who received	I more than		

<u>rai</u>	TVIII Statement of Nevertue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns 1 a b Membership dues 1 b c Fundraising events 1 c d Related organizations 1 d e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above 1 f g Noncash contribus included in Ins 1a-1f: \$ h Total. Add lines 1a-1f		5,975,924.			
ENUE		9 9 0 0 9 9	384,014.	384,014.	0.	0.
PROGRAM SERVICE REVENUE	b		384,014.			
	3 Investment income (including dividends other similar amounts)	, interest and ▶	642,524.	642,524.	0.	0.
	4 Income from investment of tax-exempt 5 Royalties	(ii) Personal				
	7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses	(ii) Other	-1,426,940.	-1,426,940.	0.	0.
OTHER REVENUE	8a Gross income from fundraising events (not including . \$	a b				
	9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activ	b				
	10a Gross sales of inventory, less returns and allowances	a b entory				
	Miscellaneous Revenue 11a Other revenue b		15,973	15,973	. 0	. 0
	d All other revenue					
	e Total. Add lines 11a-11d		13,3,3		. 0	. 0

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		(b), (c), an	- (-).
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	4,802,637.	4,802,637.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	10,000.	10,000.		
3	Grants and other assistance to governments, organizations, and individuals outside the	333			
4	U.S. See Part IV, lines 15 and 16	17,500.	17,500.		
5	Benefits paid to or for members				
J	trustees, and key employees	110,340.	0.	110,340.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	408,583.	49,814.	358,769.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	29,530.	0.	29,530.	0.
9			WW		
10	Payroll taxes	34,750.	0.	34,750.	0.
	Fees for services (non-employees)				
	a Management				
	o Legal	13,685.	11,853.	1,832.	0.
	C Accounting	10,295.	1,500.	8,795.	0.
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees	496,203.	493,306.	2,897.	^
	g Other	5,504.	1,412.	4,092.	0.
	Advertising and promotion	228,040.	95,178.	132,862.	0.
13	Office expenses	160,031.	142,342.	17,689.	0.
14	Information technology	200,0321		17,005.	<u> </u>
15	Royalties	***************************************			
16	Occupancy	64,704.	4,326.	60,378.	0.
17	Travel	65,183.	12,724.	52,459.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	-	-		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates		West and the second		
22	Depreciation, depletion, and amortization	11,596.	0.	11,596.	0.
	Insurance	5,037.	1,873.	3,164.	0.
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
	Contractual	1,059,985.	868,402.	191,583.	0.
	Special Events	57,798.	5,380.	52,418.	0.
	Communications	10,679.	0.	10,679.	0.
đ	Equipment	160,884.	149,030.	11,854.	0.
е					
	All other expenses				w
	Total functional expenses. Add lines 1 through 24f	7,762,964.	6,667,277.	1,095,687.	0.
26	Joint costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
RΛΛ					Form 990 (2009)

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Part X Balance Sheet (A) Beginning of year End of year 2,200. Cash – non-interest-bearing 0. 2 6,041,508. 133,636. 2 Savings and temporary cash investments..... 5,620,750. 7,716,500. 3 Pledges and grants receivable, net 197,667. 4 10,298. Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L ... 6 7 Notes and loans receivable, net 7 8 16,218. 21,906. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. . | 10a Complete Part VI of Schedule D 34,096. 59,318. 10 c 11 Investments – other securities. See Part IV, line 11 12 32,096,430. 13 Investments – program-related. See Part IV, line 11 13 32,187,182. Intangible assets 14 14 Other assets. See Part IV, line 11..... 0. 15 15 40,310,521. 16 43,827,188. 16 20,474. Accounts payable and accrued expenses 53,999. 17 17 579,471. 41,837. 18 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 LIABILITIES 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Pavables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Complete Part X of Schedule D 26 599,945. 95,836. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29 and lines 33 and 34. 32,864,602. 27 30,010,473. ASSETS Unrestricted net assets 27 28 13,216,770. 7,350,083. 28 Temporarily restricted net assets 0. 29 29 Permanently restricted net assets R Organizations that do not follow SFAS 117, check here 🕨 and complete FUXD lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, and equipment fund BALANCES 32 32 Retained earnings, endowment, accumulated income, or other funds 43,227,243. 40,214,685. 33

43,827,188. Form 990 (2009)

40,310,521.

34

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34

Total liabilities and net assets/fund balances.

Form 990 (2009) The Alaska Community Foundation	92-0155067	Pa	ge 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	<u>2</u> a	ļ	Х
b Were the organization's financial statements audited by an independent accountant?		X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit.	x	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were consolidated basis, separate basis, or both:	issued on a		
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single 3a	ı	х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	required audit	,	

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

The Alaska Community Foundation 92-0155067 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 X in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h. 11 b Type II Type III — Functionally integrated d Type III- Other С By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (i) 11 g (i) a family member of a person described in (i) above? 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organizations (vi) Is the organization in col. (i) organized in the (iii) Type of organization (described on lines 1-9 above or IRC section (iv) Is the organization in col.
(i) listed in your (v) Did you notify the organization in col. (i) of (i) Name of Supported Organization (ii) EIN (vii) Amount of Support your support? (see instructions)) governing document? US? Yes No Yes No Yes No

Schedule A (Form 990 or 990-EZ) 2009 The Alaska Community Foundation 92-0155067

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Sec	tion A. Public Support	od the box on the	5, 7, 01 5 01 1 art	1.)			
Cale	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	6,252,861.	11,065,166.	10,171,023.	20,581,849.	5,619,275.	53,690,174.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
4	Total. Add lines 1-through 3	6,252,861.	11,065,166.	10,171,023.	20,581,849.	5,619,275.	53,690,174.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
	Public support. Subtract line 5 from line 4						53,690,174.
Sec	tion B. Total Support		<u> </u>	T	T	T	
	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	6,252,861.	11,065,166.	10,171,023.	20,581,849.	5,619,275.	53,690,174.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	860,959.	1,028,109.	1,611,133.	869,462.	656,796.	5,026,459.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					15,973.	15,973.
11	Total support. Add lines 7 through 10						58,732,606.
12	Gross receipts from related activi	ties, etc. (see ins	tructions)			12	1,410,224.
	First five years. If the Form 990 i organization, check this box and	stop here		d, third, fourth, or	fifth tax year as	a section 501(c)(3) > _
<u>Sec</u>	tion C. Computation of Pul				···		1
14	Public support percentage for 200						91.41%
	Public support percentage from 2						91.97 %
16 a	33-1/3 support test $-$ 2009. If the and stop here. The organization \cdot	organization did qualifies as a pub	not check the box licly supported or	on line 13, and ganization.	the line 14 is 33-1	/3 % or more, che	eck this box
b	33-1/3 support test — 2008. If the and stop here. The organization of	organization did qualifies as a publ	not check a box o licly supported org	on line 13, or 16a, ganization	and line 15 is 33	-1/3% or more, ch	eck this box
17 a	10%-facts-and-circumstances te or more, and if the organization rethe organization meets the 'facts-	neets the 'facts-ar	nd-circumstances'	' test, check this b	oox and stop here	.Explain in Part I\	/ how
	10%-facts-and-circumstances te or more, and if the organization rorganization meets the 'facts-and	neets the 'facts-ar -circumstances' f	nd-circumstances' test. The organiza	' test, check this b ation qualifies as	oox and stop here a publicly support	. Explain in Part I\ ed organization. .	/ how the ▶ ☐
18	Private foundation. If the organiz	ation did not ched	ck a box on line, 1	3, 16a, 160, 1/a,	or 170, check this	s vox and see inst	ructions

