

**COMMITTEE ON NATURAL RESOURCES**  
**Disclosure Form**  
**As required by and provided for in House Rule XI, clause 2(g) and**  
**The Rules of the Committee on Natural Resources**

For Individuals: **N/A**

1. Name:
2. Address:
3. Email Address:
4. Phone Number:

\* \* \* \* \*

For Witnesses Representing Organizations:

1. Name: Rick Rogers
2. Name of Organization(s) You are Representing at the Hearing:  
Resource Development Council for Alaska (RDC)
3. Business Address:  
121 W. Fireweed Lane, Suite 250  
Anchorage, AK 99503
4. Business Email Address:  
[Information redacted for privacy]
5. Business Phone Number: 907-276-0700 [Information redacted for privacy]

Rick Rogers/Resource Development Council for Alaska  
Alaska's Sovereignty in Peril: The National Ocean Policy's Goal to Federalize Alaska

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

B.S. Forestry, University of Illinois, Urbana, 1979

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Certified Forester, Society of American Foresters  
Past Forest Industry Seat, Alaska Board of Forestry  
Past Director and Board President, RDC  
Past Director, Alaska Forest Association  
Past Director, Alaska Mineral and Energy Education Foundation (Now dba. Alaska Resource Education)

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

31 years experience in Natural Resource Management in Alaska including Tribal, Alaska Native Corporation, State, and University Trust Land Management as well as trade association experience.

d. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior (and/or other agencies invited) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

NA

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

NA

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

RDC is a membership funded 501C6 corporation. RDC is a statewide (Alaska) business association comprised of individuals and companies from Alaska's oil and gas, mining, forest products, tourism and fisheries industries. RDC's membership includes Alaska Native Corporation, local communities, organized labor, and industry support firms. RDC's purpose is to encourage a strong, diversified private sector in Alaska and expand the state's economic base through the responsible development of our natural resources.

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

Serve as the Executive Director of Resource Development Council representing the interests of the association as established by the Board of Directors representing membership that includes five resource industries, support firms, organized labor and communities.

h. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior (and /or other agencies invited) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

N/A

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

N/A

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

N/A

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)). **(Attached as pdf documents)**

Doing Business As

Number and street (or P O box if mail is not delivered to street address)  
121 WEST FIREWEED NO 250

Room/suite

City or town, state or country, and ZIP + 4  
ANCHORAGE, AK 99503

F Name and address of principal officer  
TOM MALONEY  
121 WEST FIREWEED SUITE 250  
ANCHORAGE, AK 99503

H(a) Is this a group return for affiliates?  Yes  No

H(b) Are all affiliates included?  Yes  No  
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

Website: ▶ WWW AKRDC ORG

Year of formation 1975

State of legal domicile AK

**Part I Summary**

1 Briefly describe the organization's mission or most significant activities  
TO ENCOURAGE A STRONG AND DIVERSIFIED RESOURCE DEVELOPMENT SECTOR IN ALASKA AND TO EXPAND THE STATE OF ALASKA'S ECONOMIC BASE

2 Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) . . . . . **3** 24

4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . . **4** 23

5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) . . . . . **5** 4

6 Total number of volunteers (estimate if necessary) . . . . . **6** 0

7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . **7a** 0

7b Net unrelated business taxable income from Form 990-T, line 34 . . . . . **7b** 0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h) . . . . .	337,557	751,294
9 Program service revenue (Part VIII, line 2g) . . . . .	623,539	195,837
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	7,594	4,856
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,092	-96,781
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	972,782	855,206
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .	0	0
14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	458,427	524,599
16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ <sup>0</sup>		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) . . . . .	521,329	406,112
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	979,756	930,711
19 Revenue less expenses Subtract line 18 from line 12 . . . . .	-6,974	-75,505
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16) . . . . .	621,941	548,026
21 Total liabilities (Part X, line 26) . . . . .	34,036	35,626
22 Net assets or fund balances Subtract line 21 from line 20 . . . . .	587,905	512,400

**Part II Signature Block**

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 officer) is based on all information of which preparer has any knowledge.

\*\*\*\*\*  
Signature of officer

2011-10-28  
Date

TOM MALONEY PRESIDENT  
Type or print name and title

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III  Yes  No

**1** Briefly describe the organization's mission  
TO ENCOURAGE A STRONG AND DIVERSIFIED RESOURCE DEVELOPMENT SECTOR IN ALASKA AND TO EXPAND THE STATE OF ALASKA'S ECONOMIC BASE

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No  
If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
If "Yes," describe these changes on Schedule O

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

**4a** (Code) (Expenses \$ ) including grants of \$ (Revenue \$ )  
PROMOTED AND BENEFITED RESOURCE SECTORS, INCLUDING MINING, OIL AND GAS, FISHERIES, TIMBER, AND TOURISM AND DEVELOPED GUIDELINES FOR RESPONSIBLE USE AND DEVELOPMENT OF RESOURCES














**4b** (Code) (Expenses \$ ) including grants of \$ (Revenue \$ )

**4c** (Code) (Expenses \$ ) including grants of \$ (Revenue \$ )

**4d** Other program services (Describe in Schedule O ) (Expenses \$ ) including grants of \$ (Revenue \$ )

**4e Total program service expenses** \$

**IV Checklist of Required Schedules**

	Yes	No
Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> . . . . .		No
Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	Yes	
Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> 		No
<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> . . . . .		
Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> 	Yes	
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? <i>If "Yes," complete Schedule D, Part I</i> 		No
Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 		No
Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 		No
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? <i>If "Yes," complete Schedule D, Part IV</i> 		No
Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 		No
If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	Yes	
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? <i>If "Yes," complete Schedule D, Part VII.</i> 		No
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? <i>If "Yes," complete Schedule D, Part VIII.</i> 		No
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? <i>If "Yes," complete Schedule D, Part IX.</i> 		No
Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	Yes	
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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 		No
Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> 		No
Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> 		No
Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		No
Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i> . . . . .		No
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Parts II and IV</i> . . . . .		No
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Parts III and IV</i> . . . . .		No
Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		No
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> . . . . .	Yes	
Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> . . . . .		No
Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> . . . . .		No
If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

**IV Checklist of Required Schedules (continued)**

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? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>	<b>21</b>		No
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? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>	<b>22</b>		No
Did the organization answer "Yes" to Part VII, Section A, questions 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>	<b>23</b>	Yes	
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, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25 . . . . .</i>	<b>24a</b>		No
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<b>24b</b>		
Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>		
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<b>24d</b>		
<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . . . .</i>	<b>25a</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? <i>If "Yes," complete Schedule L, Part I . . . . .</i>	<b>25b</b>		
Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II . . . . .</i>	<b>26</b>		No
Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III . . . . .</i>	<b>27</b>		No
Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<b>28a</b>		No
A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<b>28b</b>	Yes	
An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<b>28c</b>		No
Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>	<b>29</b>		No
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>	<b>30</b>		No
Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>	<b>31</b>		No
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>	<b>32</b>		No
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>	<b>33</b>		No
Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .</i>	<b>34</b>		No
Is any related organization a controlled entity within the meaning of section 512(b)(13)? . . . . .	<b>35</b>		No
Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>	<b>36</b>		
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? <i>If "Yes," complete Schedule R, Part VI . . . . .</i>	<b>37</b>		No
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b>	Yes	

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b>	Yes	
Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .	<b>2a</b>		4
If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	Yes	
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>3a</b>		No
If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	<b>3b</b>		
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)? . . . . .	<b>4a</b>		No
If "Yes," enter the name of the foreign country <input type="text"/>			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	<b>5a</b>		No
Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		No
If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . .	<b>5c</b>		
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? . . . . .	<b>6a</b>	Yes	
If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>6b</b>	Yes	
<b>Organizations that may receive deductible contributions under section 170(c).</b>			
Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	<b>7a</b>		
If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	<b>7b</b>		
Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	<b>7c</b>		
If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	<b>7d</b>		
Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<b>7e</b>		No
Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<b>7f</b>		No
If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	<b>7g</b>		
If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	<b>7h</b>		
<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .			
	<b>8</b>		
<b>Sponsoring organizations maintaining donor advised funds.</b>			
Did the organization make any taxable distributions under section 4966? . . . . .	<b>9a</b>		
Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	<b>9b</b>		
<b>Section 501(c)(7) organizations.</b> Enter			
Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>		
Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>Section 501(c)(12) organizations.</b> Enter			
Gross income from members or shareholders . . . . .	<b>11a</b>		
Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	<b>11b</b>		
<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?			
If "Yes," enter the amount of tax-exempt interest received or accrued during the year <input type="text"/>	<b>12b</b>		
<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
Is the organization licensed to issue qualified health plans in more than one state?	<b>13a</b>		
<b>Note.</b> See the instructions for additional information the organization must report on Schedule O			



**Section A. Governing Body and Management**

		Yes	No
Enter the number of voting members of the governing body at the end of the tax year . . . . .	<b>1a</b>	24	
Enter the number of voting members included in line 1a, above, who are independent . . . . .	<b>1b</b>	23	
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .	<b>2</b>		No
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .	<b>3</b>		No
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	<b>4</b>		No
Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>		No
Does the organization have members or stockholders? . . . . .	<b>6</b>		No
Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>		No
Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	<b>7b</b>		No
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
The governing body? . . . . .	<b>8a</b>	Yes	
Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>		No
Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	<b>9</b>		No

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
Does the organization have local chapters, branches, or affiliates? . . . . .	<b>10a</b>		No
If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .	<b>10b</b>		
Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<b>11a</b>		No
Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .			
Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b>		No
Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>		
Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<b>12c</b>		
Does the organization have a written whistleblower policy? . . . . .	<b>13</b>		No
Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b>		No
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
The organization's CEO, Executive Director, or top management official . . . . .	<b>15a</b>	Yes	
Other officers or key employees of the organization . . . . .	<b>15b</b>		No
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions ) . . . . .			
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>		No
If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	<b>16b</b>		

**Section C. Disclosure**

List the States with which a copy of this Form 990 is required to be filed  \_\_\_\_\_

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

Own website  Another's website  Upon request

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table

State the name, physical address, and telephone number of the person who possesses the books and records of the organization  \_\_\_\_\_

RICK ROGERS



**VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Additional Data Table										
<b>Sub-Total</b>										
<b>Total from continuation sheets to Part VII, Section A</b>										
<b>Total (add lines 1b and 1c)</b>							229,500	0	64,812	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **2**

	Yes	No
Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

**Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

<b>1a</b> Federated campaigns . . . . .	<b>1a</b>				
<b>b</b> Membership dues . . . . .	<b>1b</b>	288,594			
<b>c</b> Fundraising events . . . . .	<b>1c</b>	437,700			
<b>d</b> Related organizations . . . . .	<b>1d</b>				
<b>e</b> Government grants (contributions)	<b>1e</b>				
<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	25,000			
<b>g</b> Noncash contributions included in lines 1a-1f \$					
<b>h Total.</b> Add lines 1a-1f . . . . .			751,294		

	<b>Business Code</b>				
<b>2a</b> SPECIAL PROJECTS	900099	128,083	128,083		
<b>b</b> BREAKFAST MEETINGS	900099	34,254	34,254		
<b>c</b> RESOURCE REVIEW	900099	33,500	33,500		
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> All other program service revenue					
<b>g Total.</b> Add lines 2a-2f . . . . .			195,837		

<b>3</b> Investment income (including dividends, interest and other similar amounts) . . . . .		4,856			4,856
<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .					
<b>5</b> Royalties . . . . .					

