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Form 990-PF

Department of the Treasury  
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.

Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation  
MTA FOUNDATION INC

A Employer identification number  
31-1742284

Number and street (or P O box number if mail is not delivered to street address)  
1740 S CHUGACH WAY

Room/suite

B Telephone number (see instructions)  
(907) 745-3211

City or town, state or province, country, and ZIP or foreign postal code  
PALMER, AK 99645

C If exemption application is pending, check here

G Check all that apply

Initial return

Initial return of a former public charity

Final return

Amended return

Address change

Name change

D 1. Foreign organizations, check here

D 2. Foreign organizations meeting the 85% test, check here and attach computation

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here

I Fair market value of all assets at end of year (from Part II, col (c), line 16)

J Accounting method

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I

Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	236,380		
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments	17	17	
	4 Dividends and interest from securities			
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10			
	b Gross sales price for all assets on line 6a			
	7 Capital gain net income (from Part IV, line 2)		0	
	8 Net short-term capital gain			
	9 Income modifications			
	10a Gross sales less returns and allowances			
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	1,250	0		
12 Total. Add lines 1 through 11	237,647	17		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits			
	16a Legal fees (attach schedule)			
	b Accounting fees (attach schedule)	3,341	0	3,341
	c Other professional fees (attach schedule)			
	17 Interest			
	18 Taxes (attach schedule) (see instructions)			
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
	23 Other expenses (attach schedule)	4,676	0	1,536
	24 Total operating and administrative expenses. Add lines 13 through 23	8,017	0	4,877
	25 Contributions, gifts, grants paid	113,850		113,850
	26 Total expenses and disbursements. Add lines 24 and 25	121,867	0	118,727
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	115,780		
	b Net investment income (if negative, enter -0-)		17	
c Adjusted net income (if negative, enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	<b>1</b>	Cash—non-interest-bearing . . . . .	7,216	22,979	22,979
	<b>2</b>	Savings and temporary cash investments . . . . .	17,350	117,367	117,367
	<b>3</b>	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b>	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b>	Grants receivable . . . . .			
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b>	Inventories for sale or use . . . . .			
	<b>9</b>	Prepaid expenses and deferred charges . . . . .			
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)			
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b>	Investments—mortgage loans . . . . .			
	<b>13</b>	Investments—other (attach schedule) . . . . .			
	<b>14</b>	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	<b>15</b>	Other assets (describe ▶ _____)			
	<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	24,566	140,346	140,346
	<b>17</b>	Accounts payable and accrued expenses . . . . .			
	<b>18</b>	Grants payable . . . . .			
	<b>19</b>	Deferred revenue . . . . .			
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b>	Other liabilities (describe ▶ _____)			
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances		<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b>	Unrestricted . . . . .			
	<b>25</b>	Temporarily restricted . . . . .			
	<b>26</b>	Permanently restricted . . . . .			
		<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b>	Capital stock, trust principal, or current funds . . . . .	24,566	140,346	
	<b>28</b>	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	<b>29</b>	Retained earnings, accumulated income, endowment, or other funds	0	0	
	<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	24,566	140,346	
	<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	24,566	140,346	

Part III Analysis of Changes in Net Assets or Fund Balances		
<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	<b>1</b> 24,566
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b> 115,780
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b> 0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b> 140,346
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b> 0
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b> 140,346

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) <div style="float: right; font-size: small;">             { If gain, also enter in Part I, line 7              If (loss), enter -0- in Part I, line 7           } </div>	<b>2</b>	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	<b>3</b>	

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	57,428	57,321	1 001867
2016	50,000	64,634	0 773587
2015	0	26,678	0 000000
2014	0	0	0 000000
2013	0	0	0 000000

<b>2</b> Total of line 1, column (d)	<b>2</b>	1 775454
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0 355091
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	<b>4</b>	98,487
<b>5</b> Multiply line 4 by line 3	<b>5</b>	34,972
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	0
<b>7</b> Add lines 5 and 6	<b>7</b>	34,972
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	118,727

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	0
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	0
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	0
<b>6</b>	Credits/Payments		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	0
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	0
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	0
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶	<b>9</b>	0
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ▶	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> ▶ <b>Refunded</b> ▶	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation ▶ \$ _____ <b>(2)</b> On foundation managers ▶ \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	No
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ AK _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> . . . . .	<b>8b</b>	No
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions. . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>WWW.MTA-TELCO.COM</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>MATANUSKA TELEPHONE ASSOCIATION</b> Telephone no <b>(907) 745-3211</b>			

Located at **1740 S CHUGACH ST PALMER AK** ZIP+4 **99645**


<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>		
<b>16</b>	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b> <b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**


**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. . . . . Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? . . . . .	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶</b> 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶</b> 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	<b>4b</b>		<b>No</b>