Part	III Support Schedule for	r Organization	S Described i	11 36611011 303	(4)(2)		
	(Complete only if you chec	ked the box on line	9 of Part I.)				
	ion A. Public Support	43,0005	4120000	(-) 2007	(d) 2008	(e) 2009	(f) Total
Calen 1	dar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	(a) 2005	(b) 2006	(c) 2007	(a) 2008	(e) 2003	(i) rotal
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line						
	7c from line 6.)						
Sec	tion B. Total Support						40 T
	tion B. Total Support ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale	ndar year (or fiscal yr beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale			(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Caler 9 10 a	Amounts from line 6		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Caler 9 10 a	Amounts from line 6		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Caler 9 10 a b	Amounts from line 6		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Caler 9 10 a b	Amounts from line 6						
Caler 9 10 a b	Amounts from line 6						
Calei 9 10 a b c c 11 12 13 14 Sec	Amounts from line 6	is for the organize stop here	ation's first, seco	nd, third, fourth,	or fifth tax year as	a section 501(c)(3	
Calei 9 10 a b c c 11 12 13 14 Sec	Amounts from line 6	is for the organize stop here	ation's first, seco	nd, third, fourth,	or fifth tax year as	a section 501(c)(3) > [
Calei 9 10 a b c c 11 12 13 14 Sec 15	Amounts from line 6	is for the organization here	ation's first, seco	nd, third, fourth,	or fifth tax year as	a section 501(c)(3)
Calei 9 10 a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6	is for the organization here iblic Support I 009 (line 8, columnation 2008 Schedule A, vestment Inco	ation's first, seco Percentage n (f) divided by li Part III, line 15. me Percentage	nd, third, fourth,	or fifth tax year as	a section 501(c)(3)
Calei 9 10 a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6	is for the organized stop here 1009 (line 8, columnate 2008 Schedule A, vestment Incompared to 2009 (line 10c.)	ation's first, seconomic formation of the second of the se	nd, third, fourth, ne 13, column (f)) ge ed by line 13, colu	or fifth tax year as	a section 501(c)(3)
Calei 9 10 a 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6	is for the organization is stop here iblic Support I 2008 Schedule A, vestment Inco for 2009 (line 10c,	ation's first, seconomics firs	nd, third, fourth, ne 13, column (f)) ge ed by line 13, colu	or fifth tax year as	a section 501(c)(3)
Calei 9 10 a 11 12 13 14 Sec 17 18 19 18 19 18	Amounts from line 6	is for the organization of the organization depends on the control of the control of the control of the organization depends on the organization depends on the organization of the organization of the organization depends on the organization of the organization depends on the organization depends on the organization of the organization depends on the organization of the organization o	ation's first, seconomics firs	nd, third, fourth, ne 13, column (f)) ge ed by line 13, column (f) cox on line 14, and an qualifies as a property of the control of th	or fifth tax year as	a section 501(c)(3 15 16 17 18 than 33-1/3%, and organization)
Calei 9 10 a 11 12 13 14 Sec 17 18 19 1	Amounts from line 6	is for the organization of this box and stop here	ation's first, seconomics firs	nd, third, fourth, me 13, column (f)) ge ed by line 13, column (f) cox on line 14, at an qualifies as a pox on line 14 or 19 nization qualifies as	or fifth tax year as mn (f)) nd line 15 is more ublicly supported of the company of the compan	a section 501(c)(3 a section 501(c)(3 15 16 17 18 than 33-1/3%, and organization nore than 33-1/3%, orted organization	% % line 17 is not and line 18

Schedule A (Form 990 or 990-EZ) 2009 The Alaska Community Foundation 92-0153067 Fage 4
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
Other Income Part II, Line 10
Description: Other Revenue
2009: 15973.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No. 1545-0047

Open to Public Inspection

Employer Identification number

				92-0155067
	Alaska Community Foundation I Organizations Maintaining Donor	Advised Funds or Other Simil	ar Funds or Acc	
Par	the organizations Maintaining Dollor the organization answered 'Yes' to	Form 990. Part IV, line 6.		
	the organization answered 100 to	(a) Donor advised funds	(b)	Funds and other accounts
			77.	
1	Total number at end of year	2,645,		
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and dono funds are the organization's property, subject to	the organization's exclusive legal com		X Yes No
6	Did the organization inform all grantees, donors used only for charitable purposes and not for the purpose conferring impermissible private benefit	†??		XYes No
Par	t II Conservation Easements Comple	te if the organization answered	I TES LOTOITIES	750, Fartiv, mie 7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply).	meetion of an historic	cally important land area
	Preservation of land for public use (e.g., red		ervation of an filstoni ervation of certified h	
	Protection of natural habitat	Prese	ervation of certified r	iistorio structuro
	Preservation of open space		diam in the form of o	consorvation easement on the
2	Complete lines 2a through 2d if the organization last day of the tax year.	n held a qualified conservation contribu	ition in the form of a	Held at the End of the Year
			2a	Held at the End of the Fear
á	a Total number of conservation easements		2b	
	Total acreage restricted by conservation easem	ents		
	 Number of conservation easements on a certific 	ed historic structure included in (a)	20	
	d Number of conservation easements included in	(c) acquired after 8/17/06		ization during the tay
3	Number of conservation easements included in Number of conservation easements modified, to	ransferred, released, extinguished, or t	erminated by the or	ganization during the tax
	vear ▶			
4	Number of states where property subject to cor	servation easement is located <a>		
5	Does the organization have a written policy reg	arding the periodic monitoring, inspect	tion, handling of viol	ations, Yes No
,				in the second
6	Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservati	UII easements	
7	during the year ► Amount of expenses incurred in monitoring, ins	specting, and enforcing conservation e	asements	
7	during the year		\$	
	Does each conservation easement reported on	line 2(d) above satisfy the requiremen	nts of section	Yes No
8	170(h)(4)(B)(i) and 170(n)(4)(B)(ii)?		and ovnonce s	tatement and halance sileet, allu
9	include, if applicable, the text of the foothole to	The Organization's interioral otatories		
	rt III Organizations Maintaining Colle Complete if the organization ans	Weled les to lonin 330, lare	17, 11110 0.	
	a If the organization elected, as permitted under treasures, or other similar assets held for publithe text of the footnote to its financial stateme	nts that describes these items.	,	
	b If the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items:	ic exhibition, education, or research	,	
	amounts relating to these items. (i) Revenues included in Form 990, Part VIII,	line 1		Υ
	If the organization received or held works of a	rt, historical treasures, or other similar	assets for illiancial	gain, promas and
	= 000 D-#1/UL line	1		* P
	b Assets included in Form 990, Part X			,