	(i) Real	(ii) Personal			
<b>6a</b> Gross Rents					
<b>b</b> Less rental expenses					
<b>c</b> Rental income or (loss)					
<b>d</b> Net rental income or (loss) . . . . .					

	(i) Securities	(ii) Other			
<b>7a</b> Gross amount from sales of assets other than inventory					
<b>b</b> Less cost or other basis and sales expenses					
<b>c</b> Gain or (loss)					
<b>d</b> Net gain or (loss) . . . . .					

<b>8a</b> Gross income from fundraising events (not including \$ <u>437,700</u> of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b>	70,636			
<b>b</b> Less direct expenses . . . . .	<b>b</b>	179,273			
<b>c</b> Net income or (loss) from fundraising events . . . . .			-108,637		-108,637

<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>	12,576			
<b>b</b> Less direct expenses . . . . .	<b>b</b>	720			
<b>c</b> Net income or (loss) from gaming activities . . . . .			11,856	11,856	

<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>				
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>				
<b>c</b> Net income or (loss) from sales of inventory . . . . .					

Miscellaneous Revenue	<b>Business Code</b>				
<b>11a</b>					

**IX Statement of Functional Expenses**

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.**

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

Do not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
Grants and other assistance to individuals in the U S See Part IV, line 22				
Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
Benefits paid to or for members				
Compensation of current officers, directors, trustees, and key employees . . . . .	294,312			
Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
Other salaries and wages	143,500			
Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	8,355			
Other employee benefits . . . . .	48,489			
Payroll taxes . . . . .	29,943			
Fees for services (non-employees)				
Management . . . . .				
Legal . . . . .				
Accounting . . . . .	19,625			
Lobbying . . . . .	38,937			
Professional fundraising services See Part IV, line 17 . . . . .				
Investment management fees . . . . .				
Other . . . . .				
Advertising and promotion . . . . .				
Office expenses . . . . .	45,120			
Information technology . . . . .				
Royalties . . . . .				
Occupancy . . . . .	36,099			
Travel . . . . .	11,617			
Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
Conferences, conventions, and meetings . . . . .	22,425			
Interest . . . . .				
Payments to affiliates . . . . .				
Depreciation, depletion, and amortization . . . . .	6,495			
Insurance . . . . .	5,334			
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
<b>SPECIAL PROJECT EXPENSE</b>	136,659			
<b>RESOURCE REVIEW</b>	41,054			
<b>ALASKA ACT</b>	25,914			
<b>MEETINGS</b>	8,901			
<b>DUES &amp; SUBSCRIPTIONS</b>	3,060			
All other expenses	4,872			
<b>Total functional expenses.</b> Add lines 1 through 24f	930,711			

**Joint costs.** Check here  if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

**Part X Balance Sheet**

		(A)		(B)
		Beginning of year		End of year
<b>1</b>	Cash—non-interest-bearing . . . . .	1,320	<b>1</b>	43,424
<b>2</b>	Savings and temporary cash investments . . . . .	563,133	<b>2</b>	440,685
<b>3</b>	Pledges and grants receivable, net . . . . .		<b>3</b>	
<b>4</b>	Accounts receivable, net . . . . .	33,875	<b>4</b>	41,633
<b>5</b>	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
<b>6</b>	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Schedule L . . . . .		<b>6</b>	
<b>7</b>	Notes and loans receivable, net . . . . .		<b>7</b>	
<b>8</b>	Inventories for sale or use . . . . .		<b>8</b>	
<b>9</b>	Prepaid expenses and deferred charges . . . . .		<b>9</b>	4,334
<b>10a</b>	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	98,702		
	<b>10a</b>			
<b>b</b>	Less accumulated depreciation . . . . .	80,752	23,613	17,950
	<b>10b</b>		<b>10c</b>	
<b>11</b>	Investments—publicly traded securities . . . . .		<b>11</b>	
<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
<b>14</b>	Intangible assets . . . . .		<b>14</b>	
<b>15</b>	Other assets. See Part IV, line 11 . . . . .		<b>15</b>	
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	621,941	<b>16</b>	548,026
<b>17</b>	Accounts payable and accrued expenses . . . . .	34,036	<b>17</b>	447
<b>18</b>	Grants payable . . . . .		<b>18</b>	
<b>19</b>	Deferred revenue . . . . .		<b>19</b>	
<b>20</b>	Tax-exempt bond liabilities . . . . .		<b>20</b>	
<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
<b>22</b>	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
<b>25</b>	Other liabilities. Complete Part X of Schedule D . . . . .	0	<b>25</b>	35,179
<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .	34,036	<b>26</b>	35,626
<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
<b>27</b>	Unrestricted net assets . . . . .	587,905	<b>27</b>	512,400
<b>28</b>	Temporarily restricted net assets . . . . .		<b>28</b>	
<b>29</b>	Permanently restricted net assets . . . . .		<b>29</b>	
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
<b>30</b>	Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
<b>32</b>	Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b>	<b>Total net assets or fund balances</b> . . . . .	587,905	<b>33</b>	512,400
<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .	621,941	<b>34</b>	548,026

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	855,206
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	930,711
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	-75,505
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	587,905
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	0
<b>6</b>	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	512,400

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant?		No
<b>2b</b> Were the organization's financial statements audited by an independent accountant?		No
<b>c</b> If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
<b>d</b> If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
G BAKER DIRECTOR	1 00	X						0	0	0
E BENTON DIRECTOR	1 00	X						0	0	0
BERTO EXECUTIVE COMMITTEE	2 00	X						0	0	0
TY BIELAWSKI EXECUTIVE COMMITTEE	2 00	X						0	0	0
N BINGHAM DIRECTOR	1 00	X						0	0	0
BRITTON DIRECTOR	1 00	X						0	0	0
E CAREY DIRECTOR	1 00	X						0	0	0
RICK CARTER EXECUTIVE COMMITTEE	2 00	X						0	0	0
E CHAPUT DIRECTOR	1 00	X						0	0	0
O COCHRANE VICE PRESIDENT	5 00	X		X				0	0	0
E CONNELLY DIRECTOR	1 00	X						0	0	0
COX DIRECTOR	1 00	X						0	0	0
ILYN CROCKETT EXECUTIVE COMMITTEE	2 00	X						0	0	0
E DENTON SECRETARY	2 00	X		X				0	0	0
N DOLYNNY DIRECTOR	1 00	X						0	0	0
A EASLEY DIRECTOR	1 00	X						0	0	0
EDE DIRECTOR	1 00	X						0	0	0
DLEY EVEANS DIRECTOR	1 00	X						0	0	0
EVERHART DIRECTOR	1 00	X						0	0	0
RRI FEIGE DIRECTOR	1 00	X						0	0	0
FJELSTAD CASURER	2 00	X		X				0	0	0
FOLEY EXECUTIVE COMMITTEE	2 00	X						0	0	0
N FOO EXECUTIVE COMMITTEE	2 00	X						0	0	0
OL FRASER DIRECTOR	1 00	X						0	0	0



**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GRAHAM DIRECTOR	1 00	X						0	0	0
CK GREENE DIRECTOR	1 00	X						0	0	0
TT HABBERSTAD DIRECTOR	1 00	X						0	0	0
L HANNEMAN DIRECTOR	1 00	X						0	0	0
K HARRIS DIRECTOR	1 00	X						0	0	0
L HENRY DIRECTOR	1 00	X						0	0	0
VE HITES DIRECTOR	1 00	X						0	0	0
EN HORST PRESIDENT	5 00	X		X				0	0	0
ESA IMM DIRECTOR	1 00	X						0	0	0
JEFFRESS DIRECTOR	1 00	X						0	0	0
E JUNGREIS DIRECTOR	1 00	X						0	0	0
NK KELTY DIRECTOR	1 00	X						0	0	0
DY KING EXECUTIVE COMMITTEE	2 00	X						0	0	0
KNUDSON DIRECTOR	1 00	X						0	0	0
MAS KRZEWSKI DIRECTOR	1 00	X						0	0	0
N LAU DIRECTOR	1 00	X						0	0	0
A LEARY DIRECTOR	1 00	X						0	0	0
DY LINDSKOOG PRESIDENT	8 00	X						0	0	0
IFER LOTEN DIRECTOR	1 00	X						0	0	0
LOVAS EXECUTIVE COMMITTEE	2 00	X						0	0	0
Y MACK DIRECTOR	1 00	X						0	0	0
N MACKINNON DIRECTOR	1 00	X						0	0	0
PHANIE MADSEN EXECUTIVE COMMITTEE	2 00	X						0	0	0
MALONEY PRESIDENT	5 00	X		X				0	0	0
Y MCDOWELL DIRECTOR	1 00	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MCPHETERS DIRECTOR	1 00	X						0	0	0
MERY DIRECTOR	1 00	X						0	0	0
RISE MICHELS DIRECTOR	1 00	X						0	0	0
CE MILLER EXECUTIVE COMMITTEE	2 00	X						0	0	0
S NEIDIG DIRECTOR	1 00	X						0	0	0
PARKER DIRECTOR	1 00	X						0	0	0
Y PATRICK DIRECTOR	1 00	X						0	0	0
E PITTMAN EXECUTIVE COMMITTEE	2 00	X						0	0	0
RLIE POWERS DIRECTOR	1 00	X						0	0	0
PH SAMUELS DIRECTOR	1 00	X						0	0	0
Y SATTLER DIRECTOR	1 00	X						0	0	0
AN SCHUTT EXECUTIVE COMMITTEE	2 00	X						0	0	0
NY SEYBERT DIRECTOR	1 00	X						0	0	0
NA SHAW EXECUTIVE COMMITTEE	2 00	X						0	0	0
NETH SHEFFIELD DIRECTOR	1 00	X						0	0	0
N SHIVELY EXECUTIVE COMMITTEE	2 00	X						0	0	0
H SILVER DIRECTOR	1 00	X						0	0	0
SMITH EXECUTIVE COMMITTEE	2 00	X						0	0	0
INE ST JOHN EXECUTIVE COMMITTEE	2 00	X						0	0	0
N STURGEON DIRECTOR	1 00	X						0	0	0
SULLIVAN DIRECTOR	1 00	X						0	0	0
HAEL TERMINEL DIRECTOR	1 00	X						0	0	0
TT THORSON EXECUTIVE COMMITTEE	2 00	X						0	0	0
TOOHEY EXECUTIVE COMMITTEE	2 00	X						0	0	0
TRIGG DIRECTOR	1 00	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN ZAGER DIRECTOR	1 00	X					0	0	0	
JASON BRUNE EXECUTIVE DIRECTOR	40 00			X			120,750	0	38,215	
CARL PORTMAN DEPUTY DIRECTOR	40 00			X			108,750	0	26,597	

**SCHEDULE C**

Form 990 or 990-EZ

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.**  
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

**2010**

**Open to Public Inspection**

Organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

Section 527 organizations Complete Part I-A only

Organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

Organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization

RESOURCE DEVELOPMENT COUNCIL OF ALASKA

Employer identification number

92-0048833

**I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Political expenditures ▶ \$ \_\_\_\_\_

Volunteer hours \_\_\_\_\_

**I-B Complete if the organization is exempt under section 501(c)(3).**

Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_

Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No

Was a correction made?  Yes  No

If "Yes," describe in Part IV

**I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).**

Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_

Did the filing organization file Form 1120-POL for this year?  Yes  No

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check  if the filing organization belongs to an affiliated group  
**B** Check  if the filing organization checked box A and "limited control" provisions apply

