کم	·								29	393	1560	2205
Forn	, 990-T	Ex	empt Organi				Income	Tax R	etur	n	OMB No 1	
		For cale	ndar year 2019 or other t	-						01	<u> </u>	10
Dena	rtment of the Treasury	" " " " "	► Go to www.irs.g							*† ZI	_ <	13
	nal Revenue Service	▶ Do	not enter SSN numbers)(3)	Open to Public 501(c)(3) Orga	Inspection for inizations Only
Ā	Check box if address changed		Name of organization (Check bo	ox if nai	me changed a	nd see instruction	ons)	•		oyer Identification	on number
ВЕх	cempt under section	1	THE ALASKA C	COMMUNIT	Y FO	UNDATIO	N					
X	501(C () 3)	Print	Number, street, and roo	m or suite no I	faPO	box, see inst	ructions			92-0	155067	
	408(e) 220(e)	Type									ated business a	ctivity code
	408A530(a)		3201 C STREE	T				110		(See in	istructions)	
丄	529(a)		City or town, state or pr		y, and Z	ZIP or foreign p	oostal code					
	ook value of all assets end of year		ANCHORAGE, A							9000	99	
	·		up exemption number				1 1			T	 	T
	27,597,913.	<u> </u>	ck organization type I				501	(c) trust		401(a)		Other trust
		_	ESTMENTS IN P				If only on			•	(or first) unrel e than one, de:	
			end of the previous s			Parts I and	-	•				scribe the
	rade or business, th		•				, cop.o.c			<i></i>		
			corporation a subsidia	ry in an affili	ated g	roup or a par	ent-subsidian	y controlled	group?		▶	Yes X No
			identifying number of t		rporati	on 🕨		<u> </u>				
			VIN GRAY, CFO			,		one number	▶ 90	7-334·		
			or Business Incon	ne		(A)	Income	(B)	Expen	ses	(C)	Net
	Gross receipts or		 		۱	ļ						[اسسسست
2 2			ule A, line 7)	c Balance ►							 	
3			2 from line 1c		3			- 				
4a	•		ttach Schedule D)		4a						1	
b			Part II, line 17) (attach Fo									
С	*		rusts		4c							
5	Income (loss) from a p	partnership o	r an S corporation (attach state	ement),	5		-33,703	ATC	H 1	エ	FIVED	, 38,703.
6	Rent income (Sch	nedule C)			6_		/		12	- IO		S
7			come (Schedule E) .		7				8	NOV .	9 2020	8
8			ents from a controlled organization						 	000	FFA) LIT	8
9 10			1(c)(7), (9), or (17) organizati ncome (Schedule I)		10			+	L	OGU	EN, UT	
11	•	•	lule J)		1.1			+			 	
12	•	•	tions, attach schedule)			<u> </u>		· · · · · ·				
13			ough 12				-33,703					-33,703.
Pa	rt II Deductio	ns Not	Taken Elsewhere	(Sée instr	ructio	ons for lim	itations on	deductio	ns) (l	Deducti	ons must b	e directly
			ne unrelated buşın									
14	•		directors, and trustees	•						14		
15			<i>. /</i>								 	
16			./								 	
17 18	Interest (attach s	chedule)	(see instructions)						• • •	17	 	
19											 	
20	Depreciation (att	ach Form	4562)				20					
21			on Schedule A and els							216	<u>. </u>	
22												
23			compensation plans .									
24			s								ļ .——	
25			Schedule I)									
26 27/	<i>7</i>		chedule J)								+	
27/ 28			schedule)								 	
29			ole income before ne								 	-33,703.
30			ig loss arising in tax ye	_								
31		•	e income Subtract line	-	-		•			—		-33,703.
For			Notice, see instructions								Form	990-T (2019)

Form	990-7-/2019)			Р	Page 2
Par	rt III Total Unrelated Business Taxable Income				
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (se	e I			
	instructions)	1. <u>32</u>	_	33,7	103.
33	Amounts paid for disallowed fringes				
34	Charitable contributions (see instructions for limitation rules)	. 34			
35	Total unrelated business taxable income before pre-2018_NOLS and specific deduction Subtract lip	ē			
	34 from the sum of lines 32 and 33 \dots	ノ <u>35</u>		33,7	103.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (se	e	i		
	instructions)	36			
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37		33,7	
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	₹ 38		1,0	000.
39	Unrelated business taxable income. Subtract line 38 from line 37 If line 38 is greater than line 37		1		
	enter the smaller of zero or line 37	. 39		33,7	703.
Par	rt IV Tax Computation	<u>`_!</u>			
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0 21)	▶ 40			
41	Trusts Taxable at Trust Rates. See instructions for tax computation income tax or	1			
	the amount on line 39 from Tax rate schedule or Schedule D (Form 1041)	▶ 41			
42	Proxy tax. See instructions		<u> </u>		
43	Alternative minimum tax (trusts only)				
44	Tax on Noncompliant Facility Income. See Instructions				
45	Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies	. 45			
_	rt V Tax and Payments				
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a				
	Other credits (see instructions)	_			
	General business credit Attach Form 3800 (see instructions)	_			
	Credit for prior year minimum tax (attach Form 8801 or 8827)	┥			
			 		