chedule D (Form 990) 2009 The A	laska Commun	ity Foundation	on	92-0155	
Part III Organizations Maintain	ning Collections	s of Art, Historic	al Treasures, or C	Other Similar Asset	t s (continued)
3 Using the organization's acquisition	n accession and oth	er records, check an	y of the following that	are a significant use of	its collection
items (check all that apply):					
a Public exhibition			xchange programs		
b Scholarly research		e Other			
c Preservation for future general	tions		full at the supposite of	an's avampt nurnase in	
4 Provide a description of the organi Part XIV.					
5 During the year, did the organization assets to be sold to raise funds raise.	on solicit or receive ther than to be mair	donations of art, his ntained as part of the	torical treasures, or ot e organization's collect	ner similar	Yes No
Part IV Escrow and Custodial 9, or reported an amou	Arrangements unt on Form 990	Complete if orga , Part X, line 21	anization answere	d 'Yes' to Form 99	J, Part IV, line
1a Is the organization an agent, trusto included on Form 990, Part X?				assets not	Yes No
included on Form 990, Part X? b If 'Yes,' explain the arrangement in	n Dart VIV and com	nlete the following ta	hle:	Name Name	
b If 'Yes,' explain the arrangement in	II Fall XIV and com	piete the following to		F	Amount
c Beginning balance				. 1c	
d Additions during the year				. 1d	
d Additions during the yeare Distributions during the year				1e	
e Distributions during the year f Ending balance				. 1f	
f Ending balance	mount on Form 990	Part X line 21?			Yes No
2a Did the organization include an ar	nount on rount 990,	Tarry, mic 21			
b If 'Yes,' explain the arrangement i	mplete if organi	zation answered	'Yes' to Form 990), Part IV, line 10.	
art V Endowment Funds Col	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years bac
a B i i waturar halanaa					
1a Beginning of year balance					
b Contributions					
c Net Investment earnings, gains, and losses			- The state of the		
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance		<u> </u>			1
2 Provide the estimated percentage	e of the year end ba	lance held as:			
a Board designated or quasi-endow	ment -	%			
b Permanent endowment 🕨					
c Term endowment ►	 %				
3a Are there endowment funds not in	n the possession of	the organization tha	t are held and adminis	tered for the	Yes
organization by:					3a(i)
(i) unrelated organizations					3a(ii)
(ii) related organizations					3b
b If 'Yes' to 3a(ii), are the related of	organizations listed	as required on Sche	dule R?		. 55
Describe in Dort VIV the intender	tuses of the organi	zation's endowment	tunds.		
Part VI Investments—Land, E	Buildings, and E	quipment. See	Form 990, Part A,	(c) Accumulated	(d) Book Value
Description of investmen	t (a) C	cost or other basis (investment)	(b) Cost or other basis (other)	Depreciation	(u) Book value
1a Land					
b Buildings					
c Leasehold improvements					34 0
d Equipment			67,855.	33,759.	34,0
	I				I
e Other					34,0

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ► | 2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Schedule D (Form 990) 2009 The Alaska Community Foundation 92	-0155067	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1 Total revenue (Form 990, Part VIII,column (A), line 12)	5,	,591,495.
2 Total expenses (Form 990, Part IX, column (A), line 25)		,762,964.
3 Excess or (deficit) for the year. Subtract line 2 from line 1		,171,469.
4 Net unrealized gains (losses) on investments		,184,027.
5 Donated services and use of facilities	.	/ <u> </u>
6 Investment expenses		
7 Prior period adjustments		
8 Other (Describe in Part XIV)		
9 Total adjustments (net). Add lines 4 through 8		104 005
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		,184,027.
Part XII. Peconciliation of Pevenus per Audited Financial Statements With Devenue Per Audited Financial Statements With Per Audited Financial Statem	3,	012,558.
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	T	
1 Total revenue, gains, and other support per audited financial statements	1 10,	<u>,420,608.</u>
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e 5,	185,762.
3 Subtract line 2e from line 1	<u>-</u>	234,846.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3,	231,010.
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b		
	4 c	356,649.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 5,	591,495.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	T	
1 Total expenses and losses per audited financial statements	1 7,	764,699.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	3.00	
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2 e	1,735.
3 Subtract line 2e from line 1	3 7.	762,964.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV) 4b		
c Add lines 4a and 4b	4.0	
5 Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)		
Part XIV Supplemental Information	5 7,	762,964.
Part Aiv Supplemental information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part information.	nes 1b and 2b; l to provide any a	Part V, additional
Pt X The organization is exempt from federal income taxes		
Pt X 501(c)(3) of the IRC, except on net income derived from the IRC business activities of which there is none for 2009 of the IRC.		ted
Pt X The Organization believes that it has appropriate sup		any tay
Pt X positions taken, and as such does not have any uncert		. ==== .
Pt X positions that are material to the financial statemen		
Pt XII Line 4b The organization records funds held for others as a 1	iability	
Pt XII Line 4b on the financial statements in accordance with FAS 13	6.	

TEEA3304 02/02/10

Schedule D (Form 990) 2009 The Alaska Community Foundation	92-0155067	Page 5
Schedule D (Form 990) 2009 The Alaska Community Foundation Part XIV Supplemental Information (continued)		
National International Control of		

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-004-7

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

Name of the organization				Employer identif	ication number
The Alaska Communit				92-01550	
Part I General Informat to Form 990, Par	tion on Activiti t IV, line 14b.	es Outside th	e United States. Complet	te if the organizatio	n answered 'Yes'
1 For grantmakers. Does the grantees' eligibility for the	e organization mai grants or assistan	ntain records to s ce, and the select	ubstantiate the amount of the g ion criteria used to award the g	rants or assistance, the rants or assistance?	X Yes No
2 For grantmakers. Describe	e in Part IV the org	anization's proce	dures for monitoring the use of	grant funds outside the l	United States.
3 Activities per Region. (Use	Schedule F-1 (Fo	rm 990) if addition	nal space is needed.)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Sub-Saharan Africa	0	_			17 500
Bub-Banaran Arrica		0	Grants to organizations	School fees for orphans	17,500.
		·			
					4

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

0

Schedule F (Form 990) (2009)

17,500.