**Limits on Lobbying Expenditures**  
 (The term "expenditures" means amounts paid or incurred.)

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount Enter the amount from the following table in both columns

<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a If zero or less, enter -0-
- i** Subtract line 1f from line 1c If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes  No

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
<b>Calendar year (or fiscal year beginning in)</b>	<b>(a) 2007</b>	<b>(b) 2008</b>	<b>(c) 2009</b>	<b>(d) 2010</b>	<b>(e) Total</b>
<b>2a</b> Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots non-taxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		Amount
	Yes	No	
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b> Other activities? If "Yes," describe in Part IV			
<b>j</b> Total lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes		No	
	1	2	3	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?				No
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?				No
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year?				No

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

	Amount	
	1	2
<b>1</b> Dues, assessments and similar amounts from members		804,042
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year		57,050
<b>b</b> Carryover from last year		
<b>c</b> Total		57,050
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		127,843
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)		-70,793

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation

# Supplemental Financial Statements

# 2010

**Open to Public Inspection**

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**  
▶ **Attach to Form 990. ▶ See separate instructions.**

**Name of the organization**  
RESOURCE DEVELOPMENT COUNCIL OF ALASKA

**Employer identification number**  
92-0048833

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate contributions to (during year)		
Aggregate grants from (during year)		
Aggregate value at end of year		

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure)  Preservation of an historically important land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
Total number of conservation easements	2a
Total acreage restricted by conservation easements	2b
Number of conservation easements on a certified historic structure included in (a)	2c
Number of conservation easements included in (c) acquired after 8/17/06	2d

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_

Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ \_\_\_\_\_

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  Yes  No

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- Public exhibition, Scholarly research, Preservation for future generations, Loan or exchange programs, Other

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

If "Yes," explain the arrangement in Part XIV and complete the following table

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance

Did the organization include an amount on Form 990, Part X, line 21? Yes No

If "Yes," explain the arrangement in Part XIV

V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current Year, (b) Prior Year, (c) Two Years Back, (d) Three Years Back, (e) Four Years Back. Rows: Beginning of year balance, Contributions, Investment earnings or losses, Grants or scholarships, Other expenditures for facilities and programs, Administrative expenses, End of year balance

Provide the estimated percentage of the year end balance held as

- Board designated or quasi-endowment, Permanent endowment, Term endowment

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

Table with 3 columns: Description, Yes, No. Rows: (i) unrelated organizations, (ii) related organizations, 3b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Describe in Part XIV the intended uses of the organization's endowment funds

VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 4 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: Land, Buildings, Leasehold improvements, Equipment, Other

Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) 17,950





**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	855,206
Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	930,711
Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	-75,505
Net unrealized gains (losses) on investments	<b>4</b>	
Donated services and use of facilities	<b>5</b>	
Investment expenses	<b>6</b>	
Prior period adjustments	<b>7</b>	
Other (Describe in Part XIV)	<b>8</b>	
Total adjustments (net) Add lines 4 - 8	<b>9</b>	0
Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	-75,505

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>		1,035,199
Amounts included on line 1 but not on Form 990, Part VIII, line 12			
Net unrealized gains on investments . . . . .	<b>2a</b>		
Donated services and use of facilities . . . . .	<b>2b</b>		
Recoveries of prior year grants . . . . .	<b>2c</b>		
Other (Describe in Part XIV) . . . . .	<b>2d</b>	179,993	
Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>		179,993
Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>		855,206
Amounts included on Form 990, Part VIII, line 12, but not on line 1			
Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
Other (Describe in Part XIV) . . . . .	<b>4b</b>		
Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>		0
Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>		855,206

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Total expenses and losses per audited financial statements . . . . .	<b>1</b>		1,110,704
Amounts included on line 1 but not on Form 990, Part IX, line 25			
Donated services and use of facilities . . . . .	<b>2a</b>		
Prior year adjustments . . . . .	<b>2b</b>		
Other losses . . . . .	<b>2c</b>		
Other (Describe in Part XIV) . . . . .	<b>2d</b>	179,993	
Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>		179,993
Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>		930,711
Amounts included on Form 990, Part IX, line 25, but not on line 1:			
Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
Other (Describe in Part XIV) . . . . .	<b>4b</b>		
Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>		0
Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>		930,711

**Part XIV 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, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
XII, LINE 2D - OTHER ADJUSTMENTS		GAMING EXPENSES NETTED AGAINST REVENUE 720 FUNDRAISING EXPENSES NETTED AGAINST REVENUE 179,273
XIII, LINE 2D - OTHER ADJUSTMENTS		GAMING EXPENSES NETTED AGAINST REVENUE 720 FUNDRAISING EXPENSES NETTED AGAINST REVENUE 179,273

## Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
 Attach to Form 990 or Form 990-EZ. See separate instructions.

Department of the Treasury  
 Internal Revenue Service

Name of the organization  
 RESOURCE DEVELOPMENT COUNCIL OF ALASKA

Employer identification number  
 92-0048833

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

<input type="checkbox"/> Mail solicitations	<b>e</b> <input type="checkbox"/> Solicitation of non-government grants
<input type="checkbox"/> Internet and e-mail solicitations	<b>f</b> <input type="checkbox"/> Solicitation of government grants
<input type="checkbox"/> Phone solicitations	<b>g</b> <input type="checkbox"/> Special fundraising events
<input type="checkbox"/> In-person solicitations	

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

**II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
	<u>ANNUAL MEETING</u> (event type)	<u>CONFERENCE</u> (event type)	(total number)	(Add col (a) through col (c))
<b>1</b> Gross receipts . . . . .	146,950	361,386		508,336
<b>2</b> Less Charitable contributions . . . . .	142,000	295,700		437,700
<b>3</b> Gross income (line 1 minus line 2) . . . . .	4,950	65,686		70,636
<b>4</b> Cash prizes . . . . .				
<b>5</b> Non-cash prizes . . . . .				
<b>6</b> Rent/facility costs . . . . .				
<b>7</b> Food and beverages . . . . .	25,675	109,898		135,573
<b>8</b> Entertainment . . . . .				
<b>9</b> Other direct expenses . . . . .	18,134	25,566		43,700
<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				179,273
<b>11</b> Net income summary Combine lines 3 and 10 in column (d) . . . . . ▶				-108,637

**III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
				(Add col (a) through col (c))
<b>1</b> Gross revenue . . . . .				
<b>2</b> Cash prizes . . . . .				
<b>3</b> Non-cash prizes . . . . .				
<b>4</b> Rent/facility costs . . . . .				
<b>5</b> Other direct expenses . . . . .				
<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
<b>7</b> Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶				
<b>8</b> Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶				

Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_  
 Is the organization licensed to operate gaming activities in each of these states? . . . . .  Yes  No  
 If "No," Explain \_\_\_\_\_

Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No  
 If "Yes," Explain \_\_\_\_\_

- 11** Does the organization operate gaming activities with nonmembers? . . . . .  Yes  No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .  Yes  No
- 13** Indicate the percentage of gaming activity operated in
 

<b>a</b> The organization's facility . . . . .	<b>13a</b>
<b>b</b> An outside facility . . . . .	<b>13b</b>
- 14** Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . .  Yes  No
- b** If "Yes," enter the amount of gaming revenue received by the organization \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party \$ \_\_\_\_\_
- c** If "Yes," enter name and address

Name

Address

**16** Gaming manager information

Name

Gaming manager compensation \$ \_\_\_\_\_

Description of services provided

Director/officer       Employee       Independent contractor

- 17** Mandatory distributions
  - a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . .  Yes  No
  - b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ \_\_\_\_\_

**Part IV** Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	Return Reference	Explanation

**Schedule J**  
(Form 990)

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2010**

**Open to Public Inspection**

Name of the organization  
RESOURCE DEVELOPMENT COUNCIL OF ALASKA

Employer identification number  
92-0048833

**Part I Questions Regarding Compensation**

Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain.

Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                     | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input type="checkbox"/> Compensation survey or study                               |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

Receive a severance payment or change-of-control payment from the organization or a related organization?

Participate in, or receive payment from, a supplemental nonqualified retirement plan?

Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.**

For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

The organization?

Any related organization?

If "Yes," to line 5a or 5b, describe in Part III.

For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

The organization?

Any related organization?

If "Yes," to line 6a or 6b, describe in Part III.

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III.

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		
<b>5b</b>		
<b>6a</b>		
<b>6b</b>		
<b>7</b>		
<b>8</b>		
<b>9</b>		

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1) JASON BRUNE	120,750	0	0	14,100	24,115	158,965	0
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
13)							
14)							
15)							
16)							

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) DEANTHA CROCKETT	DAUGHTER OF BOARD MEMBER	66,750	PAID EMPLOYEE		No

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

**2010**

**Open to Public Inspection**

**Name of the organization**

RESOURCE DEVELOPMENT COUNCIL OF ALASKA

Employer identification number

92-0048833

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 8B		RESOURCE DEVELOPMENT COUNCIL DOES NOT HAVE COMMITTEES THAT HAVE AUTHORITY TO ACT ON BEHALF OF THE BOARD/EXECUTIVE COMMITTEE

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE FORM 990 IS PREPARED BY AN ACCOUNTING FIRM, AND IS THEN REVIEWED BY THE RESOURCE DEVELOPMENT COUNCIL CONTRACT BOOKKEEPER, EXECUTIVE DIRECTOR AND PRESIDENT

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	THE PRESIDENT, IN CONSULTATION WITH THE EXECUTIVE COMMITTEE (DURING AN EXECUTIVE SESSION), EVALUATES THE EXECUTIVE DIRECTOR'S PERFORMANCE, PRESENTS COMPARABLES DERIVED FROM OTHER LIKE ORGANIZATIONS' FORM 990S AND OTHER BOARDS FOR WHICH THEY SERVE, AND ENSURING DISCUSSION DEVELOPS THE COMPENSATION OF THE EXECUTIVE DIRECTOR

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	A COPY OF RESOURCE DEVELOPMENT COUNCIL'S FORM 990 IS AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THESE DOCUMENTS ARE AVAILABLE UPON REQUEST

(s) shown on return  
RESOURCE DEVELOPMENT COUNCIL OF ALASKA

Business or activity to which this form relates  
FORM 990 PAGE 10

Identifying number  
92-0048833

**Part I Election To Expense Certain Property Under Section 179**

**Note:** If you have any listed property, complete Part V before you complete Part I.

Maximum amount See the instructions for a higher limit for certain businesses . . . . .	<b>1</b>	500,000
Total cost of section 179 property placed in service (see instructions) . . . . .	<b>2</b>	
Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	<b>3</b>	2,000,000
Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- . . . . .	<b>4</b>	
Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . .	<b>5</b>	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
Listed property Enter the amount from line 29 . . . . .	<b>7</b>	
Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . . . .	<b>8</b>	
Alternative deduction Enter the <b>smaller</b> of line 5 or line 8 . . . . .	<b>9</b>	
Carryover of disallowed deduction from line 13 of your 2009 Form 4562 . . . . .	<b>10</b>	
Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . .	<b>11</b>	
Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . . . . .	<b>12</b>	
Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 . . . . .	<b>13</b>	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)**

Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . . . . .	<b>14</b>	
Property subject to section 168(f)(1) election . . . . .	<b>15</b>	
Other depreciation (including ACRS) . . . . .	<b>16</b>	6,395

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

MACRS deductions for assets placed in service in tax years beginning before 2010 . . . . .	<b>17</b>	
If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . . .		<input type="checkbox"/>

**Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
1-year property						
2-year property						
3-year property						
5-year property						
7-year property						
10-year property						
15-year property			25 yrs		S/L	
Residential rental property			27.5 yrs	MM	S/L	
Nonresidential real property			27.5 yrs	MM	S/L	
Nonresidential real property			39 yrs	MM	S/L	
Nonresidential real property				MM	S/L	

**Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System**

Class life					S/L	
2-year			12 yrs		S/L	
10-year			40 yrs	MM	S/L	

**Part IV Summary (see instructions)**

Listed property Enter amount from line 28 . . . . .	<b>21</b>	
Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions . . . . .	<b>22</b>	6,395



**V Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

Do you have evidence to support the business/investment use claimed?  Yes  No **24b** If "Yes," is the evidence written?  Yes  No

Table with 9 columns: (a) Description of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation/deduction, (i) Elected section 179 cost.

Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) **25**

Property used more than 50% in a qualified business use. Table with 9 columns for percentage and other details.

Property used 50% or less in a qualified business use. Table with 9 columns, including S/L - entries.

Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28**

Add amounts in column (i), line 26. Enter here and on line 7, page 1 **29**

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. Provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns (a) through (f) for Vehicle 1 through Vehicle 6. Rows include: Total business/investment miles, Total commuting miles, Total other personal miles, Total miles driven, and availability for personal use.

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table for Section C with columns Yes/No. Questions include: written policy statement, personal use prohibition, information retention, and qualified automobile demonstration use.

**VI Amortization**

Table for Section VI with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

Amortization of costs that begins during your 2010 tax year (see instructions). Total. Add amounts in column (f). See the instructions for where to report **43** 100 **44** 100

Business change Change Return Terminated Extended return Information pending	<b>Use IRS label or print or type. See Specific Instructions.</b>	Doing Business As  Number and street (or P.O. box if mail is not delivered to street address) Room/suite 121 WEST FIREWEED No 250  City or town, state or country, and ZIP + 4 ANCHORAGE, AK 99503	92-0048833 <b>E Telephone number</b> (907) 276-0700 <b>G Gross receipts \$</b> 972,782
<b>F Name and address of principal officer</b> JASON BRUNE 121 WEST FIREWEED SUITE 250 ANCHORAGE, AK 99503		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)  <b>H(c) Group exemption number</b> ▶	
Tax-exempt status <input checked="" type="checkbox"/> 501(c)(6) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>Website:</b> ▶ www.akrdc.org			
Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L Year of formation</b> 1975	<b>M State of legal domicile</b> AK

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities  
 TO ENCOURAGE A STRONG AND DIVERSIFIED RESOURCE DEVELOPMENT SECTOR IN ALASKA AND TO EXPAND THE STATE OF ALASKA'S ECONOMIC BASE

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets

<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b> <u>22</u>
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b> <u>21</u>
<b>5</b> Total number of employees (Part V, line 2a) . . . . .	<b>5</b> <u>4</u>
<b>6</b> Total number of volunteers (estimate if necessary) . . . . .	<b>6</b> <u>0</u>
<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b> <u>0</u>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b> <u>0</u>

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	659,028	337,557
<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	172,269	623,539
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	16,841	7,594
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,514	4,092
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	850,652	972,782
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .		0
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	410,076	458,427
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .		0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <sup>0</sup>		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) . . . . .	496,141	521,329
<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	906,217	979,756
<b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .	-55,565	-6,974
	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16) . . . . .	600,932	621,941
<b>21</b> Total liabilities (Part X, line 26) . . . . .	6,053	34,036
<b>22</b> Net assets or fund balances Subtract line 21 from line 20 . . . . .	594,879	587,905

**Part II Signature Block**

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 officer) is based on all information of which preparer has any knowledge.

***** Signature of officer	2010-11-12 Date
JASON BRUNE Executive Director Type or print name and title	

**Part III Statement of Program Service Accomplishments**

**1** Briefly describe the organization's mission

TO ENCOURAGE A STRONG AND DIVERSIFIED RESOURCE DEVELOPMENT SECTOR IN ALASKA AND TO EXPAND THE STATE OF ALASKA'S ECONOMIC BASE

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O  Yes  No

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O  Yes  No

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

<b>4a</b>	(Code ) (Expenses \$ ) (Revenue \$ )	including grants of \$ ) (Revenue \$ )	(Revenue \$ )
	PROMOTED AND BENEFITTED RESOURCE SECTORS, INCLUDING MINING, OIL AND GAS, FISHERIES, TIMBER, AND TOURISM AND DEVELOPED GUIDELINES FOR RESPONSIBLE USE AND DEVELOPMENT OF RESOURCES		

<b>4b</b>	(Code ) (Expenses \$ ) (Revenue \$ )	including grants of \$ ) (Revenue \$ )	(Revenue \$ )

<b>4c</b>	(Code ) (Expenses \$ ) (Revenue \$ )	including grants of \$ ) (Revenue \$ )	(Revenue \$ )

<b>4d</b>	Other program services (Describe in Schedule O )	including grants of \$ ) (Revenue \$ )	(Revenue \$ )
	(Expenses \$ )		

<b>4e</b>	Total program service expenses \$
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**IV Checklist of Required Schedules**

		Yes	No				
<b>1</b>	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .		No				
<b>2</b>	Is the organization required to complete Schedule B, Schedule of Contributors? <input checked="" type="checkbox"/> . . . . .	Yes					
<b>3</b>	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 <input checked="" type="checkbox"/> . . . . .		No				
<b>4</b>	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .						
<b>5</b>	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III <input checked="" type="checkbox"/> . . . . .	Yes					
<b>6</b>	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 <input checked="" type="checkbox"/> . . . . .		No				
<b>7</b>	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 <input checked="" type="checkbox"/> . . . . .		No				
<b>8</b>	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III <input checked="" type="checkbox"/> . . . . .		No				
<b>9</b>	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 <input checked="" type="checkbox"/> . . . . .		No				
<b>10</b>	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V <input checked="" type="checkbox"/> . . . . .		No				
<b>11</b>	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. . . . . <input checked="" type="checkbox"/>	Yes					
	• 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.						
<b>12</b>	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII <input checked="" type="checkbox"/>		No				
	Was the organization included in consolidated, independent audited financial statements for the tax year? <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr><tr><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	Yes	No	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Yes	No						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<b>12A</b>	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional . . . . . <input checked="" type="checkbox"/>		No				
<b>13</b>	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No				
<b>14a</b>	Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		No				
<b>14b</b>	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I . . . . .		No				
<b>15</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II . . . . .		No				
<b>16</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III . . . . .		No				
<b>17</b>	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		No				
<b>18</b>	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .		No				
<b>19</b>	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .		No				
<b>20</b>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .		No				

**IV Checklist of Required Schedules (continued)**

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? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>	<b>21</b>		No
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? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>	<b>22</b>		No
Did the organization answer "Yes" to Part VII, Section A, questions 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>	<b>23</b>		No
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, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25 . . . . .</i>	<b>24a</b>		No
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<b>24b</b>		
Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>		
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<b>24d</b>		
<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . . . .</i>	<b>25a</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? <i>If "Yes," complete Schedule L, Part I . . . . .</i>	<b>25b</b>		
Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II . . . . .</i>	<b>26</b>		No
Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III . . . . .</i>	<b>27</b>		No
Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<b>28a</b>		No
A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<b>28b</b>	Yes	
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 owner? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<b>28c</b>		No
Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>	<b>29</b>		No
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>	<b>30</b>		No
Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>	<b>31</b>		No
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>	<b>32</b>		No
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>	<b>33</b>		No
Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .</i>	<b>34</b>		No
Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>	<b>35</b>		No
<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>	<b>36</b>		
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? <i>If "Yes," complete Schedule R, Part VI . . . . .</i>	<b>37</b>		No
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b>	Yes	



below, and for a "No" response to lines 6a, 6b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

**Section A. Governing Body and Management**

	Yes	No
Enter the number of voting members of the governing body . . . . .		
Enter the number of voting members that are independent . . . . .		
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .		No
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .		No
Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .		No
Does the organization have members or stockholders? . . . . .		No
Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .		No
Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .		No
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
The governing body? . . . . .	Yes	
Each committee with authority to act on behalf of the governing body? . . . . .		No
Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .		No

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
Does the organization have local chapters, branches, or affiliates? . . . . .		No
If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .		
Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		No
Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .		
Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .		No
Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .		
Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .		
Does the organization have a written whistleblower policy? . . . . .		No
Does the organization have a written document retention and destruction policy? . . . . .		No
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
The organization's CEO, Executive Director, or top management official . . . . .	Yes	
Other officers or key employees of the organization . . . . .		No
If "Yes" to line a or b, describe the process in Schedule O (See instructions )		
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		No
If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

List the States with which a copy of this Form 990 is required to be filed  \_\_\_\_\_

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

Own website  Another's website  Upon request

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

DEANTHA CROCKETT  
121 W FIREWEED SUITE 250  
ANCHORAGE AK 99503





<b>1b Total</b> . . . . .	208,705	0	63,516
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**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **2**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		No
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		No
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .		No

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **2**

<b>1a</b>	Federated campaigns . . . . .	<b>1a</b>				
<b>b</b>	Membership dues . . . . .	<b>1b</b>	297,557			
<b>c</b>	Fundraising events . . . . .	<b>1c</b>				
<b>d</b>	Related organizations . . . . .	<b>1d</b>				
<b>e</b>	Government grants (contributions)	<b>1e</b>				
<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	40,000			
<b>g</b>	Noncash contributions included in lines 1a-1f \$ _____					
<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .			337,557		

		<b>Business Code</b>				
<b>2a</b>	CONFERENCE	900,099	350,786	350,786		
<b>b</b>	ANNUAL MEETING	900,099	145,420	145,420		
<b>c</b>	SPECIAL PROJECTS	900,099	59,706	59,706		
<b>d</b>	BREAKFAST MEETINGS	900,099	34,927	34,927		
<b>e</b>	RESOURCE REVIEW	900,099	32,700	32,700		
<b>f</b>	All other program service revenue					
<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . .		623,539			

<b>3</b>	Investment income (including dividends, interest and other similar amounts) . . . . .		7,594			7,594
<b>4</b>	Income from investment of tax-exempt bond proceeds . . . . .					
<b>5</b>	Royalties . . . . .					

		(i) Real	(ii) Personal			
<b>6a</b>	Gross Rents					
<b>b</b>	Less rental expenses					
<b>c</b>	Rental income or (loss)					
<b>d</b>	<b>Net rental income or (loss)</b> . . . . .					

		(i) Securities	(ii) Other			
<b>7a</b>	Gross amount from sales of assets other than inventory					
<b>b</b>	Less cost or other basis and sales expenses					
<b>c</b>	Gain or (loss)					
<b>d</b>	<b>Net gain or (loss)</b> . . . . .					

<b>8a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b>				
<b>b</b>	Less direct expenses . . . . .	<b>b</b>				
<b>c</b>	<b>Net income or (loss) from fundraising events</b> . . . . .					

<b>9a</b>	Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>				
<b>b</b>	Less direct expenses . . . . .	<b>b</b>				
<b>c</b>	<b>Net income or (loss) from gaming activities</b> . . . . .					

<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>				
<b>b</b>	Less cost of goods sold . . . . .	<b>b</b>				
<b>c</b>	<b>Net income or (loss) from sales of inventory</b> . . . . .					