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

		Yes	No
<b>5a</b>	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		<b>5b</b> No
	Organizations relying on a current notice regarding disaster assistance check here. 	<input type="checkbox"/>	
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		<b>6b</b> No
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b> 				<b>0</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	99,987
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	99,987
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	99,987
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	1,500
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	98,487
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	4,924

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

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	4,924
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	0
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	4,924
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	1,250
<b>5</b>	Add lines 3 and 4.	<b>5</b>	6,174
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	6,174

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	118,727
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	118,727
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	118,727

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



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				6,174
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . . 45,434				
<b>e</b> From 2017. . . . . 54,562				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	99,996			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 118,727				
<b>a</b> Applied to 2017, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				6,174
<b>e</b> Remaining amount distributed out of corpus	112,553			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	212,549			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .	212,549			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . . 45,434				
<b>d</b> Excess from 2017. . . . . 54,562				
<b>e</b> Excess from 2018. . . . . 112,553				

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

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

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

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

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

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

CONNIE EGGER  
1740 S CHUGACH WAY  
PALMER, AK 99645  
(907) 761-2410  
MTASCHOLARSHIP@MTA-TELCO.COM

**b** The form in which applications should be submitted and information and materials they should include

APPLICATION MUST BE SUBMITTED ELECTRONICALLY ALONG WITH SCHOOL TRANSCRIPT, LETTER OF REFERENCE, AND MTA MEMBER SIGNATURE

**c** Any submission deadlines

APPLICATION AND SUPPORTIVE DOCUMENTATION MUST BE SUBMITTED ON OR BEFORE APRIL 10, 2018

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

A) APPLICANTS MUST BE AN ACTIVE MEMBER OF MTA, OR A DEPENDENT OF AN ACTIVE MTA MEMBER, WHO RESIDES IN MTA'S SERVICE AREA. B) APPLICANTS MAY BE GRADUATING SENIORS FROM A SECONDARY SCHOOL, OR A STUDENT ATTENDING OR PLANNING TO ATTEND A COLLEGE OR VOCATIONAL SCHOOL. C) AWARDS ARE FOR STUDENTS WHO WILL ATTEND AN ACCREDITED COLLEGE OR VOCATIONAL SCHOOL IN THE SUMMER OR FALL OF 2018, AND BE ENROLLED IN A COURSE OF STUDY THAT LEADS TO A DEGREE OR CERTIFICATION. D) INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. REFER TO THE CHECKLIST ON THIS APPLICATION FORM TO ENSURE THAT ALL COMPONENTS OF THE APPLICATION HAVE BEEN FULFILLED. E) ALL MATERIALS, INCLUDING APPLICATION, TRANSCRIPT, AND RECOMMENDATION LETTERS, MUST BE SUBMITTED TOGETHER.

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>			<b>▶ 3a</b>	
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	

## Enter gross amounts unless otherwise indicated

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) (See instructions )
<b>1</b> Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	17	
<b>4</b> Dividends and interest from securities. . . .					
<b>5</b> Net rental income or (loss) from real estate					
a Debt-financed property. . . . .					
b Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .					
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue					
a PY SCHOLARSHIP REFUND _____					1,250
b _____					
c _____					
d _____					
e _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). .		0		17	1,250
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .					1,267

[illegible]

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash.	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets.	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization.	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets.	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements.	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees.	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations.	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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

<b>Sign Here</b>	*****	2019-11-13	*****	May the IRS discuss this return with the preparer shown below? (see instr )? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	CHERI R BURNHAM CPA		2019-11-13		P00055324
	Firm's name <b>►</b> MOSS ADAMS LLP				Firm's EIN <b>►</b> 91-0189318
Firm's address <b>►</b> 601 W RIVERSIDE AVENUE STE 1800 SPOKANE, WA 99201					Phone no (509) 747-2600