Page 2

Schedule **F** (Form 990) 2009

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ... ▼□ Use Schedule F-1 (Form 990) if additional space is needed.

d N, V,	ıcy									Н	0	2009
(i) Method of valuation (book, FMV, appraisal, other)	US Currency		-									Schedule F (Form 990) 2009
(h) Description of non-cash assistance	0									or for which the	A	Schedule
(g) Amount of non-cash assistance	0.									xempt by the IRS, o		
(f) Manner of cash disbursement	17,500. wire transfer									ecognized as tax-e		Hing.
(e) Amount of cash grant	17,500.									e foreign country, r		
(d) Purpose of grant	School fees for									s charities by the		
(c) Region	Sub-Saharan Africa School fees for									at are recognized as		
(b) IRS code section and EIN (if applicable)							- 4			ations listed above that	inor or entities	
1 (a) Name of organization										2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the		BAA

Page 3

92-0155067

The Alaska Community Foundation

Schedule F (Form 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

200 00 00 00 00 00 00 00 00 00 00 00 00							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
				:			
			-				
						Schedule	Schedule F (Form 990) 2009
			TEE A 25 O 7 / 10 S / 10 G				

Schedule	F (Form 990) 2009	The Alaska	Community	Foundation	92-0155067	Page 4
Part IV	Supplementa	I Information				
	Complete this pa	rt to provide the info	ormation required	d in Part I, line 2, and any additional inform	nation.	
Pt_I	<u>Line 2</u>	Program re	porting is	required for grants issue	<u>:d.</u>	
						. – –
						:
			= -			
				 		

SCHEDULE I (Form 990)

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

OMB No. 1545-0047 2009

Open to Public Inspection

Employer identification number 92-0155067 The Alaska Community Foundation Department of the Treasury Internal Revenue Service Name of the organization

Fart General Information on Grants and Assistance	irants and Assist	ance					
	ds to substantiate the	amount of the gran	ts or assistance, the gra	antees' eligibility for the	grants or assistance,	and X Yes	X Yes No
rō 🚟	procedures for monit	oring the use of gra	nt funds in the United S	tates.			
Part II Grants and Other Assistance to Governments and 990, Part IV, line 21 for any recipient that received Part IV and Schedule I-1 (Form 990) if additional s	ance to Governmony recipient that r (Form 990) if add	ents and Organizations eceived more than \$5,0 itional space is needed	d Organizations in the United States. Complete if the organization answered 'Yes' to Form I more than \$5,000. Check this box if no one recipient received more than \$5,000. Use space is needed	ted States. Comple this box if no one r	te if the organizat ecipient received	tion answered 'Ye more than \$5,00	ss' to Form 0. Use
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Various See Attached Schedule Anchorage AK 99504	See List	Attached			Caraci		
2 Enter total number of section 501(c)(3) and government organizatior	3) and government or	ganizations					67
3 Enter total number of other organizations	ions				The state of the s	A	0
BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	uction Act Notice, see	the Instructions fo	r Form 990.	TEEA3901	01/01/20	Schedi	Schedule I (Form 990) 2009

Schedule I (Form 990) 2009 The Alaska Community Foundation

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Page 2

92-0155067

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Scholarships to assist with tuition	4	10,000.			
Part IV Supplemental Information. Complete this part to provide the information required in Part I, IIINe	ete this part to p	oart to provide the informat	ition required in Fa	7,	rer additional illionnation.
	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
 	 			 	į
		1 1 1 1 1 1			1
				•	
] 	

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Schedule I (Form 990) 2009

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	Alaska Community Foundation			92-	015506	7		
Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Metho	(d) od of de revenu	termini	ng
1	Art–Works of art		***************************************					
2	Art-Historical treasures							
3	Art-Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded		4	155,386.	Market	. Val	ue	
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities-Miscellaneous							
13	Qualified conservation contribution— Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory	***************************************						
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()							
27	Other ► ()							
28	Other ► ()							
29	Number of Forms 8283 received by the organizatio organization completed Form 8283, Part IV, Donee	n during the Acknowled	e tax year for contribution	ns for which the	29			
							Yes	No
~~	D. ' He was did the assessment on vocation by on	ntribution o	ny proporty roportod in E	Dart I lines 1 28 that it	must			
30 <i>a</i>	During the year, did the organization receive by co hold for at least three years from the date of the in purposes for the entire holding period?	itial contribi	ution, and which is not re	equired to be used for a	exempt	30 a		Х
	If 'Yes,' describe the arrangement in Part II.							
31	Does the organization have a gift acceptance polic	y that requi	res the review of any no	n-standard contributior	is?	31	Х	
32 a	Does the organization hire or use third parties or renoncash contributions?	elated organ	nizations to solicit, proce	ess, or sell		32 a	x	
b	If 'Yes,' describe in Part II.							
33	If the organization did not report revenues in colum	nn (c) for a	type of property for whic	ch column (a) is checke	ed,			
-	describe in Part II.							

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2009

Open to Public

Inspection

Employer identification number

92-0155067

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990.

The Alaska Community Foundation Pt VI-B, Line 11A The board of directors reviews the 990 prior to filing Pt VI-B, Line 12c All directors and employees are required to report any conflict of interest Pt VI-B, Line 15 The board of directors form an executive search committee and Pt VI-B, Line 15 work with an executive search firm. Candidates were sought from Pt VI-B, Line 15 across the state and across the country. The committee sought the Pt VI-B, Line 15 advice and assistance of the Foraker Group and the Council on Foundations Pt VI-B, Line 15 and used comparative salary and benefits information provided by Pt VI-B, Line 15 both organizations. Pt VI-C, Line 19 Items are available upon request or on our website. Pt XI, Line 2c The audit committee assumes this responsibility. Pt VI-A, Line 4 There were several amendments to the organizations bylaws.

Supporting Statement of:

Form 990 p 11/Line 2, column (B)

Description	Amount
Northrim Checking	189,940.
Restricted	5,414,138.
Other cash	285,276.
Northrim CD	152,154.

Total _____6,041,508.

Supporting Statement of:

Sch D, page 4/Part XII, Line 4b

Description	Amount
Change in funds held for others - FAS 136 difference	356,649.

Total <u>356,649</u>.