	Miscellaneous Revenue	<b>Business Code</b>				
<b>11a</b>	MISCELLANEOUS	900,099	4,092	4,092		
<b>h</b>						

**IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

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

Do not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
Grants and other assistance to individuals in the U S See Part IV, line 22				
Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
Benefits paid to or for members				
Compensation of current officers, directors, trustees, and key employees . . . . .	272,221			
Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
Other salaries and wages	118,700			
Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	6,750			
Other employee benefits . . . . .	34,051			
Payroll taxes . . . . .	26,705			
Fees for services (non-employees)				
Management . . . . .				
Legal . . . . .				
Accounting . . . . .	19,900			
Lobbying . . . . .	36,096			
Professional fundraising See Part IV, line 17 . . . . .				
Investment management fees . . . . .				
Other . . . . .				
Advertising and promotion . . . . .				
Office expenses . . . . .	37,310			
Information technology . . . . .	10,000			
Royalties . . . . .				
Occupancy . . . . .	40,347			
Travel . . . . .	6,021			
Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
Conferences, conventions, and meetings . . . . .	123,943			
Interest . . . . .				
Payments to affiliates . . . . .				
Depreciation, depletion, and amortization . . . . .	4,533			
Insurance . . . . .	6,845			
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)				
<b>SPECIAL PROJECT EXPENSE</b>	63,364			
<b>BREAKFAST MEETINGS</b>	51,466			
<b>ANNUAL MEETING</b>	44,865			
<b>RESOURCE REVIEW</b>	36,775			
<b>FINANCE CHARGES</b>	12,734			
All other expenses	27,130			
<b>Total functional expenses.</b> Add lines 1 through 24f	979,756			
<b>Joint costs.</b> Check here <input type="checkbox"/> 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				

**Part X Balance Sheet**

		(A)		(B)
		Beginning of year		End of year
<b>1</b>	Cash—non-interest-bearing . . . . .	31,048	<b>1</b>	1,320
<b>2</b>	Savings and temporary cash investments . . . . .	514,624	<b>2</b>	563,133
<b>3</b>	Pledges and grants receivable, net . . . . .		<b>3</b>	
<b>4</b>	Accounts receivable, net . . . . .	38,264	<b>4</b>	33,875
<b>5</b>	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .		<b>5</b>	
<b>6</b>	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 . . . . .		<b>6</b>	
<b>7</b>	Notes and loans receivable, net . . . . .		<b>7</b>	
<b>8</b>	Inventories for sale or use . . . . .		<b>8</b>	
<b>9</b>	Prepaid expenses and deferred charges . . . . .		<b>9</b>	
<b>10a</b>	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	97,870		
<b>10b</b>	Less accumulated depreciation . . . . .	74,257		
<b>10c</b>		16,996	<b>10c</b>	23,613
<b>11</b>	Investments—publicly traded securities . . . . .		<b>11</b>	
<b>12</b>	Investments—other securities See Part IV, line 11 . . . . .		<b>12</b>	
<b>13</b>	Investments—program-related See Part IV, line 11 . . . . .		<b>13</b>	
<b>14</b>	Intangible assets . . . . .		<b>14</b>	
<b>15</b>	Other assets See Part IV, line 11 . . . . .		<b>15</b>	
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	600,932	<b>16</b>	621,941
<b>17</b>	Accounts payable and accrued expenses . . . . .	6,053	<b>17</b>	34,036
<b>18</b>	Grants payable . . . . .		<b>18</b>	
<b>19</b>	Deferred revenue . . . . .		<b>19</b>	
<b>20</b>	Tax-exempt bond liabilities . . . . .		<b>20</b>	
<b>21</b>	Escrow or custodial account liability Complete Part IV of Schedule D . . . . .		<b>21</b>	
<b>22</b>	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .		<b>22</b>	
<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
<b>25</b>	Other liabilities Complete Part X of Schedule D . . . . .		<b>25</b>	
<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .	6,053	<b>26</b>	34,036
<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
<b>27</b>	Unrestricted net assets . . . . .	594,879	<b>27</b>	587,905
<b>28</b>	Temporarily restricted net assets . . . . .		<b>28</b>	
<b>29</b>	Permanently restricted net assets . . . . .		<b>29</b>	
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
<b>30</b>	Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
<b>32</b>	Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b>	<b>Total net assets or fund balances</b> . . . . .	594,879	<b>33</b>	587,905
<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .	600,932	<b>34</b>	621,941

**Part XI Financial Statements and Reporting**

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .		No
<b>c</b>	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . . . .		
<b>d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .		No
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . . . .		

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
EDDY LINDSKOOG PRESIDENT	8 00	X		X				0	0	0
ANDREW COCHRANE VICE PRESIDENT	5 00	X		X				0	0	0
STEPHANIE MADSEN VICE PRESIDENT	5 00	X		X				0	0	0
ANDREW MALONEY TREASURER	5 00	X		X				0	0	0
ANDREW HORST SECRETARY	5 00	X		X				0	0	0
ANDREW SHIVELY VICE PRESIDENT	2 00	X						0	0	0
ANDREW BIELAWSKI EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW WILLYN CROCKETT EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW DENTON EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW FJELSTAD EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW FOLEY EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW N FOO EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW L GLAVINOVICH EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW C ISAACSON EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW LOVAS EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW E PITTMAN EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW PH SAMUELS EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW AN SCHUTT EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW NA SHAW EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW SMITH EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW TT THORSON EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW TOOHEY EXECUTIVE COMMITTEE	2 00	X						0	0	0
ANDREW G BAKER DIRECTOR	1 00	X						0	0	0
ANDREW E BENTON DIRECTOR	1 00	X						0	0	0

**Political Campaign and Lobbying Activities**

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**

**▶ Complete if the organization is described below.**  
**▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

**2009**

**Open to Public Inspection**

**Organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),**

Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C  
 Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B  
 Section 527 organizations Complete Part I-A only

**Organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B  
 Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**Organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then**

Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization RESOURCE DEVELOPMENT COUNCIL OF ALASKA	Employer identification number 92-0048833
--	--

**I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Political expenditures ▶ \$ \_\_\_\_\_  
 Volunteer hours \_\_\_\_\_

**I-B Complete if the organization is exempt under section 501(c)(3).**

Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_

Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No

Was a correction made?  Yes  No

If "Yes," describe in Part IV

**I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).**

Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_

Did the filing organization file **Form 1120-POL** for this year?  Yes  No

State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check  if the filing organization belongs to an affiliated group  
**B** Check  if the filing organization checked box A and "limited control" provisions apply

**Limits on Lobbying Expenditures**  
 (The term "expenditures" means amounts paid or incurred.)

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- 1b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- 1c** Total lobbying expenditures (add lines 1a and 1b)
- 1d** Other exempt purpose expenditures
- 1e** Total exempt purpose expenditures (add lines 1c and 1d)
- 1f** Lobbying nontaxable amount Enter the amount from the following table in both columns

<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a If zero or less, enter -0-
- i** Subtract line 1f from line 1c If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes  No

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
<b>Calendar year (or fiscal year beginning in)</b>	<b>(a) 2006</b>	<b>(b) 2007</b>	<b>(c) 2008</b>	<b>(d) 2009</b>	<b>(e) Total</b>
<b>2a</b> Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots non-taxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					



**Part III-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b) Amount
	Yes	No	
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
Volunteers?			
<b>a</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>b</b> Media advertisements?			
<b>c</b> Mailings to members, legislators, or the public?			
<b>d</b> Publications, or published or broadcast statements?			
<b>e</b> Grants to other organizations for lobbying purposes?			
<b>f</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>g</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>h</b> Other activities? If "Yes," describe in Part IV			
<b>i</b> Total lines 1c through 1i			
<b>j</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>2a</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>b</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>c</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes		No	
	1	2	3	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?				No
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?				No
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year?				No

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

<b>1</b> Dues, assessments and similar amounts from members	1	740,040
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	2a	49,110
<b>b</b> Carryover from last year	2b	
<b>c</b> Total	2c	49,110
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	117,666
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	5	-68,556

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation

# Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11, or 12.**  
▶ **Attach to Form 990. ▶ See separate instructions.**

# 2009

**Open to Public  
Inspection**

**Name of the organization**  
RESOURCE DEVELOPMENT COUNCIL OF ALASKA

**Employer identification number**  
92-0048833

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate contributions to (during year)		
Aggregate grants from (during year)		
Aggregate value at end of year		

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure)  Preservation of an historically important land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
Total number of conservation easements	2a
Total acreage restricted by conservation easements	2b
Number of conservation easements on a certified historic structure included in (a)	2c
Number of conservation easements included in (c) acquired after 8/17/06	2d

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_

Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ \_\_\_\_\_

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  Yes  No

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

**III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- Public exhibition
- Scholarly research
- Preservation for future generations
- d**  Loan or exchange programs
- e**  Other

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  **Yes**  **No**

**IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  **Yes**  **No**

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
Beginning balance	<b>1c</b>
Additions during the year	<b>1d</b>
Distributions during the year	<b>1e</b>
Ending balance	<b>1f</b>

Did the organization include an amount on Form 990, Part X, line 21?  **Yes**  **No**

If "Yes," explain the arrangement in Part XIV

**V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
Beginning of year balance . . . . .					
Contributions . . . . .					
Investment earnings or losses . . . . .					
Grants or scholarships . . . . .					
Other expenditures for facilities and programs . . . . .					
Administrative expenses . . . . .					
End of year balance . . . . .					

Provide the estimated percentage of the year end balance held as

- Board designated or quasi-endowment  %
- Permanent endowment  %
- Term endowment  %

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
<b>(i)</b> unrelated organizations . . . . .	<b>3a(i)</b>	
<b>(ii)</b> related organizations . . . . .	<b>3a(ii)</b>	
If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .	<b>3b</b>	

Describe in Part XIV the intended uses of the organization's endowment funds

**VI Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
and . . . . .				
uildings . . . . .				
easehold improvements . . . . .				
quipment . . . . .		97,870	74,257	23,613
ther . . . . .				

Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)  23,613



**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	972,782
Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	979,756
Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	-6,974
Net unrealized gains (losses) on investments	<b>4</b>	
Donated services and use of facilities	<b>5</b>	
Investment expenses	<b>6</b>	
Prior period adjustments	<b>7</b>	
Other (Describe in Part XIV)	<b>8</b>	
Total adjustments (net) Add lines 4 - 8	<b>9</b>	
Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	-6,974

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	
Amounts included on line 1 but not on Form 990, Part VIII, line 12		
Net unrealized gains on investments . . . . .	<b>2a</b>	
Donated services and use of facilities . . . . .	<b>2b</b>	
Recoveries of prior year grants . . . . .	<b>2c</b>	
Other (Describe in Part XIV) . . . . .	<b>2d</b>	
Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	
Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
Other (Describe in Part XIV) . . . . .	<b>4b</b>	
Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Total expenses and losses per audited financial statements . . . . .	<b>1</b>	
Amounts included on line 1 but not on Form 990, Part IX, line 25		
Donated services and use of facilities . . . . .	<b>2a</b>	
Prior year adjustments . . . . .	<b>2b</b>	
Other losses . . . . .	<b>2c</b>	
Other (Describe in Part XIV) . . . . .	<b>2d</b>	
Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	
Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
Other (Describe in Part XIV) . . . . .	<b>4b</b>	
Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	

**Part XIV 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, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
------------	------------------	-------------

**Transactions with Interested Persons**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.**  
 ▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

**2009**

**Open to Public Inspection**

**Name of the organization**  
 RESOURCE DEVELOPMENT COUNCIL OF ALASKA

**Employer identification number**  
 92-0048833

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501 (c)(4) organizations only).  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

<b>(a) Name of disqualified person</b>	<b>(b) Description of transaction</b>	<b>(c) Corrected?</b>
		<b>Yes No</b>

Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$ \_\_\_\_\_  
 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
. . . . . ▶ \$ _____										

**Part III Grants or Assistance Benefitting Interested Persons.**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

**Part IV Business Transactions Involving Interested Persons.**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				<b>Yes</b>	<b>No</b>
THA CROCKETT	DAUGHTER OF BOARD MEMBER	54,500	PAID EMPLOYEE		No

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

**2009**

**Open to Public Inspection**

**Name of the organization**

RESOURCE DEVELOPMENT COUNCIL OF ALASKA

**Employer identification number**

92-0048833

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 8b		RESOURCE DEVELOPMENT COUNCIL DOES NOT HAVE committees that have authority to act on behalf of the Board/Executive Committee
Form 990, Part VI, Section B, line 11		The Form 990 is prepared by an accounting firm, and is then reviewed by the RESOURCE DEVELOPMENT COUNCIL contract bookkeeper, Executive Director and President
Form 990, Part VI, Section B, line 15a		The President, in consultation with the Executive Committee (during an Executive Session), evaluates the Executive Director's performance, presents comparables derived from other like organizations' Form 990s and other boards for which they serve, and ensuing discussion develops the compensation of the Executive Director
Form 990, Part VI, Section C, line 18		A copy of RESOURCE DEVELOPMENT COUNCIL'S Form 990 is available upon request
Form 990, Part VI, Section C, line 19		THESE DOCUMENTS ARE AVAILABLE UPON REQUEST

(s) shown on return  
RESOURCE DEVELOPMENT COUNCIL OF  
KA

Business or activity to which this form relates  
Form 990 Page 10

Identifying number  
92-0048833

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

Maximum amount See the instructions for a higher limit for certain businesses . . . . .	<b>1</b>	250,000
Total cost of section 179 property placed in service (see instructions) . . . . .	<b>2</b>	
Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	<b>3</b>	800,000
Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- . . . . .	<b>4</b>	
Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . .	<b>5</b>	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
Listed property Enter the amount from line 29 . . . . .	<b>7</b>	
Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . . . .	<b>8</b>	
Alternative deduction Enter the smaller of line 5 or line 8 . . . . .	<b>9</b>	
Carryover of disallowed deduction from line 13 of your 2008 Form 4562 . . . . .	<b>10</b>	
Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . .	<b>11</b>	
Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . . . . .	<b>12</b>	
Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 . . . . .	<b>13</b>	

Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)**

Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . . . . .	<b>14</b>	
Property subject to section 168(f)(1) election . . . . .	<b>15</b>	
Other depreciation (including ACRS) . . . . .	<b>16</b>	4,434

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

ACRS deductions for assets placed in service in tax years beginning before 2009 . . . . .	<b>17</b>	
If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . . .		<input type="checkbox"/>

**Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
1-year property						
2-year property						
3-year property						
5-year property						
7-year property						
10-year property						
15-year property			25 yrs		S/L	
Residential rental property			27.5 yrs	MM	S/L	
Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System**

Class life					S/L	
2-year			12 yrs		S/L	
5-year			40 yrs	MM	S/L	

**Part IV Summary (see instructions)**

Listed property Enter amount from line 28 . . . . .	<b>21</b>	
Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (a), and line 21. Enter here . . . . .		



**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**

**Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

Do you have evidence to support the business/investment use claimed?  Yes  No **24b** If "Yes," is the evidence written?  Yes  No

Table with 9 columns: (a) Description of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation/deduction, (i) Elected section 179 cost. Includes rows for depreciation allowance, 50% business use, and 25%/28%/29% rates.

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for vehicle use information with columns (a)-(f) for Vehicle 1-6. Rows include: total business/investment miles, total commuting miles, total other personal miles, total miles driven, and availability for personal use (Yes/No).

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table with 2 columns: Question and Yes/No. Questions include: written policy prohibiting personal use, written policy prohibiting personal use except commuting, treating all use as personal use, providing more than five vehicles, and meeting requirements for qualified automobile demonstration use.

**Part VI Amortization**

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows for 2009 tax year and total amounts.

**Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses**

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
SPECIAL PROJECT EXPENSE	63,364			
BREAKFAST MEETINGS	51,466			
ANNUAL MEETING	44,865			
RESOURCE REVIEW	36,775			
FINANCE CHARGES	12,734			

**Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -**

	<b>Business Code</b>	<b>(A) Total Revenue</b>	<b>(B) Related or Exempt Function Revenue</b>	<b>(C) Unrelated Business Revenue</b>	<b>(D) Revenue Excluded from Tax under IRC 512, 513, or 514</b>
CONFERENCE	900,099	350,786	350,786		
ANNUAL MEETING	900,099	145,420	145,420		
SPECIAL PROJECTS	900,099	59,706	59,706		
BREAKFAST MEETINGS	900,099	34,927	34,927		
RESOURCE REVIEW	900,099	32,700	32,700		

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FRANK KELTY DIRECTOR	1 00	X					0	0	0	
KIP KNUDSON DIRECTOR	1 00	X					0	0	0	
THOMAS KRZEWSKI DIRECTOR	1 00	X					0	0	0	
LINDA LEARY DIRECTOR	1 00	X					0	0	0	
CARRI LOCKHART DIRECTOR	1 00	X					0	0	0	
JOHN MACKINNON DIRECTOR	1 00	X					0	0	0	
MARY MCDOWELL DIRECTOR	1 00	X					0	0	0	
RON MCPHETERS DIRECTOR	1 00	X					0	0	0	
JIM MERY DIRECTOR	1 00	X					0	0	0	
DENISE MICHELS DIRECTOR	1 00	X					0	0	0	
LISA PARKER DIRECTOR	1 00	X					0	0	0	
JUDY PATRICK DIRECTOR	1 00	X					0	0	0	
CHARLIE POWERS DIRECTOR	1 00	X					0	0	0	
KEITH SANDERS DIRECTOR	1 00	X					0	0	0	
JOHN STURGEON DIRECTOR	1 00	X					0	0	0	
DAN SULLIVAN DIRECTOR	1 00	X					0	0	0	
JOHN ZAGER DIRECTOR	1 00	X					0	0	0	
JASON BRUNE EXECUTIVE DIRECTOR	40 00					X	108,100	0	40,766	
CARL PORTMAN DEPUTY DIRECTOR	40 00					X	100,605	0	22,750	

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BERTO DIRECTOR	1 00	X						0	0	0
EN BINGHAM DIRECTOR	1 00	X						0	0	0
BRITTON DIRECTOR	1 00	X						0	0	0
E CAREY DIRECTOR	1 00	X						0	0	0
E CHAPUT DIRECTOR	1 00	X						0	0	0
VE CONNELLY DIRECTOR	1 00	X						0	0	0
COX DIRECTOR	1 00	X						0	0	0
N DOLYNNY DIRECTOR	1 00	X						0	0	0
LA EASLEY DIRECTOR	1 00	X						0	0	0
EDE DIRECTOR	1 00	X						0	0	0
K ELIASON DIRECTOR	1 00	X						0	0	0
EVERHART DIRECTOR	1 00	X						0	0	0
OL FRASER DIRECTOR	1 00	X						0	0	0
GRAHAM DIRECTOR	1 00	X						0	0	0
CK GREENE DIRECTOR	1 00	X						0	0	0
TT HABBERSTAD DIRECTOR	1 00	X						0	0	0
K HANLEY DIRECTOR	1 00	X						0	0	0
L HANNEMAN DIRECTOR	1 00	X						0	0	0
K HARRIS DIRECTOR	1 00	X						0	0	0
HENDERSON DIRECTOR	1 00	X						0	0	0
L HENRY DIRECTOR	1 00	X						0	0	0
KY HULTBERG DIRECTOR	1 00	X						0	0	0
ESA IMM DIRECTOR	1 00	X						0	0	0
JEFFRESS DIRECTOR	1 00	X						0	0	0
E JUNGREIS DIRECTOR	1 00	X						0	0	0

# NOTICE

GuideStar has been informed by the IRS of processing errors on IRS Forms 990 filed electronically between January 1, 2009, and December 3, 2010, for form year 2008. These processing errors resulted in inaccurate data appearing on the scanned images of the affected returns that are posted on GuideStar and do not reflect the information filed with the IRS.

These errors include:

- Part III, line 1, organization's mission description—may not reflect what was originally submitted by the nonprofit organization.
- Part VIII, line 8a, gross income for special events—values may have been transposed.
- Part IX, line 7c, other salaries and wages, management and general expenses—may show a blank where a value was originally reported.
- Schedule D, Part V, line 3a(ii), endowment funds and possession by related organizations—checkbox values may have been transposed.

GuideStar is working with the IRS to obtain a corrected copy of its form year 2008 Form 990. GuideStar will replace this Form 990 if, and when, the accurate return is made available from the IRS.

For more information, please visit <http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx>



Applicable  
 Address change  
 Name change  
 Initial return  
 Termination  
 Amended return  
 Information pending

**Please use IRS label or print or type. See Specific Instructions.**

RESOURCE DEVELOPMENT COUNCIL OF ALASKA  
 Doing Business As  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
 121 WEST FIREWEED No 250  
 City or town, state or country, and ZIP + 4  
 ANCHORAGE, AK 99503

**E Telephone number**  
 92-0048833  
 (907) 276-0700  
**G Gross receipts** \$ 850,652

**F Name and address of Principal Officer**  
 JASON BRUNE  
 121 WEST FIREWEED SUITE 250  
 ANCHORAGE, AK 99503

**H(a) Is this a group return for affiliates?**  Yes  No  
**H(b) Are all affiliates included?**  Yes  No  
 (If "No," attach a list See instructions )  
**H(c) Group Exemption Number** ▶

501(c) ( 6 ) (Insert no )  4947(a)(1) or  527

**Web site:** ▶ N/A

Corporation  trust  association  other ▶

**L Year of Formation** 1975 **M State of legal domicile** AK

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities  
 TO ENCOURAGE A STRONG AND DIVERSIFIED RESOURCE DEVELOPMENT SECTOR IN ALASKA AND TO EXPAND THE STATE OF ALASKA'S ECONOMIC BASE

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its assets

**3** Number of voting members of the governing body (Part VI, line 1a) . . . . . **3** 22

**4** Number of independent voting members of the governing body (Part VI, line 1b) . . . . . **4** 22

**5** Total number of employees (Part V, line 2a) . . . . . **5** 5

**6** Total number of volunteers (estimate if necessary) . . . . . **6** 0

**7a** Total gross unrelated business revenue from Part VIII, line 12, column (C) . . . . . **7a** 0

**7b** Net unrelated business taxable income from Form 990-T, line 34 . . . . . **7b** 0

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .		0
<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	707,172	831,297
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	22,786	16,841
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	44,227	2,514
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	774,185	850,652
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	348,612	410,076
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
<b>b</b> (Total fundraising expenses, Part IX, column (D), line 25 <sup>0</sup> )		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	359,960	496,141
<b>18</b> Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	708,572	906,217
<b>19</b> Revenue less expenses Subtract line 18 from line 12	65,613	-55,565
	<b>Beginning of Year</b>	<b>End of Year</b>
<b>20</b> Total assets (Part X, line 16)	662,580	600,932
<b>21</b> Total liabilities (Part X, line 26)	11,062	6,053
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	651,518	594,879

**Part II Signature Block**

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 officer) is based on all information of which preparer has any knowledge