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ALEX HILLS 1740 S CHUGACH ST PALMER, AK 99645	DIRECTOR 1 00	0	0	0
NICHOLAS J BEGICH 1740 S CHUGACH ST PALMER, AK 99645				
ROXANNA DE MAYBERRY 1740 S CHUGACH ST PALMER, AK 99645	BOARD PRESIDENT 1 00	0	0	0
CATHERINE FOSSELMAN 1740 S CHUGACH ST PALMER, AK 99645				
MICHAEL BURKE 1740 S CHUGACH ST PALMER, AK 99645	BOARD VICE PRESIDENT 1 00	0	0	0
LARRY WIGET THROUGH 1018 1740 S CHUGACH ST PALMER, AK 99645				
GEORGE TRABITS THROUGH 818 1740 S CHUGACH ST PALMER, AK 99645	DIRECTOR 1 00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
IZABELLA BLOCK351 N LAUREN LN PALMER, AK 99645	NONE	I	SCHOLARSHIP	5,000
YELENA SINYAWSKIPO BOX 871982 WASILLA, AK 99687	NONE	I	SCHOLARSHIP	2,500
ANNA BRADSHAW 7185 N DREAMY VOLGA CIR PALMER, AK 99645	NONE	I	SCHOLARSHIP	2,500
<b>Total . . . . . ▶ 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PRESLEY PETERSEN 3032 E TAMARAK AVE WASILLA, AK 99654	NONE	I	SCHOLARSHIP	2,500
TAYLOR RYAN2861 S TEELAND ST WASILLA, AK 99623	NONE	I	SCHOLARSHIP	2,500
SAMUEL BROWNPO BOX 75 DENALI PARK, AK 99755	NONE	I	SCHOLARSHIP	5,000
<b>Total . . . . . ▶ 3a</b>				113,850



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OLIVIA JUHLPO BOX 352 HEALY, AK 99743	NONE	I	SCHOLARSHIP	5,000
CLARE COOK17740 SANCTUARY DR EAGLE RIVER, AK 99577	NONE	I	SCHOLARSHIP	2,500
HALEY LOPERPO BOX 166 TALKEETNA, AK 99676	NONE	I	SCHOLARSHIP	5,000
<b>Total . . . . . ▶ 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
REIGN PAGARAN1040 BEYLUND LOOP PALMER, AK 99645	NONE	I	SCHOLARSHIP	5,000
JARED HANSON325 E DOLPHIN PALMER, AK 99645	NONE	I	SCHOLARSHIP	2,500
SARAH MONTALBANO475 N BEGICH DR WASILLA, AK 99654	NONE	I	SCHOLARSHIP	5,000
<b>Total . . . . . ▶ 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MICHAEL REBER9650 ETOLIN CIRCLE EAGLE RIVER, AK 99577	NONE	I	SCHOLARSHIP	2,500
LILY SESSOM 1150 S COLONY WAY STE 3-363 PALMER, AK 99645	NONE	I	SCHOLARSHIP	5,000
KYLEIGH POLLOCK 7618 N HIGHLANDER LOOP PALMER, AK 99645	NONE	I	SCHOLARSHIP	500
<b>Total . . . . . ▶ 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KATHERINE ROSE GERMAIN 329 E 14TH AVE ANCHORAGE, AK 99501	NONE	I	SCHOLARSHIP	5,000
OLIVER SEVERANCE 2521 E MOUNTAIN VILLAGE DR B293 WASILLA, AK 99654	NONE	I	SCHOLARSHIP	5,000
ASHLEY DORN 5038 W PINNACLE RIDGE CR WASILLA, AK 99623	NONE	I	SCHOLARSHIP	2,500
<b>Total . . . . . ▶ 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ADPW - ADVOCATES FOR DOG AND PUPPY WELLNESS 8151 N PALMER-FISHHOK RD PALMER, AK 99645	NONE	PC	WALK N' ROLL FOR ANIMALS - SUPPORT SPAY AND NEUTER CLINICS	100
AFCEA - ARMED FORCES COMMUNCIATIONS & ELECTRONICS ASSOCIATION PO BOX 6142 JBER, AK 99506	NONE	PC	PROVIDE LOCAL SCHOOLS WITH STEM GRANTS FOR STEM RELATED PROJECTS	1,000
AK ASSOCIATION OF BUSINESS PROFESSIONALS 2472 N SEWARD MERIDIAN PARKWAY WASILLA, AK 99654	NONE	PC	SUPPORT LEADERSHIP CONFERENCE - TO DEVELOP STUDENT LEADERSHIP, ACADEMICS, AND COMMUNITY SERVICE SKILLS	250
<b>Total . . . . . ▶ 3a</b>				113,850

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ALASKA ATTACHMENT & BONDING ASSOCATES 619 S KNIK GOOSE BAY RD STE J WASILLA, AK 99654	NONE	PC	EDUCATE AND ASSIST FAMILIES AND THE COMMUNITY FOR TRAUMA AND STRESSOR RELATED DISORDERS	500
ALASKA BUSINESS WEEK 471 W 36TH AVE STE 200 ANCHORAGE, AK 99503	NONE	PC	SUPPORT ENTREPRENEURSHIP TRAINING IN THE VALLEY AT MATSU BUSINESS WEEK CAMP HELD AT WASILLA HIGH SCHOOL	1,500
ALASKA LADIES CHARITY SHOTGUN CLASSIC 3201 N GREENTREE ST WASILLA, AK 99654	NONE	PC	UNDER THE UMBRELLA OF AMERICAN CANCER SOCIETY, RAISING FUNDS TO FIGHT BREAST CANCER WITH SHOOTING AND OUTDOOR SPORTS	500
<b>Total . . . . . ▶ 3a</b>				113,850