				NI	
Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Malawi Children's					
Village,2105 Otter Street	16-1526805	E01(a)(2)	10.657		Support of orphan operations and tuition for
Anchorage, AK 99504 Malawi Children's	16-1526805	501(c)(3)	12,657	0	secondary school
Village,2105 Otter Street	16 1506005	E01(a)(2)	0.551	_	Support of orphan operations and tuition for
Anchorage, AK 99504 Malawi Children's	16-1526805	501(c)(3)	9,551	0	secondary school
Village,2105 Otter Street					Cura and af annia an annia an and to iting for
Anchorage, AK 99504	16-1526805	E01(a)(2)	26 777		Support of orphan operations and tuition for
Malawi Children's	10-1520605	501(c)(3)	26,777	- 0	secondary school & sewing project
Village,2105 Otter Street					Support of amban aparations and tuition for
Anchorage, AK 99504	16-1526805	501(c)(3)	14,449		Support of orphan operations and tuition for secondary school
Malawi Children's	10-1320003	1301(6)(3)	14,443	- 0	Secondary School
Village,2105 Otter Street					Support of orphan operations and tuition for
Anchorage, AK 99504	16-1526805	501(c)(3)	22,388	_ ر	secondary school
Malawi Children's	10-1320003	30 1(0)(3)	22,300	- 0	Secondary school
Village,2105 Otter Street					Support of orphan operations and tuition for
Anchorage, AK 99504	16-1526805	501(c)(3)	16,657	١ ،	secondary school
Malawi Children's	10-1320003	301(0)(3)	10,031	0	Secondary School
Village,2105 Otter Street	ļ				
Anchorage, AK 99504	16-1526805	501(c)(3)	10,000	_	Kitchen Funds.
Malawi Children's	10-1320003	301(0)(3)	10,000	U	Nichen Funus.
Village,2105 Otter Street					Support of orphan operations and tuition for
Anchorage, AK 99504	16-1526805	501(c)(3)	13,935	۱ ،	secondary school
Malawi Children's	10 1020000	001(0)(0)	10,000		Secondary School
Village,2105 Otter Street					Support of orphan operations and tuition for
Anchorage, AK 99504	16-1526805	501(c)(3)	23,090	0	secondary school & malaria prevention
Malawi Children's					
Village,2105 Otter Street					Support of orphan operations and tuition for
Anchorage, AK 99504	16-1526805	501(c)(3)	20,499	l o	secondary school
Malawi Children's					
Village,2105 Otter Street					Support of orphan operations and tuition for
Anchorage, AK 99504	16-1526805	501(c)(3)	12,241	0	secondary school
Malawi Children's					
Village,2105 Otter Street					Support of orphan operations and tuition for
Anchorage, AK 99504	16-1526805	501(c)(3)	6,666	0	secondary school
Malawi Children's					
Village,2105 Otter Street					Support of orphan operations and tuition for
Anchorage, AK 99504	16-1526805	501(c)(3)	10,499	0	secondary school
Alaska Museum of Natural					
History,210 North Bragaw					
Street Anchorage, AK				_	
99508	92-0138658	501(c)(3)	30,000	0	General operating support
Alaska Native Tribal Health					
Consortium,4000					
Ambassador Drive	00 0400704	E04/-1/01	40.550	_	Civintual and about the Control
Anchorage, AK 99508	92-0162721	501(c)(3)	19,559	<u> </u>	Six infusion chairs for Oncology Clinic
Alaska Ski Educational					Creat to Aguarian Darent Teacher
Foundation,2525 Churchill					Grant to Aquarian Parent Teacher
Street Anchorage, AK	00 7070440	E04/5\/0\	4.000	_	Organization for the purchase of ski
99510	23-7378119	3U I(C)(3)	1,000	<u> </u>	equipment for an after school ski program.
Alaska Ski Educational					Grant to Chinack Flamentan, School for
Foundation,2525 Churchill					Grant to Chinook Elementary School for
Street Anchorage, AK	02 7270440	501/5\/2\	2 400	_	purchase of ski equipment for an after schoolski program.
99510 Alaska Ski Educational	23-7378119	501(0)(3)	2,498	0	Ski program.
Foundation,2525 Churchill					
Street Anchorage, AK					Grants to Seward Nordic Ski Club for youth
				i	10.0.00 to contain North old old for youth

2009 FOITH 990				T	
Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Alaska Ski Educational					
Foundation,2525 Churchill Street Anchorage, AK 99510	23-7378119	501(c)(3)	5,000	0	Support for Junior Nationals
Alaska Ski Educational		1	- 1	<u> </u>	
Foundation,2525 Churchill Street Anchorage, AK					
99510	23-7378119	501(c)(3)	2,000	0	X-country ski programs
Alaska Ski Educational Foundation,2525 Churchill Street Anchorage, AK 99510	23-7378119	501(c)(3)	312	0	Grant to Ursa Minor PTA for purchase of ski equipment for an after school ski program.
Alaska Youth for		33.(3)(3)			ogalpment for all alter control of the program.
Environmental Action,750 West 2nd Avenue Suite 200 Anchorage, AK 99501	53-0204616	501(c)(3)	5,000	0	YEP Program Support. From Salmon in the City grant
Alaska Youth for Environmental Action,750 West 2nd Avenue Suite				-	
200 Anchorage, AK 99501	53-0204616	501(c)(3)	4,036	0	YEP 2009 program support.
American Endowment Foundation,1521 Georgetown Road, Suite 104 P.O. Box 911 Hudson, OH 44236-5911	34-1747398	501(c)3	248,197	0	General operating support
Anchorage Library		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Foundation,P.O. Box 244714 Anchorage, AK 99524	92-0081583		100,000	0	Capacity building to support the long term goals of the Anchorage Library Renewal Initiative.
Anchorage Library Foundation,P.O. Box 244714 Anchorage, AK 99524	92-0081583		1,631	0	Capacity building to support the long term goals of the Anchorage Library Renewal Initiative.
Anchorage Museum Foundation,121 West 7th Avenue Anchorage, AK 99501	92-0129376	501(c)(3)	50,000	0	Historic Photo Presentation Project
Anchorage School District,5530 East Northern Lights Blvd Anchorage, AK 99504-3135	92-6000078	501(c)(3)	127,534	0	Rigging system replacement for West High Auditorium - ASD Memorandum #246
Anchorage School District,5530 East Northern Lights Blvd Anchorage, AK 99504-3135	92-6000078	501(c)(3)	1,320	0	Rigging system replacement for West High Auditorium - ASD Memorandum #247
Anchorage School District,5530 East Northern Lights Blvd Anchorage, AK 99504-3135		501(c)(3)	52,505	0	Auditorium improvements
APTI - Alaska Public Telecommunications, Inc.,3877 University Drive Anchorage, AK 99508		501(c)(3)	2,000	0	General support of public radio and television.
APTI - Alaska Public Telecommunications, Inc.,3877 University Drive			5,000		Support for general programming.
Anchorage, AK 99508	23-7394629	501(c)(3)	5,000	0	Support for general programming.

Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Archdiocese of					
Anchorage,225 Cordova Street Anchorage, AK 99501	92-0033244	501(c)3	5,000	0	One Bread, One Body Program.
Association of Christian	02 00002+4	001(0)0	0,000	 	one Bread, One Body Frogram.
Schools					
International, Development					
Public Relations P.O. Box					
65130 Colorado Springs,					
CO 80962-5130	95-6072567	501(c)3	9,000	0	General support for education
Boys & Girls Clubs of					, ,
Southcentral Alaska,2300					
W. 36th Avenue					Sponsor 72 boys & girls to particpate in
Anchorage, AK 99517	92-0036082	501(c)3	33,194	0	hockey programs
Boys & Girls Clubs of					
Southcentral Alaska,2300					
W. 36th Avenue					
Anchorage, AK 99517	92-0036082	501(c)3	24,500	0	Clubhouse Improvements
Boys & Girls Clubs of		1			
Southcentral Alaska,2300					
W. 36th Avenue					
Anchorage, AK 99517	92-0036082	501(c)3	1,500	0	Youth hockey support
Boys & Girls Clubs of					
Southcentral Alaska,2300					
W. 36th Avenue					
Anchorage, AK 99517	92-0036082	501(c)3	1,000	0	Youth hockey support
Bristol Bay Borough School					
District, P.O. Box 169			47.000		- F#: 1 B: 1
Naknek, AK 99633	92-0029587		17,000	0	Super Efficient Diesels
Bristol Bay Borough School					Creating a Place for our Community's Post
District, P.O. Box 169	02 0020507		25.000		Creating a Place for our Community's Past, Present & Future
Naknek, AK 99633	92-0029587		25,000	1 0	Present & ruture
Bristol Bay Borough School District, P.O. Box 169					
Naknek, AK 99633	92-0029587		25,000		Physical Fitness Room Upgrades
Bristol Bay Borough School	92-0029301		25,000	0	Triysical Fitness Room opgrades
District, P.O. Box 169					
Naknek, AK 99633	92-0029587		6,000	1 0	Culinary arts program.
Bristol Bay Elders Action		 	3,000	1	
Group (BBEAG), P.O. Box					
333 Naknek, AK 99633	92-0163489	501(c)(3)	23,982	0	Elder food bank
Bristol Bay Elders Action		1	,		71.
Group (BBEAG), P.O. Box					
333 Naknek, AK 99633	92-0163489	501(c)(3)	24,775	0	Community Food Bank Phase 2
Camai Community Health					
Center,P.O. Box 211					
Naknek, AK 99633	11-3813698	501(c)3	25,000	0	computed radiography equipment
Central Peninsula Health					
Foundation,250 Hospital					
Place Soldotna, AK 99669	20-2778670	501(c)(3)	97,170	0	General operating support
Central Peninsula Health					
Foundation,250 Hospital					
Place Soldotna, AK 99669	20-2778670	501(c)(3)	2,500	0	Sports Complex planning
Chignik Bay Tribal					
Council,P.O. Box 50					Harris sub-regional clinic and multi-purpose
Chignik, AK 99564	92-0083617	501(c)3	50,000	0	facility
Chignik Lagoon Village			1		
Council, P.O. Box 50					
Chignik Lagoon, AK 99565	92-0106417	501(c)3	10,976	1 0	Renewable/Alternative Energy Plan

2009 FOITH 990		1	1	T	
Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Chignik Lagoon Village					
Council,P.O. Box 50					
Chignik Lagoon, AK 99565	92-0106417	501(c)3	25,000	0	Garbage truck.
Chignik Lagoon Village					
Council,P.O. Box 50					
Chignik Lagoon, AK 99565	92-0106417	501(c)3	10,281	0	cultural awareness trip to San Diego, CA.
City of Aleknagik, P.O. Box					Vehicle Purchase and Firefighter Training &
33 Aleknagik, 99555	92-0079021	501(c)3	24,999	0	Equipment
City of Chignik, P.O. Box					
110 Chignik, 99564	92-0094970	501(c)3	25,000	0	Wind Generation Anemometer Survey
City of Dillingham, P.O. Box					
889 Dillingham, AK 99756	92-0030674	501(c)3	41,250	0	Dillingham ice rink roof
City of Eagle Alaska, Eagle					
Rebuilding Construction					
Team P.O. Box 1901					
Eagle, AK 99738	92-0047035	501(c)3	2,000	ا ا	Rebuilding Construction Team Work
City of Eagle Alaska, Eagle					
Rebuilding Construction					
Team P.O. Box 1901					
Eagle, AK 99738	92-0047035	501(c)3	2,000	ا ا	Eagle flood rebuild.
City of Eagle Alaska, Eagle	102 0047000	001(0)0	2,000		Lagie 1100d Tebuliu.
Rebuilding Construction					
Team P.O. Box 1901					
I .	02 0047025	E04/a)2	2.000		Facile Balandidia a Constantina Tonna
Eagle, AK 99738	92-0047035	501(c)3	3,082	<u> </u>	Eagle Rebuilding Construction Team
City of Egegik, P.O. Box	00 0454660	E04(=)2	25.000		Danie Baletina
189 Egegik, AK 99579	92-0154668	501(c)3	25,000	U	Dock lighting
City of Egegik, P.O. Box	00 045 4000	504()0	05.000		
189 Egegik, AK 99579	92-0154668	501(c)3	25,000	U	Batch Oxidation Facility Fencing
City of Egegik, P.O. Box	00 045 4000	504()0	05.000		Construction of a Fisherman's
189 Egegik, AK 99579	92-0154668	501(c)3	25,000	U	Hall/Community Center.
City of Newhalen, P.O. Box		5044.50	25.22		
165 Newhalen, AK 99606	92-0064939	501(c)3	25,000	0	Newhalen Iliamna Youth Athletic Club
City of Nondalton, P.O. Box				_	
89 Nondalton, AK 99640	92-0055092	501(c)3	9,700	0	Fuel containment upgrades.
City of Nondalton, P.O. Box					
89 Nondalton, AK 99640	92-0055092	501(c)3	24,988	0	purchase of administrative vehicle.
City of Nondalton,P.O. Box					
89 Nondalton, AK 99640	92-0055092	501(c)3	171,511	0	Water line replacement and improvement
City of Seattle, Centennial					
Celebration P.O. Box					(Office of Cultural Affairs), Alaska-Yukon-
94748 Seattle, WA 98124	91-6001275	501(c)3	25,000	0	Pacific Centennial
City of Togiak, P.O. Box 190					
Togiak, AK 99678	92-0047402	501(c)3	23,800	0	water and sewer service truck
Covenant House					
Alaska,609 F Street					
Anchorage, AK 99501	13-3419755	501(c)(3)	50,000	0	General Operating Support.
Covenant House					
Alaska,609 F Street					Charitable services: food, shelter, and
Anchorage, AK 99501	13-3419755	501(c)(3)	500	0	clothing.
Curyung Tribal		2 - 1 - 1 - 1			development, construction, and operation of
Council, P.O. Box 216					the H. Harvey Samuelson Community
Dillingham, AK 99576	92-0069902	501(c)(3)	25,000		Center.
Dillingham City School	52 000000Z	20 ((0)(0)	20,000		001(01)
District, P.O. Box 170	02 0024420	E01/a\2	10 000		Band instrument produces
Dillingham, AK 99576	92-0031132	501(c)3	18,000	U	Band instrument procurement
Dillingham City School					
District, P.O. Box 170	00 000 1 100	504()	0.4.65.4	_	
Dillingham, AK 99576	92-0031132	5(3)rud	24,621	0	Elementary reading program