\*\*\*\*\* | 2009-11-16  
 Signature of officer | Date  
 JASON BRUNE Executive Director  
 Type or print name and title

**III Statement of Program Service Accomplishments** (See the instructions.)

Briefly describe the organization's mission:

PROMOTED AND BENEFITED RESOURCE SECTORS, INCLUDING MINING, OIL AND GAS, FISHERIES, TIMBER, AND TOURISM AND DEVELOPED GUIDELINES FOR RESPONSIBLE USE AND DEVELOPMENT OF RESOURCES

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O

Did the organization cease conducting or make significant changes in how it conducts any program services?  Yes  No

If "Yes," describe these changes on Schedule O

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

PROMOTED AND BENEFITED RESOURCE SECTORS, INCLUDING MINING, OIL AND GAS, FISHERIES, TIMBER, AND TOURISM AND DEVELOPED GUIDELINES FOR RESPONSIBLE USE AND DEVELOPMENT OF RESOURCES

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

Other program services (Describe in Schedule O )  
(Expenses \$ including grants of \$ ) (Revenue \$ )

Total program service expenses \$ *Must equal Part IX, Line 25, column (B).*



	Yes	No
Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .		No
Is the organization required to complete Schedule B, Schedule of Contributors? . . . . .		No
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 <input checked="" type="checkbox"/> . . . . .		No
Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .		
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 <input checked="" type="checkbox"/> . . . . .	Yes	
Did the organization maintain any donor advised funds or any 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 <input checked="" type="checkbox"/> . . . . .		No
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 . . . . .		No
Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III <input checked="" type="checkbox"/> . . . . .		No
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 <input checked="" type="checkbox"/> . . . . .		No
Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V <input checked="" type="checkbox"/> . . . . .		No
Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable . . . . . <input checked="" type="checkbox"/>	Yes	
Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . . <input checked="" type="checkbox"/>		No
Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .		No
Did the organization maintain an office, employees, or agents outside of the U S ? . . . . .		No
Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I . . . . .		No
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II . . . . .		No
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III . . . . .		No
Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I . . . . .		No
Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .		No
Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .		No
Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .		No
Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .		No
Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . .		No
Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J . . . . .		No
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, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25 . . . . .		No
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
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 . . . . .		
Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I . . . . .		
Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . . . . .		No
Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III . . . . .		No

**Part IV Checklist of Required Schedules (Continued)**

	Yes	No
<b>28</b> During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
<b>a</b> Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV . . . . .		No
<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV . . . . .		No
<b>c</b> Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV . . . . .		No
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . . .		No
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M . . . . .		No
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . . . . .		No
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . . . . .		No
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I . . . . .		No
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .		No
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . .		No
<b>36</b> 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 . . . . .		
<b>37</b> Did the organization conduct more than 5 percent 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 . . . . .		No

		Yes	No
Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable . . . . .	<b>1a</b>	7	
Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	<b>1b</b>	0	
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b>		No
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 . . . . .	<b>2a</b>	5	
If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . . . <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	<b>2b</b>	Yes	
Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	<b>3a</b>		No
If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	<b>3b</b>		
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)? . . . . .	<b>4a</b>		No
If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</b>			
Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	<b>5a</b>		No
Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		No
If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .	<b>5c</b>		
Did the organization solicit any contributions that were not tax deductible? . . . . .	<b>6a</b>		No
If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>6b</b>		
<i>Organizations that may receive deductible contributions under section 170(c).</i>			
Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? . . . . .	<b>7a</b>		
If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	<b>7b</b>		
Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	<b>7c</b>		
If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	<b>7d</b>		
Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<b>7e</b>		
Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<b>7f</b>		
For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	<b>7g</b>		
For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	<b>7h</b>		
<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	<b>8</b>		
<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>			
Did the organization make any taxable distributions under section 4966? . . . . .	<b>9a</b>		
Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	<b>9b</b>		
<i>Section 501(c)(7) organizations.</i> Enter			
Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>		
Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<i>Section 501(c)(12) organizations</i> Enter			
Gross income from members or shareholders . . . . .	<b>11a</b>		
Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	<b>11b</b>		
<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	<b>12a</b>		
If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		

		Yes	No
<i>For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.</i>			
Enter the number of voting members of the governing body . . . . .	<b>1a</b>		22
Enter the number of voting members that are independent . . . . .	<b>1b</b>		22
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .	<b>2</b>		No
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .	<b>3</b>		No
Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .	<b>4</b>		No
Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .	<b>5</b>		No
Does the organization have members or stockholders? . . . . .	<b>6</b>		No
Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>		No
Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	<b>7b</b>		No
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
the governing body? . . . . .	<b>8a</b>	Yes	
each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>		No
Does the organization have local chapters, branches, or affiliates? . . . . .	<b>9a</b>		No
If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .	<b>9b</b>		
Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 . . . . .	<b>10</b>		No
Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	<b>11</b>		No

**Section B. Policies**

		Yes	No
Does the organization have a written conflict of interest policy? <i>If "No", go to line 13</i> . . . . .	<b>12a</b>		No
Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>		
Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<b>12c</b>		
Does the organization have a written whistleblower policy? . . . . .	<b>13</b>		No
Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b>		No
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
The organization's CEO, Executive Director, or top management official? . . . . .	<b>15a</b>	Yes	
Other officers or key employees of the organization? . . . . .	<b>15b</b>		No
Describe the process in Schedule O			
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>		No
If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	<b>16b</b>		

**Section C. Disclosure**

List the States with which a copy of this Form 990 is required to be filed \_\_\_\_\_

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 own website    another's website    upon request

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

DEANTHA CROCKETT  
121 W FIREWEED SUITE 250  
ANCHORAGE, AK 99503

ROGERS , PRESIDENT	8 00	X	X					0	0	0
LIDSKOOG , SR VICE PRESIDENT	5 00	X	X					0	0	0
DOCHRANE , VICE PRESIDENT	5 00	X	X					0	0	0
ANIE MADSEN , SECRETARY	5 00	X	X					0	0	0
ALONEY , TREASURER	5 00	X	X					0	0	0
GHIVELY , PAST PRESIDENT	5 00	X	X					0	0	0
BIELAWSKI , EXECUTIVE COMMITTE	2 00	X						0	0	0
BINGHAM , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
N CROCKETT , EXECUTIVE COMMITTE	2 00	X						0	0	0
DENTON , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
JELSTAD , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
OLEY , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
OO , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
LAVINOVICH , EXECUTIVE COMMITTE	2 00	X						0	0	0
HAYMES , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
RST , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
A IMM , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
SAACSON , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
OVAS , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
SANDERS , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
THORSON , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
DOHEY , EXECUTIVE COMMITTE MEMBE	2 00	X						0	0	0
BAKER , DIRECTOR	1 00	X						0	0	0
BERGERSON , DIRECTOR	1 00	X						0	0	0
ERTO , DIRECTOR	1 00	X						0	0	0
BRINKLEY , DIRECTOR	1 00	X						0	0	0
BROWN , DIRECTOR	1 00	X						0	0	0
CH , DIRECTOR	1 00	X						0	0	0
C CARTER , DIRECTOR	1 00	X						0	0	0
CLOUD , DIRECTOR	1 00	X						0	0	0
CONNELLY , DIRECTOR	1 00	X						0	0	0
OX , DIRECTOR	1 00	X						0	0	0
EASLEY , DIRECTOR	1 00	X						0	0	0
DE , DIRECTOR	1 00	X						0	0	0
ELIASON , DIRECTOR	1 00	X						0	0	0
ERHART , DIRECTOR	1 00	X						0	0	0
FRASER , DIRECTOR	1 00	X						0	0	0
GAY , DIRECTOR	1 00	X						0	0	0
GREENE , DIRECTOR	1 00	X						0	0	0
HABBERSTAD , DIRECTOR	1 00	X						0	0	0
HANLEY , DIRECTOR	1 00	X						0	0	0
HANNEMAN , DIRECTOR	1 00	X						0	0	0
HARRIS , DIRECTOR	1 00	X						0	0	0
HENDERSON , DIRECTOR	1 00	X						0	0	0
HULTBERG , DIRECTOR	1 00	X						0	0	0
FFRESS , DIRECTOR	1 00	X						0	0	0
HUNGREIS , DIRECTOR	1 00	X						0	0	0
E KELLER , DIRECTOR	1 00	X						0	0	0
KELTY , DIRECTOR	1 00	X						0	0	0
UDSON , DIRECTOR	1 00	X						0	0	0
S KRZEWINSKI , DIRECTOR	1 00	X						0	0	0
MACKINNON , DIRECTOR	1 00	X						0	0	0
MATTHEWS , DIRECTOR	1 00	X						0	0	0
MATTHIAS , DIRECTOR	1 00	X						0	0	0
MCDOWELL , DIRECTOR	1 00	X						0	0	0
CPHETERS , DIRECTOR	1 00	X						0	0	0
RY , DIRECTOR	1 00	X						0	0	0
E MICHELS , DIRECTOR	1 00	X						0	0	0
MILLER , DIRECTOR	1 00	X						0	0	0
MER , DIRECTOR	1 00	X						0	0	0
S PANAMAROFF , DIRECTOR	1 00	X						0	0	0
ARKER , DIRECTOR	1 00	X						0	0	0
ATRICK , DIRECTOR	1 00	X						0	0	0
REINWAND , DIRECTOR	1 00	X						0	0	0
ETH RENSCH , DIRECTOR	1 00	X						0	0	0
SAMUELS , DIRECTOR	1 00	X						0	0	0
SCHUTT , DIRECTOR	1 00	X						0	0	0



<b>d</b>	Related organizations . . . <b>1d</b>				
<b>e</b>	Government grants (contributions) <b>1e</b>				
<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above <b>1f</b>				
<b>g</b>	Noncash contributions included in lines 1a-1f \$ _____				
<b>h</b>	<b>Total (Add lines 1a-1f)</b> . . . . .				

		Business Code			
<b>2a</b>	MEMBERSHIP REVENUES	900,099	659,028	659,028	
<b>b</b>	SPECIAL PROJECTS	900,099	77,460	77,460	
<b>c</b>	CONFERENCE	900,099	48,288	48,288	
<b>d</b>	RESOURCE REVIEW	900,099	23,445	23,445	
<b>e</b>	BREAKFAST MEETINGS	900,099	23,076	23,076	
<b>f</b>	All other program service revenue				
<b>g</b>	<b>Total. Add lines 2a-2f</b> . . . . .				
	▶ \$ 831,297				

<b>3</b>	Investment income (including dividends, interest other similar amounts) . . . . .		16,841		16,841
<b>4</b>	Income from investment of tax-exempt bond proceeds . . . . .				
<b>5</b>	Royalties . . . . .				
		(i) Real	(ii) Personal		
<b>6a</b>	Gross Rents				
<b>b</b>	Less rental expenses				
<b>c</b>	Rental income or (loss)				
<b>d</b>	Net rental income or (loss) . . . . .				

		(i) Securities	(ii) Other		
<b>7a</b>	Gross amount from sales of assets other than inventory				
<b>b</b>	Less cost or other basis and sales expenses				
<b>c</b>	Gain or (loss)				
<b>d</b>	Net gain or (loss) . . . . .				

<b>8a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 . . . . . <b>a</b>				
<b>b</b>	Less direct expenses . . . <b>b</b>				
<b>c</b>	Net income or (loss) from fundraising events . . . . .				

<b>9a</b>	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 <b>a</b>				
<b>b</b>	Less direct expenses . . . <b>b</b>				
<b>c</b>	Net income or (loss) from gaming activities . . . . .				