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ALASKA WILDBIRD REHABILITATION CENTER PO BOX 52317 BIG LAKE, AK 99652	NONE	PC	EXPAND EDUCATION PROGRAMS AND OUTREACH TO SCHOOLS AND PUBLIC EVENTS TO TEACH ABOUT ALASKA'S WILD BIRDS AND HABITATS	250
ALZHEIMERS RESOURCE OF ALASKA 1750 ABBOTT ROAD ANCHORAGE, AK 99507	NONE	PC	EDUCATION AND SUPPORT TO CAREGIVERS AND LOVED ONES AFFECTED BY ALZHEIMER'S DISEASE, RELATED DEMENTIAS AND OTHER DISABILITY TO ENSURE QUALITY OF LIFE	500
AMERICAN CHARTER ACADEMY 7362 W PARKS HWY 725 WASILLA, AK 99623	NONE	GOV	SUPPORT WITH FISHER HOUSE ON JBER AND SAFARI CLUB INT'L WITH THEIR WOODED WARRIOR HUNTS	200
<b>Total . . . . . ► 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN FOUNDATION SUICIDE PREVENTION 120 WALL STREET 29TH FLOOR NEW YORK, AK 10005	NONE	PC	RAISE AWARENESS OF SUICIDE PREVENTION EFFORTS OFFERED TO SCHOOLS COMMUNITY AND MENTAL HEALTH ORGANIZATIONS TO SUPPORT SURVIVORS	500
ANCHORAGE WOMENS HOCKEY LEAGUE PO BOX 91887 ANCHORAGE, AK 99509	NONE	PC	TEAM EXPENSES	500
ASC POP WARNERPO BOX 773625 EAGLE RIVER, AK 99577	NONE	PC	ENABLE YOUTH TO PARTICIPATE IN TEAM SPORTS AND ACTIVITIES IN A SAFE AND STRUCTURED ENVIRONMENT	250
<b>Total . . . . . ► 3a</b>				113,850



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BIG BROTHERS BIG SISTERS OF ALASKA 191 E SWANSON AVE STE 204 WASILLA, AK 99654	NONE	PC	PROVIDE CHILDREN FACING ADVERSITY WITH STRONG AND ENDURING, PROFESSIONAL SUPPORTED 1-TO-1 RELATIONSHIPS THAT CHANGE LIVES FOR THE BETTER, FOREVER	2,500
CCS EARLY LEARNING 2060 E INDUSTRIAL DR WASILLA, AK 99654	NONE	PC	ANNUAL VALENTINE BANQUET & SILENT AUCTION - MAKING A DIFFERENCE IN THE LIVES AND FAMILIES OF YOUNG CHILDREN WITHIN OUR COMMUNITIES	1,500
THE CHILDREN'S PLACEPO BOX 871788 WASILLA, AK 99687	NONE	PC	ANNUAL BLACK & WHITE GALA - OFFER HOPE AND HEALING TO CHILDREN AND FAMILIES IMPACTED BY CHILD ABUSE AND NEGLECT THROUGH A COORDINATED COMMUNITY RESPONSE	5,000
<b>Total . . . . . ► 3a</b>				113,850

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHRISTMAS FRIENDSHIP DINNER PO BOX 870845 WASILLA, AK 99687	NONE	PC	PLAN, PREPARE AND SERVE A FREE CHRISTMAS DAY DINNER TO ANY AND ALL, REGARDLESS OF FINAL NEED FROM CHICKALOON TO TALKEETNA	1,000
CHUGIAK EAGLE RIVER SENIOR CENTER 22424 N BIRCHWOOD LOOP CHUGIAK, AK 99657	NONE	PC	ANNUAL SILVER GALA - DINNER AND DANCE TO BENEFIT CHUGIAK-EAGLE RIVER SENIOR CENTER	5,000
CHUGIAK HIGH SCHOOL FOOTBALL BOOSTERS PO BOX 771061 EAGLE RIVER, AK 99577	NONE	GOV	SUPPORT CHUGIAK HS FOOTBALL AND STUDENT ATHLETES BY PROVIDING EDUCATIONAL SCHOLARSHIPS, CAMP SCHOLARSHIPS AND EQUIPMENT WHILE BUILDING COMMUNITY PARTNERSHIPS	115
<b>Total . . . . . ▶ 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHUGIAK FOOTBALL BOOSTERS CLUB PO BOX 771061 EAGLE RIVER, AK 99577	NONE	GOV	RAISING MONEY TO BUY NECESSARY SAFETY EQUIPMENT LIKE PADS AND HELMETS FOR PLAYERS	135
COLONY CHEERLEADING 9980 E BOGARD RD PALMER, AK 99645	NONE	GOV	RAISING MONEY TO BUY NEW MATS SO CHEER HAS A SAFE ENVIRONMENT TO PRACTICE	250
COLONY HIGH SCHOOL 9550 E BOGARD RD PALMER, AK 99645	NONE	GOV	AP COMPUTER SCIENCE PRINCIPLES - PROMOTE COMPUTER SCIENCE TO MAT SU STUDENTS AS AN ESSENTIAL KNOWLEDGE FOR TODAY'S SOCIETY, ECONOMY AND FUTURE	500
<b>Total . . . . . ► 3a</b>				113,850