47	Subtract line 46e from line 45	. 47	 		
48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule				
49	Total tax. Add lines 47 and 48 (see instructions)		 		0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	. 50_	 	-	
	Payments A 2018 overpayment credited to 2019	_			
	2019 estimated tax payments				
	Tax deposited with Form 8868				
	Foreign organizations Tax paid or withheld at source (see instructions)	_			
	Backup withholding (see instructions)	-			
	Credit for small employer health insurance premiums (attach Form 8941)	\dashv			
g	Other credits, adjustments, and payments Form 2439				
	Form 4136 Other Total ▶ [51g]	⊢			
52	Total payments Add lines 51a through 51g	52	 		
53	Estimated tax penalty (see instructions) Check if Form 2220 is attached	53	 		
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed		 		
55 56	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	▶ 55 ▶ 56	 		
	Enter the amount of line 55 you want		ــــــــــــــــــــــــــــــــــــــ		
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature		r authority	Yes	No
J,	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization		•		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	•			l
	here VG, KY, IE	ie ioreig	jii Country	x	l
58					x
30	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fell "Yes," see instructions for other forms the organization may have to file	reign tu	St'	<u></u>	<u> </u>
59	Enter the amount of tax-exempt interest received or accrued during the tax year > \$				l
53	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the	ne best of	my knowledge	and beli	ief, it is
Sig	true, correct, and complete. Declaration of preparer (other than taxobver) is based on all information of which preparer has any knowledge				
Her			RS discuss		
	Signature of officer Date Title		e preparer sh ctions)?X ye	es T	No
	Print/Type preparer's name Preparer's signature Date		. ΡΠΝ		
Paid	d	heck Ll elf-employe	" 5017	7219) 4
	parer Firm's name BDO USA, LLP	ım's EIN ▶	12 520		
Use	Only Similarity > 3601 C STREET STE 600 ANCHORAGE AK 99503		207-278-		

Form 990-T (2019) Page 3 Schedule A - Cost of Goods Sold. Enter method of inventory valuation > 6 Inventory at end of year Inventory at beginning of year . Purchases 2 Cost of goods sold. Subtract line 3 6 from line 5 Enter here and in Part 4a Additional section 263A costs (attach schedule) 4a Do the rules of section 263A (with respect to No 4b **b** Other costs (attach schedule) . property produced or acquired for resale) apply Х 5 Total Add lines 1 through 4b . 5 Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1. Description of property (1) (2) (3) (4) 2. Rent received or accrued (a) From personal property (if the percentage of rent (b) From real and personal property (if the 3(a) Deductions directly connected with the income for personal property is more than 10% but not percentage of rent for personal property exceeds in columns 2(a) and 2(b) (attach schedule) more than 50%) 50% or if the rent is based on profit or income) <u>(1)</u> (2) (3) (4) Total (b) Total deductions. (c) Total income Add totals of columns 2(a) and 2(b) Enter Enter here and on page 1, here and on page 1, Part I, line 6, column (A) ▶ Part I, line 6, column (B) Schedule E - Unrelated Debt-Financed Income (see instructions) 3 Deductions directly connected with or allocable to 2 Gross income from or debt-financed property 1 Description of debt-financed property allocable to debt-financed (a) Straight line depreciation (b) Other deductions property (attach schedule) (attach schedule) (1) (2) (3) (4) 5 Average adjusted basis 4 Amount of average 6 Column 8 Allocable deductions of or allocable to debt-financed property acquisition debt on or 7 Gross income reportable 4 divided (column 6 x total of columns allocable to debt-financed (column 2 x column 6) by column 5 3(a) and 3(b)) property (attach schedule) (attach schedule) (1) % % (2) % (3) % (4) Enter here and on page 1, Part I, line 7, column (A) Enter here and on page 1, Part I, line 7, column (B)

Form 990-T (2019)

Total dividends-received deductions included in column 8.