2009 FORM 990	T	1	T	1	
Name, address, and zip Dillingham City School	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
District, P.O. Box 170			ł		
	00 0004400	504()0	05.000	_	
Dillingham, AK 99576	92-0031132	501(c)3	25,000	0	Metal Shop Equipment
Dillingham City School					
District, P.O. Box 170	00 0004400	E044 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Dillingham, AK 99576	92-0031132	501(c)3	16,605	0	Wrestling Mat
Dillingham City Schools -					
KDLG Radio, P.O. Box 670			05.000		
Dillingham, AK 99576	 	ļ	25,000	0	FM radio tower installation
Fairbanks Community Food					
Bank,725 26th Avenue					
Suite 1 Fairbanks, AK	00 000000	504(-)(0)	4.000		
99701	92-0088266	501(c)(3)	1,000	0	General support
Fairbanks Community Food					
Bank,725 26th Avenue					
Suite 1 Fairbanks, AK	00 000000	F04/ 1/2			
99701	92-0088266	501(c)(3)	4,000	0	Bonebuilders Nutrition Program
First United Methodist					
Church, 104 S Pineapple					
Ave Sarasota, FL 34236	59-0637841		5,000	0	General operating support.
Holy Cross Parrish,2627					
Lore Road Anchorage, AK					
99507	92-0122494	501(c)(3)	5,000	0	Religious Education.
Holy Family Cathedral,811					
West 6th Avenue 99051	92-0122447	501(c)3	100,000	0	Education center renovation.
Holy Rosary Academy, 1010					
West Fireweed Lane					
Anchorage, AK 99503	92-0126315	501(c)(3)	50,000	0	General Operating Support.
Holy Transfiguration of Our					
Lord Church, P.O. Box 225					
Newhalen, AK 99606			25,000	0	Church construction completion
Homer Foundation, P.O.					
Box 2600 Homer, AK					
99603	92-0139183		4,000	0	General operating support
Homer Foundation, P.O.					
Box 2600 Homer, AK				-	
	92-0139183		10,000	0	General operating support
Igiugig Tribal Village					
Council,P.O. Box 4008					
	92-0072200	501(c)3	60,073	0	Renewable Energy Greenhouse Project
Iliamna Village					
Council,P.O. Box 286					
	92-00249	501(c)3	25,000	0	Laundromat and freezer equipment
Juneau Community					
Foundation,350 North			İ		
Franklin Street Suite 2					
	52-2395867	501(c)(3)	75,133	0	For disbursing charitable grants
Juneau Community					
Foundation,350 North					
Franklin Street Suite 2					
	52-2395867	501(c)(3)	5,000	ol	General grantmaking - second CABI match
Kenai Central High School					
Choir,9583 Spur Highway			j		
Kenai, AK 99611	920030923	501(c)3	15,000	ol	Support for choir tour.
Kenai Peninsula Food			· · · · · · · · · · · · · · · · · · ·		
Bank,33955 Community					
College Drive Soldotna,					
	94-3112445		5,000	olı	Food storage warehouse and equipment
L			,		

Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Kenai Peninsula Food					
Bank,33955 Community College Drive Soldotna,					
AK 99669	94-3112445		500	0	Warehouse expansion project.
Kenai Peninsula Food					
Bank,33955 Community College Drive Soldotna, AK 99669	94-3112445		100	0	General operating support.
Kenai Peninsula Food					
Bank,33955 Community College Drive Soldotna,					
AK 99669	94-3112445		100	0	General operating support.
King Salmon Village Council,P.O. Box 68 King Salmon, AK 99613	92-0177073	501(c)3	15,000	0	Energy Efficiency Project
Kokhanok Village					
Council, P.O. Box 1007					
Kokhanok, AK 99606	92-0071118	501(c)3	25,000	0	Solid Waste Improvements
Kokhanok Village Council, P.O. Box 1007					books duty two de with an and a set along at
Kokhanok, AK 99606	92-0071118	501(c)3	22,995	n	heavy duty truck with snow plow attachment for Kokhanok roads.
Kokhanok Village	102 007 1110	001(0)0	22,000	0	TO NORMATION TOACS.
Council,P.O. Box 1007					
Kokhanok, AK 99606	92-0071118	501(c)3	33,000	0	Burn box purchase.
KTOO Legacy					
Foundation,360 Egan Drive					
Juneau, AK 99801	90-0033326		77,524	0	Balance of fund requested.
Lake & Peninsula					
Borough,P.O. Box 495 King Salmon, AK 99613	92-0128922	501(c)3	25,000		Soron motal and hazardaya waterial
Lake & Peninsula School	92-0120922	301(0)3	25,000		Scrap metal and hazardous material removal
District, P.O. Box 498 King					
Salmon, AK 99613	92-0057379	501(c)3	175,098	o	School to Life Project expansion.
Lutheran Social Services of					
Alaska, Inc.,1313 West 33rd Street Anchorage, AK 99503	94-3055592		7,000	0	Direct Assistance Program
Lutheran Social Services of					
Alaska, Inc.,1313 West					
33rd Street Anchorage, AK	1				•
99503	94-3055592		1,000	0	Area of greatest need.
Municipality of Anchorage, Accounts					
Payable P.O. Box 196650 Anchorage, AK 99519-6650	02 0050007		10.000		2008-2009 ice maintenance for the Cuddy
Native Council of Port	92-0059967		10,000	- 0	Family Midtown Park Skating Oval.
Heiden,2200 James Street					
Port Heiden, AK 99549	92-0059922	501(c)3	10,095	0	fire extinguishers.
Native Village of Ivanof					
Bay,7926 Old Seward					
Highway Suite B-5				[
Anchorage, AK 99518			52,373	0	Chignik Smolt Study
Native Village of					
Nuiqsut,P.O. Box 89169 Nuiqsut, AK 99789	920042378	501/01/21	30 303		Office Equipment
Our Bodies, Ourselves,5	340044318	501(0)(3)	30,382	U	Office Equipment
Jpland Road, Suite #3		İ			To promote the midwifery model of care in all
Cambridge, MA 02140	23-7274169		20,000		settings, hospital, birth center, and home.

Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Outpouring Ministries, P.O.					
Box 369 Naknek, AK 99633	01 2071952	E01(a)(2)	25.000		Portable classroom, outdoor play area &
Perryville School,Lake and	91-2071852	501(c)(3)	25,000	0	science supplies
Peninsula School District					
P.O. Box 103 Perryville,					
99648	92-0057379	501(c)3	5,000	0	Cultural Trip
Pilot Point Tribal		1 \ \ - / -	0,1000		
Council, P.O. Box 449 Pilot					
Point, AK 99649	99-0143318	501(c)3	50,000	0	Dago Creek Dock crane project
Pilot Point Tribal					
Council, P.O. Box 449 Pilot					
Point, AK 99649	99-0143318	501(c)3	50,000	0	Lower Bristol Bay Test Fishery Project.
Port Alsworth Improvement					
Corporation, P.O. Box 9998					
Port Alsworth, AK 99653	94-3137666		25,000	0	road improvements and development.
Providence Alaska					
Foundation,3200					
Providence Drive				_	Parish Nursing - \$1,000, Pallitive Care -
Anchorage, AK 99508	92-0093565	501(c)(3)	5,000	0	\$400
Rabbit Creek Community					
Church,3401 Rabbit Creek					
Road Anchorage, AK	00.0000004	504(+)0	0.400		0
99516	92-0096694	501(c)3	2,400	0	General support
Rabbit Creek Community					
Church,3401 Rabbit Creek					
Road Anchorage, AK 99516	02 0006604	E01(a)2	2 500		Canaval augment of aburah activities
Rabbit Creek Community	92-0096694	501(c)3	2,500	0	General support of church activities.
Church,3401 Rabbit Creek					
Road Anchorage, AK					
99516	92-0096694	501(c)3	2,400	ا ا	General support.
SAGA,P.O. Box 33037	02 0000004	001(0)0	2,400	<u>_</u>	Оспотаг заррот.
Juneau, AK 99803	92-0129698	501(c)(3)	17,680	0	Girdwood weed removal
Say Yes to Education,162		33.737737	,000	Ť	on an ood wood formoral
West 56th Street Suite 405					
New York, NY 10019	22-3139858		10,000	0	Academic services
SeaView Community					
Services, P.O. Box 1045					
Seward, AK 99664	92-0043803	501(c)(3)	4,000	0	Salary for "Play & Chat" coordinator.
SeaView Community					
Services,P.O. Box 1045					
Seward, AK 99664	92-0043803	501(c)(3)	1,700	0	Salary for "Play & Chat" coordinator.
Solace International,408					
East Camino Limon Verde					Materials needed to complete construction of
Sahuarita, AZ 85629	81-0622816	501(c)(3)	60,000	0	health center, water wells and latrines.
Solace International,408					
East Camino Limon Verde					Assist in purchasing and transport of
Sahuarita, AZ 85629	81-0622816	501(c)(3)	25,000	0	materials for ASMP project.
Solace International,408					
East Camino Limon Verde		F044		_	N. 10 11 0 11 0 11
Sahuarita, AZ 85629	81-0622816	501(c)(3)	7,650	0	Kenya Mbita Girls Center
Solace International,408					0
East Camino Limon Verde	04 0000010	5047.33	0.000	اءِ	Construction costs - Girl's Vocational School,
·	81-0622816	501(c)(3)	3,000	0	Kenya.
Solace International,408					
East Camino Limon Verde	04 0000040	504/ \(\(\)	45.000	ار	Materials needed to complete construction of
Sahuarita, AZ 85629	81-0622816	501(c)(3)	45,000	U	health center, water wells, and latrines.

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Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
1					
East Camino Limon Verde	04 0000040	504()(0)	40.000		Support continuation of projects at Belle,
Sahuarita, AZ 85629	81-0622816	501(c)(3)	10,000	0	Liberia, West Africa.
Spirit of Youth					
Foundation,P.O. Box					
243721 Anchorage, AK					Alaska Teen Media Institute summer parks
99524-372	92-0168893	501(c)(3)	3,000	0	programs
Spirit of Youth					
Foundation,P.O. Box				1	
243721 Anchorage, AK					
99524-372	92-0168893	501(c)(3)	2,000	0	Contribution for March 2009 wards banquet.
St. Nicholas Russian					
Orthodox Church, P.O. Box				:	
3 Chignik Lake, AK 99548	135559373	501(c)3	23,838	0	Church Rennovations
The Challenger Learning			•		
Center of Alaska,9711					
Kenai Spurr Highway					
Kenai, AK 99611	92-1761906	501(c)(3)	5,000	0	General support.
Twin Hills Moravian	02 0 0	001(0)(0)	- 0,000	ļ	Concidi dapport.
Church, Box TWA Twin					
Hills, AK 99576			49,320	۸ ا	passenger van and pews
Twin Hills Village			49,320	<u> </u>	passenger van and pews
Council, P.O. Box TWA					Tala canana unications and First Despendant
	02 0002200	E04/a)2	14044	_	Telecommunications and First Responders
Twin Hills, AK 99576	92-0062296	501(c)3	14,244	0	equipment upgrade
Ugashik Traditional					
Village,206 East Fireweed					
Lane Anchorage, AK				_	
99503	92-0160597	501(c)3	14,875	0	Greenhouse project
University of Alaska Anchorage, Grants & Contracts P.O. Box 141628 Anchorage, AK 99514-1620	92-6000147		208	0	Invasive plants project in parks
University of Alaska Anchorage, Grants & Contracts P.O. Box 141628 Anchorage, AK 99514-1620	92-6000147		2,748	0	Invasive plants project in parks
University of Alaska Anchorage, Grants & Contracts P.O. Box 141628 Anchorage, AK 99514-1620	92-6000147		2,300	0	Invasive plants project in parks
University of Alaska Anchorage, Grants & Contracts P.O. Box 141628 Anchorage, AK 99514-1620	92-6000147		1,548	0	Invasive plants project in parks
University of Alaska Anchorage,Grants & Contracts P.O. Box 141628 Anchorage, AK 99514-1620	92-6000147		3,967	0	Invasive plants project in parks
University of Alaska Bristol Bay Campus,P.O. Box 1070 Dillingham, AK 99576		501(c)3	42,002		Bristol Bay Summer Environmental Science Education Program

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Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
University of Alaska					
Fairbanks,Office of					
Financial Aid P.O. Box					
756360 Fairbanks, AK					Scholarship Award - Meghan O'Leary,
99775	92-6000147	501(c)3	4,000	0	student ID# 30975167
University of Alaska					
Fairbanks,Office of					
Financial Aid P.O. Box					
756360 Fairbanks, AK					Scholarship award for Annette D. Dyakanoff,
99775	92-6000147	501(c)3	4,000	0	ID #30924185
University of Alaska					
Fairbanks,Office of					
Financial Aid P.O. Box					
756360 Fairbanks, AK					
99775	92-6000147	501(c)3	1,000	0	Scholarship award for Panteleimom Askoak
University of Alaska					
Fairbanks,Office of					
Financial Aid P.O. Box					
756360 Fairbanks, AK					
99775	92-6000147	501(c)3	1,000	0	Andrew Cloward, student ID# 30953452
University of Alaska					-
Foundation-Anchorage,					
3211 Providence Drive					
Anchorage, AK 99508	23-7394620	501(c)(3)	5,000	0	General support
Washington State					
University					
Foundation, University					
Advancement P.O. Box					
641042 Pullman, WA					
99164-1042	91-1075542	501(c)(3)	5,000	0	Sciences
Young Generation					
Center, P.O. Box 6205 -					
CODE 40103 Kisumu,					School fees for orphans to attend secondary
Kondele Kenya,			10,000	0	school.
Young Generation					
Center, P.O. Box 6205 -					
CODE 40103 Kisumu,					School fees for orphans to attend secondary
Kondele Kenya,			7,500	0	school

Total 3,363,729