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COLONY HIGH SCHOOL 9550 E BOGARD RD PALMER, AK 99645	NONE	GOV	GRAD BLAST - PROVIDE A SAFE, ALCOHOL AND DRUG-FREE ENVIRONMENT FOR GRADUATES TO CELEBRATE THEIR ACCOMPLISHMENTS	250
COTTONWOOD CREEK ELEMENTARY 800 N SEWARD MERIDIAN RD WASILLA, AK 99654	NONE	GOV	5TH GRADE LOCK-IN - MEMORABLE EXPERIENCE BEFORE MOVING ON TO MIDDLE SCHOOL	250
CYSA11925 OLD GLENN HWY EAGLE RIVER, AK 99577	NONE	GOV	GRAD BLAST - PROVIDE A FUN AND SAFE ENVIRONMENT WITHOUT DRUGS/ALCOHOL FOR CHUGIAK/EAGLE RIVER/MIDDLE SCHOOL AND HOMESCHOOL 2018 GRADUATES	250
<b>Total . . . . . ▶ 3a</b>				113,850

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
EAGLE RIVER HIGH SCHOOL FIRST TECH 8701 YOSEMITE DR EAGLE RIVER, AK 99577	NONE	GOV	FIRST TECH CHALLENGE TEAMS (GRADES 7-12) ARE CHALLENGED TO DESIGN, BUILD, PROGRAM AND OPERATE ROBOTS TO COMPETE IN HEAD- TO-HEAD CHALLENGE IN AN ALLIANCE FORMAT	1,500
EAGLE RIVER LIONS CLUB PO BOX 771046 EAGLE RIVER, AK 99577	NONE	PC	SERVE AND LOCAL COMMUNITY WITH FINANCIAL AND PHYSICAL SUPPORT IN CELEBRATION OF OUR COUNTRY'S INDEPENDENCE	250
EXCEL CHEER BOOSTER CLUB PO BOX 3736 PALMER, AK 99645	NONE	PC	OFFSET THE COST OF PERFORMANCE UNIFORMS FOR TWENTY FOUR ATHLETES	250
<b>Total . . . . . ▶ 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FAMILY OUTREACH CENTER FOR UNDERSTANDING SPECIAL NEEDS INC 11901 BUSINESS BLVE SUITE 200 EAGLE RIVER, AK 99577	NONE	PC	PROVIDE FAMILIES IN THE COMMUNITY EXPERIENCING SPECIAL NEEDS WITH PROGRAM AND SERVICES NEEDED TO BE SUCCESSFUL AND ACTIVE	500
FOOD BANK OF ALASKA2121 SPAR AVE ANCHORAGE, AK 99501	NONE	PC	THANKSGIVING BLESSING - RAISING FUNDS TO PURCHASE ALL THE TURKEYS AND PRODUCE FOR THE VALLEY FAMILIES	500
GIRL SCOUTS OF ALAKSA 3911 TURNAGAIN BLVD EAST ANCHORAGE, AK 99517	NONE	PC	HELP BUY PROGRAM SUPPLIES FOR ENCAMPMENT 2019 FOR GIRLS K-12	500
<b>Total . . . . . ► 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GREAT ALASKA COUNCIL BOY SCOUTS OF AMERICA 3117 PATTERSON ST ANCHORAGE, AK 99504	NONE	PC	SUPPORT THE MATSU 500, A COMMUNITY PINWOOD DERBY RATE TO SUPPORT SCOUTS AND COUNTING IN THE MAT-SU VALLEY	500
CITY OF HOUSTONPO BOX 940027 HOUSTON, AK 99694	NONE	GOV	HOUSTON FOUNDERS' DAY - BRING LOCAL RESIDENTS AND GUESTS TOGETHER TO CELEBRATE THE COMMUNITY	500
HOUSTON HAWKS FOOTBALL BOOSTER CLUB PO BOX 299124 WASILLA, AK 99687	NONE	GOV	FUNDS TO HELP STUDENTS WHO CANNOT AFFORD THE NECESSARY SAFETY EQUIPMENT	250
<b>Total . . . . .</b> ► <b>3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JUNIOR ACHIEVEMENT OF ALASKA 639 W INTERNATIONAL AIRPORT RD STE 38 ANCHORAGE, AK 99503	NONE	PC	FUNDING FOR OPERATIONS AND SUPPORT FOR PROGRAMS THAT DIRECTLY IMPACT AND SUPPORT POPULATION IN NEED IN SOUTH CENTRAL ALASKA	500
KIDS KUPBOARD2850 SKY RANCH LOOP PALMER, AK 99645	NONE	PC	MATSU EMPTY BOWL - RAISE FUNDS TO GET FOOD DIRECTLY INTO THE HANDS OF CHILDREN IDENTIFIED AS "AT-RISK" OF NOT GETTING ENOUGH TO EAT	500
LAZY MOUNTAIN FOOTHILLS RUNNING CLUB PO BOX 2593 PALMER, AK 99645	NONE	PC	CRAZY LAZY RACE - RAISE FUND FOR HIGH SCHOOL GIRLS ATHLETIC PROGRAMS IN THE VALLEY	500
<b>Total . . . . . ▶ 3a</b>				113,850