Schedule F - Interest, Ann	diacs, ixoyanac			ntrolled Or			10113 (30	e manacu	0,13)		
Name of controlled organization	2 Employer identification numb			ated income	,		· I illelanea ill ill		olling	6 Deductions directly connected with income in column 5	
(1)											
(2)											
(3)					<u> </u>						
(4)					<u> </u>		Щ.			<u> </u>	
Nonexempt Controlled Organiz		—				40.5	and of anti-man	0.45.44.45		Daduations disastly	
7 Taxable Income	8 Net unrelated in (loss) (see instruc	i i		9 Total of specified payments made		inclu	10 Part of column 9 that is included in the controlling organization's gross income			11 Deductions directly connected with income in column 10	
(1)											
(2)											
(3)											
(4)							columns 5 a	nd 10	Δ,	id columns 6 and 11	
Totals			 (c)(7),		▶ r) Orga	Ente Par	r here and on I, line 8, colu	page 1, min (A)	Ent	er here and on page 1, rt I, line 8, column (B)	
1. Description of income	2. Amount of	Income		3 Deduction of the 3 december 3 d	nnected			t-asides schedule)		5 Total deductions and set-asides (col 3 plus col 4)	
(1)											
(2)	ļ										
(3)			-								
(4)	Enter here and		_					<u> </u>		Enter here and on page 1	
Totals	Part I, line 9, c	olumn (A)					,			Part I, line 9, column (B)	
Schedule I-Exploited Exe	empt Activity In	come, Ot	her Th	an Advert	ising Ir	come	(see instru	ctions)			
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expe direc connecte producti unrela business i	tly ed with ion of ited	4 Net incor from unrela or business 2 minus co If a gain, c cols 5 thm	ted trade (column lumn 3) compute	from a	5 Gross income from activity that is not unrelated business income 6 Exp		able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)						·					
(2)				<u> </u>		ļ —				1	
(3)				-		· · ·			-		
(4)											
	Enter here and on page 1, Part I, line 10, col (A)	Enter here page 1, I line 10, c	Part I,						Enter here and on page 1, Part II, line 25		
Totals				<u>.</u>							
Schedule J-Advertising Ir	`	<u>-</u> _	`anaal	idated De							
Part I Income From Per	lodicals Report	ted on a C	-onsoi	idated Ba	515	1					
1 Name of periodical	2 Gross advertising income	3 Dır advertisin		4 Adver gain or (lo 2 minus o a gain, co cols 5 thr	ss) (col ol 3) If ompute		irculation ncome	6 Read		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)											
(2)											
(3)											
(4)											
Totals (carry to Part II, line (5))										Form 990-T (2019	

Page 5

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)		-				
(2)						
(3)						
(4)						
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)			,	Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5) ▶					1	

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
1)		%	
2)		%	
3)		%	
()		%	
otal. Enter here and on page 1. Part II. line 14			<u> </u>

Form **990-T** (2019)

ATTACHMENT	1		

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

ORDINARY INCOME (LOSS) FROM K-1S

-33,703.

INCOME (LOSS) FROM PARTNERSHIPS

-33,703.

FEDERAL ELECTIONS

DESCRIPTION: ELECTION TO WAIVE NOL CARRYBACK

FORM & LINE/INSTRUCTION REFERENCE: FORM 990T, PART II, LINE 31:

ELECTION TO WAIVE NET OPERATING LOSS CARRYBACK: PURSUANT TO IRC SECTION 172(B)(3), THE ORGANIZATION HEREBY ELECTS TO RELINQUISH THE ENTIRE CARRYBACK PERIOD WITH RESPECT TO THE NET OPERATING LOSS INCURRED FOR THE TAX YEAR ENDED 12/31/2019.

FEDERAL FORM 990-T, PAGE 1 DETAIL

CARRYOVER GENERATED IN TAX YEAR 2015	183,221.	
TOTAL NOL UTILIZED	NONE	
NOL CARRIED FORWARD TO 2020		183,221.
CARRYOVER GENERATED IN TAX YEAR 2016	280,573.	
TOTAL NOL UTILIZED	NONE	
NOL CARRIED FORWARD TO 2020		280,573.
CARRYOVER GENERATED IN TAX YEAR 2017	315,297.	
TOTAL NOL UTILIZED	NONE	
NOL CARRIED FORWARD TO 2020		315,297.
CARRYOVER GENERATED IN TAX YEAR 2018	152,925.	
TOTAL NOL UTILIZED	NONE	
NOL CARRIED FORWARD TO 2020		152,925.
CARRYOVER GENERATED IN TAX YEAR 2019		33,703.
TOTAL NOL CARRIED FORWARD TO 2020		965,719.