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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LEMONADE DATE ALASKA 1815 BRAWGAW ST STE 203 ANCHORAGE, AK 99508	NONE	PC	FUNDS USED TO PROVIDE PROGRAM SERVICES AND LOCAL SUPPORT TO ALASKA COMMUNITIES	500
LITTLE A EVENTS INC2205 HILAND RD EAGLE RIVER, AK 99577	NONE	PC	PAYS FOR SOME MEDICAL COST FOR A CHILD CURRENTLY IN HOSPICE CARE	250
MADDYS RUN ALASKA8816 ACADIA DR EAGLE RIVER, AK 99577	NONE	PC	RAISE FUNDS TO HELP PAY FOR MEDICAL EXPENSES OF CHILDREN WITH LIFE-THREATENING MEDICAL CONDITIONS	500
<b>Total . . . . . ▶ 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MATANUSKA-SUSITNA BOROUGH SCHOOL DISTRICT 501 N GULKANA PALMER, AK 99645	NONE	GOV	HOUSTON MIDDLE EARTHQUAKE SUPPORT FAIR - REPLACE VALUABLE ITEMS LEFT BY STUDENTS AND STAFF WHEN THEY EVACUATED THE BUILDING DURING THE 11/30 EARTHQUAKE	2,000
MAT SU CENTRAL SCHOOL 600 E RAILROAD AVE SUITE 6 WASILLA, AK 99654	NONE	GOV	GRAD BLAST - POSITIVE AND MEMORABLE EXPERIENCE FOR GRADUATING CLASS	250
MAT SU SCHOOLS FOUNDATION PO BOX 873413 WASILLA, AK 99687	NONE	GOV	ALASKA KIDS ON THE RUN - PROVIDE PRIZES FOR RACE WINNERS AND OFFSET RACE COSTS	200
<b>Total . . . . . ► 3a</b>				113,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MAT SU SERVICES FOR CHILDREAN & ADULTS 1225 W SPRUCE AVE WASILLA, AK 99654	NONE	PC	GOLF TOURNAMENT - PROCEEDS FROM THE EVENT USED TO ADDRESS HEALTH, SAFETY AND OTHER CRITICAL NEEDS TO OVER 200 INDIVIDUALS AND FAMILIES	350
MAT-SU SPECIAL SANTA PROGRAM PO BOX 1664 PALMER, AK 99645	NONE	PC	HALLOWEEN HOLLOW - HELP COVER THE OVERALL COSTS OF THE ANNUAL EVENT THAT IS SAFE, WAR, HANDICAP ACCESSIBLE TRICK OR TREAT CARNIVAL	1,000
MIDNIGHT SUN FAMILY LEARNING CENTER 7362 W PARKS HWY 714 WASILLA, AK 99623	NONE	PC	MIDNIGHT SUN FUN RUN - PROCEEDS HELP UPDATE ATHLETIC EQUIPMENT FOR P E CLASSES AND PLAYGROUND USES	250
<b>Total . . . . . ► 3a</b>				113,850

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MOOSE BOOSTERS WRESTLING CLUB PO BOX 404 PALMER, AK 99645	NONE	GOV	WRESTLING TOURNAMENT - PROMOTE YOUTH WRESTLING IN THE PALMER COMMUNITY	250
MUSCULAR DYSTROPHY ASSOCIATION PO BOX 773163 EAGLE RIVER, AK 99577	NONE	PC	ICE FISHING DERBY - RALLY, ENRICH, AND EDUCATE THE LOCAL COMMUNITY ABOUT MDA AND FISHING CONSERVATION BY OFFERING FAMILIES A FUN WAY TO GET OUTDOORS	200
MY HOUSE 1981 E PALMER WASILLA HWY 100 WASILLA, AK 99654	NONE	PC	RADIO MARATHON - GENERATE OPERATING FUNDS TO SUPPORT SERVICES FOR HOMELESS YOUTH IN THE MAT SU VALLEY THAT OFFER A HAND UP AND NOT A HAND OUT	500
<b>Total . . . . . ▶ 3a</b>				113,850

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MY HOUSE 1981 E PALMER WASILLA HWY 100 WASILLA, AK 99654	NONE	PC	CANOE & KAYAK RAGATA - RAISE MONEY TO END HOMELESSNESS OF OUR YOUTH	500
NATIVE VILLAGE OF EKLUTNA 26339 EKLUTNA VILLAGE RD CHUGIAK, AK 99567	NONE	PC	BIENNIAL DENA'INA POTLACH/POWWOW - RAISE FUNDS TO SUPPORT FOOD, TRANSPORTATION AND RENTAL EQUIPMENT FOR THE EVENT	100
OUTDOOR HERITAGE FOUNDATION PO BOX 4752 PALMER, AK 99645	NONE	PC	MIDNIGHT SUN CHARITY SHOOT - FUNDING TO PROVIDE EDUCATIONAL PROGRAMS THAT GIVE ALASKANS SKILLS AND KNOWLEDGE TO LEAD HEALTHIER OUTDOOR LIFESTYLES	500
<b>Total . . . . . ▶ 3a</b>				113,850

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PALMER AMERICAN LEGION POST 15 1550 MYSTIC CIR PALMER, AK 99645	NONE	GOV	SALUTE TO SERVICE RUN & PICNIC - RAISE FUNDS FOR A SCHOLARSHIP FOR YOUNG MEN AND WOMEN IN OUR LOCAL AREA	250
PALMER HIGH GRAD BLAST 1170 W BOGARD RD PALMER, AK 99645	NONE	GOV	GRAD BLAST - SAFE, FUN, DRUG AND ALCOHOL-FREE ENVIRONMENT TO HONOR ACHIEVEMENT AND CELEBRATE THE MAJOR MILESTONE	250
PALMER HIGH SCHOOL 1170 W BOGARD RD PALMER, AK 99645	NONE	GOV	ROCKIN' HOCKEY - UNIFY STUDENTS WITH INTELLECTUAL AND PHYSICAL DISABILITIES WITH VALLEY ATHLETES IN A COMPETITIVE MODIFIED ICE HOCKEY GAME	1,000
<b>Total . . . . .</b> ► <b>3a</b>				113,850

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PALMER HISTORICAL SOCIETY PO BOX 1935 PALMER, AK 99645	NONE	PC	RAISE FUNDS FOR INTERNET SERVICE AT THE MUSEUM FOR VOLUNTEER STAFF AND PUBLIC	250
PALMER MUSEUM OF HISTORY 723 S VALLEY WAY PALMER, AK 99645	NONE	PC	PALMER MUSEUM GARDEN AND ART FAIRE - PROMOTE LIVABLE, HEALTHY, AND VIBRANT COMMUNITY	500
PALMER MUSIC BOOSTER CLUB 1170 W BOGARD RD PALMER, AK 99645	NONE	GOV	VALLEY JAZZ FESTIVAL - COVER COSTS OF LIGHT AND SOUND FOR THE FINAL CONCERT - FREE TO THE PUBLIC	1,000
<b>Total . . . . . ▶ 3a</b>				113,850

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
POP WARNER FOOTBALL 7362 W PARKS HWY STE 585 WASILLA, AK 99623	NONE	PC	PURCHASE NEW HELMETS	750
SALVATION ARMY143 E 9TH AVE ANCHORAGE, AK 99501	NONE	PC	SEASON OF GIVING - FUNDS TO BENEFIT THE NEEDY IN THE VALLEY	1,000
THE SCOTTY GOMEZ FOUNDATION 2550 S EVERGREEN CIR WASILLA, AK 99654	NONE	PC	THE LAST FRONTIER POND HOCKEY CLASSIC - PROCEEDS PROVIDE HOCKEY SCHOLARSHIPS AND FREE EQUIPMENT AND GEAR TO OVER 300 KIDS EACH YEAR	300
<b>Total . . . . . ▶ 3a</b>				113,850



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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SUTTON ELEMENTARY PTAPO BOX 227 SUTTON, AK 99674	NONE	GOV	FALL CARNIVAL - FUNDS RAISED WILL BE DIRECTED TOWARDS FIELD TRIPS	250
TALKEETNA COMMUNITY RADIO INC PO BOX 300 TALKEETNA, AK 99676	NONE	PC	KTNA GAME NIGHT - FUNDS TO SUPPORT LOCAL COMMUNITY RADIO STATION SERVING TALKEETNA, TRAPPER CREEK AND SURROUNDING BUS COMMUNITIES	500
TEELAND MIDDLE SCHOOL 2788 N SEWARD MERIDIAN PARKWAY WASILLA, AK 99654	NONE	GOV	FIRST LEGO LEAGUE ROBOTS TEAM - PURCHASE LEGO ROBOTIC KITS TO DEVELOP CITIZENS THAT HAVE SKILLS IN PROGRAMMING, ENGINEERING, AND WORKING IN TEAMS TO SOLVE PROBLEMS	400
<b>Total . . . . . ▶ 3a</b>				113,850

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UPPER SUSITNA FOOD PANTRY PO BOX 277 TALKEETNA, AK 99676	NONE	PC	HOLIDAY FOOD BASKETS - PROVIDE SUPPLEMENTAL FOOD TO FAMILIES IN NEED	1,000
VALLEY COMMUNITY FOR RECYCLING SOLUTIONS PO BOX 876464 WASILLA, AK 99687	NONE	PC	20 YEARS OF RECYCLING ANNIVERSARY COMMUNITY CELEBRATION - HELP WITH COST OF THE EVENT AND KEEP PROGRAM VIBRANT AND GROWING	500
VALLEY THUNDER HOCKEY ASSOCIATION 2673 NORTH BONNIE BELLE WASILLA, AK 99654	NONE	PC	TEA TIME FOR STICK TIME - RAISE MONEY FOR GIRLS HOCKEY TEAM	250
<b>Total . . . . . ▶ 3a</b>				113,850

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WASILLA AREA SENIORS INC 1301 S CENTURY CIRCLE WASILLA, AK 99654	NONE	PC	VETERAN'S DAY CONGREGATE LUNCH - FUNDS USED TO PROVIDE A NUTRITIOUS MEAL FOR 100+ SENIORS	500
WASILLA AREA SENIORS INC 1301 S CENTURY CIRCLE WASILLA, AK 99654	NONE	PC	MEALS ON WHEELS FUN RUN - RAISE FUNDS FOR WASILLA AREA MEALS ON WHEELS PROGRAM	2,500
WASILLA HIGH SCHOOL 701 E BOGARD RD WASILLA, AK 99654	NONE	GOV	WHS BASKETBALL BOOSTER CLUB - RAISE FUNDS TO SUPPORT BASKETBALL STUDENT ATHLETICS PROGRAM	500
<b>Total . . . . . ▶ 3a</b>				113,850

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WASILLA HIGH SCHOOL 701 E BOGARD RD WASILLA, AK 99654	NONE	GOV	GRAD BLAST - PROVIDE THE GRADUATES A HEALTHY AND SAFE, SUBSTANCE-FREE OPPORTUNITY TO CELEBRATE GRADUATING HIGH SCHOOL	250
<b>Total . . . . .</b> ▶ <b>3a</b>				113,850

**TY 2018 Accounting Fees Schedule****Name:** MTA FOUNDATION INC**EIN:** 31-1742284

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	3,341	0		3,341

**TY 2018 Explanation of Non-Filing with Attorney General Statement****Name:** MTA FOUNDATION INC**EIN:** 31-1742284**Statement:**

THE FOUNDATION MEETS THE EXCEPTION FOR PROVIDING A COPY OF THE 990-PF TO THE ATTORNEY GENERAL BECAUSE THE FOUNDATION HAS LESS THAN TEN DONORS ANNUALLY.

**TY 2018 Other Expenses Schedule****Name:** MTA FOUNDATION INC**EIN:** 31-1742284**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSES	1,536	0		1,536
ADVERTISING	2,319	0		0
MEALS	821	0		0

## TY 2018 Other Income Schedule

**Name:** MTA FOUNDATION INC

**EIN:** 31-1742284

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PY SCHOLARSHIP REFUND	1,250		1,250



<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF</b> ▶ Go to <u><a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a></u> for the latest information	OMB No 1545-0047
		<b>2018</b>
<b>Name of the organization</b> MTA FOUNDATION INC		<b>Employer identification number</b> 31-1742284

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ \_\_\_\_\_

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

<b>Name of organization</b> MTA FOUNDATION INC	<b>Employer identification number</b> 31-1742284
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**Part I** **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MATANUSKA TELEPHONE ASSOCIATION INC 1740 S CHUGACH ST PALMER, AK 99645	\$ 225,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

Employer identification number

31-1742284

<b>Part II</b>	<b>Noncash Property</b>
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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

<b>Name of organization</b> MTA FOUNDATION INC	<b>Employer identification number</b> 31-1742284
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<b>Part III</b>	<b>Exclusively</b> religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> for the year. (Enter this information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	