<b>10a</b>	Gross sales of inventory, less returns and allowances . . . <b>a</b>				
<b>b</b>	Less cost of goods sold . . . <b>b</b>				
<b>c</b>	Net income or (loss) from sales of inventory . . . . .				

**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).**

**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
Grants and other assistance to individuals in the U S See Part IV, line 22				
Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
Benefits paid to or for members				
Compensation of current officers, directors, trustees, and key employees . . . . .	123,791			
Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
Other salaries and wages	208,600			
Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	17,218			
Other employee benefits . . . . .	34,948			
Payroll taxes . . . . .	25,519			
Fees for services (non-employees)				
Management . . . . .				
Legal . . . . .				
Accounting . . . . .	20,800			
Lobbying . . . . .				
Professional fundraising See Part IV, line 17 . . . . .				
Investment management fees . . . . .				
Other . . . . .	1,000			
Advertising and promotion . . . . .				
Office expenses . . . . .	6,221			
Information technology . . . . .				
Royalties . . . . .				
Occupancy . . . . .				
Travel . . . . .	3,168			
Payments of travel or entertainment expenses for any Federal, state or local public officials . . . . .				
Conferences, conventions and meetings . . . . .	100,308			
Interest . . . . .				
Payments to affiliates . . . . .				
Depreciation, depletion, and amortization . . . . .	6,883			
Insurance . . . . .	2,781			
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 )				
<b>SPECIAL PROJECT EXPENSE</b>	121,008			
<b>ANNUAL MEETING</b>	43,911			
<b>OFFICE &amp; STORAGE RENT</b>	31,567			
<b>RESOURCE REVIEW</b>	27,919			
<b>LOBBY SERVICES</b>	22,266			
<b>All other expenses</b>	108,309			
<b>Total functional expenses. Add lines 1 through 24f</b>	906,217			
<b>Joint Costs.</b> Check <input type="checkbox"/> 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				



		Beginning of year		End of year
1	Cash—non-interest-bearing . . . . .	320	1	31,048
2	Savings and temporary cash investments . . . . .	583,342	2	514,624
3	Pledges and grants receivable, net . . . . .		3	
4	Accounts receivable, net . . . . .	58,658	4	38,264
5	Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i> . . . . .		5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i> . . . . .		6	
7	Notes and loans receivable, net . . . . .		7	
8	Inventories for sale or use . . . . .		8	
9	Prepaid expenses and deferred charges . . . . .		9	
10a	Land, buildings, and equipment cost basis	10a		
		86,720		
b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i> . . . . .	10b		
		69,724	20,260	10c
				16,996
11	Investments—publicly traded securities . . . . .		11	
12	Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i> . . . . .		12	
13	Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i> . . . . .		13	
14	Intangible assets . . . . .		14	
15	Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i> . . . . .		15	
16	<b>Total assets.</b> <i>Add lines 1 through 15 (must equal line 34)</i>	662,580	16	600,932
17	Accounts payable and accrued expenses . . . . .		17	4,339
18	Grants payable . . . . .		18	
19	Deferred revenue . . . . .		19	
20	Tax-exempt bond liabilities . . . . .		20	
21	Escrow account liability <i>Complete Part IV of Schedule D</i> . . . . .		21	
22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i> . . . . .		22	
23	Secured mortgages and notes payable to unrelated third parties . . . . .		23	
24	Unsecured notes and loans payable . . . . .		24	
25	Other liabilities <i>Complete Part X of Schedule D</i> . . . . .	11,062	25	1,714
26	<b>Total liabilities.</b> <i>Add lines 17 through 25</i> . . . . .	11,062	26	6,053
<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
27	Unrestricted net assets . . . . .	651,518	27	594,879
28	Temporarily restricted net assets . . . . .		28	
29	Permanently restricted net assets . . . . .		29	
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
30	Capital stock or trust principal, or current funds . . . . .		30	
31	Paid-in or capital surplus, or land, building or equipment fund . . . . .		31	
32	Retained earnings, endowment, accumulated income, or other funds . . . . .		32	
33	Total net assets or fund balances . . . . .	651,518	33	594,879
34	Total liabilities and net assets/fund balances . . . . .	662,580	34	600,932

**Part XI Financial Statements and Reporting**

	Yes	No
Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .	2a	No
Were the organization's financial statements audited by an independent accountant? . . . . .	2b	No
If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . .	2c	
As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	3a	No

SCHEDULE C Form 990 or 990-EZ

Political Campaign and Lobbying Activities

OMB No 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2008

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To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

Organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C

Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B

Section 527 organizations complete Part I-A only

Organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities)

Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B

Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

Organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax)

Section 501(c)(4), (5), or (6) organizations complete Part III

Name of the organization RESOURCE DEVELOPMENT COUNCIL OF ALASKA

Employer identification number

92-0048833

I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.)

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Political expenditures \$

Volunteer hours

I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.)

Enter the amount of any excise tax incurred by the organization under section 4955 \$

Enter the amount of any excise tax incurred by organization managers under section 4955 \$

If the organization incurred in a section 4955 tax, did it file Form 4720 for this year? Yes No

Was a correction made? Yes No

If "Yes," describe in Part IV

I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.)

Enter the amount directly expended by the filing organization for section 527 exempt function activities \$

Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt function activities \$

Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b \$

Did the filing organization file Form 1120-POL for this year? Yes No

State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's internal funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

**Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)).** (See the instructions for Schedule C for details.)

**A** Check  if the filing organization belongs to an affiliated group  
**B** Check  if the filing organization checked box A and "limited control" provisions apply

**Limits on Lobbying Expenditures—**  
**(The term "expenditures" means amounts paid or incurred.)**

	(a) Filing Organization's Totals	(b) Affiliated Group Totals
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)		
<b>1b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		
<b>1c</b> Total lobbying expenditures (add lines 1a and 1b)		
<b>1d</b> Other exempt purpose expenditures		
<b>1e</b> Total exempt purpose expenditures (add lines 1c and 1d)		
<b>1f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns—		
<p><b>If the amount on line 1e, column (a) or (b) is:</b></p> <p>Not over \$500,000      <b>The lobbying nontaxable amount is:</b> 20% of the amount on line 1e</p> <p>Over \$500,000 but not over \$1,000,000      \$100,000 plus 15% of the excess over \$500,000</p> <p>Over \$1,000,000 but not over \$1,500,000      \$175,000 plus 10% of the excess over \$1,000,000</p> <p>Over \$1,500,000 but not over \$17,000,000      \$225,000 plus 5% of the excess over \$1,500,000</p> <p>Over \$17,000,000      \$1,000,000</p>		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)		
<b>h</b> Subtract line 1g from line 1a. Enter -0- if line g is more than line a		
<b>i</b> Subtract line 1f from line 1c. Enter -0- if line f is more than line c		
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		

Yes  No

**4-Year Averaging Period Under Section 501(h)**  
**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)**

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
<b>2a</b> Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots non-taxable amount					
<b>e</b> Grassroots ceiling amount (150% of line d, column (e))					

**Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** (See the instructions for Schedule C for details.)

	(a)		(b)
	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
Volunteers?			
Paid staff or management (include compensation in expenses reported on lines c through i)?			
Media advertisements?			
Mailings to members, legislators, or the public?			
Publications, or published or broadcast statements?			
Grants to other organizations for lobbying purposes?			
Direct contact with legislators, their staffs, government officials, or a legislative body?			
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
Other activities If "Yes," describe in Part IV			
Total lines 1c through 1i			
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
If "Yes" enter the amount of any tax incurred under section 4912			
If "Yes" enter the amount of any tax incurred by organization managers under section 4912			
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** (See the instructions for Schedule C for details.)

	Yes	No
Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	No
Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	No
Did the organization agree to carryover lobbying and political expenditures from the prior year?	<b>3</b>	No

**Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes."** (See the instructions for Schedule C for details.)

Dues, assessments and similar amounts from members	1 \$	659,028
Section 162(e) non-deductible lobbying and political expenditures <i>(do not include amounts of political expenses for which the section 527(f) tax was paid).</i>		
Current Year	2a \$	93,395
Carryover from last year	2b \$	
Total	2c \$	93,395
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$	104,785
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$	
Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$	-11,390

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. If you have any additional information, complete this part for any additional information.

Identifier	Return Reference	Explanation



# Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

# 2008

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<b>Name of the organization</b> RESOURCE DEVELOPMENT COUNCIL OF ALASKA	<b>Employer identification number</b> 92-0048833
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### Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate Contributions to (during year)		
Aggregate Grants from (during year)		
Aggregate value at end of year		

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?  Yes  No

### Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure)  Preservation of an historically important land area

Protection of natural habitat  Preservation of certified historic structure

Preservation of open space

Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
Total number of conservation easements	2a
Total acreage restricted by conservation easements	2b
Number of conservation easements on a certified historic structure included in (a)	2c
Number of conservation easements included in (c) acquired after 8/17/06	2d

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶

Number of states where property subject to conservation easement is located ▶

Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?  Yes  No

Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ▶

Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  Yes  No

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

### Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1 ▶ \$

III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- Public exhibition, Scholarly research, Preservation for future generations, Loan or exchange programs, Other

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

IV Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

If "Yes," explain why in Part XIV and complete the following table

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance

Did the organization include an amount on Form 990, Part X, line 21? Yes No

If "Yes," explain the arrangement in Part XIV

V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current Year, (b) Prior Year, (c) Two Years Back, (d) Three Years Back, (e) Four Years Back. Rows: Beginning of year balance, Contributions, Investment earnings or losses, Grants or scholarships, Other expenditures for facilities and programs, Administrative expenses, End of year balance

Provide the estimated percentage of the year end balance held as

- Board designated or quasi-endowment, Permanent endowment, Term endowment

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

Table with 3 columns: Description, Yes, No. Rows: (i) unrelated organizations, (ii) related organizations, 3b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Describe in Part XIV the intended uses of the organization's endowment funds

VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: Description of investment, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Depreciation, (d) Book value. Rows: Land, Buildings, Leasehold improvements, Equipment, Other, Total





**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	
Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	
Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	
Net unrealized gains (losses) on investments	<b>4</b>	
Donated services and use of facilities	<b>5</b>	
Investment expenses	<b>6</b>	
Prior period adjustments	<b>7</b>	
Other (Describe in Part XIV)	<b>8</b>	
Total adjustments (net) Add lines 4 - 8	<b>9</b>	
Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	
Amounts included on line 1 but not on Form 990, Part VIII, line 12			
Net unrealized gains on investments . . . . .	<b>2a</b>		
Donated services and use of facilities . . . . .	<b>2b</b>		
Recoveries of prior year grants . . . . .	<b>2c</b>		
Other (Describe in Part XIV) . . . . .	<b>2d</b>		
Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	
Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	
Amounts included on Form 990, Part VIII, line 12, but not on line 1			
Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
Other (Describe in Part XIV) . . . . .	<b>4b</b>		
Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12 ) . . . . .		<b>5</b>	

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Total expenses and losses per audited financial statements . . . . .		<b>1</b>	
Amounts included on line 1 but not on Form 990, Part IX, line 25			
Donated services and use of facilities . . . . .	<b>2a</b>		
Prior year adjustments . . . . .	<b>2b</b>		
Losses reported on Form 990, Part IX, line 25 . . . . .	<b>2c</b>		
Other (Describe in Part XIV) . . . . .	<b>2d</b>		
Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	
Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	
Amounts included on Form 990, Part IX, line 25, but not on line 1:			
Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
Other (Describe in Part XIV) . . . . .	<b>4b</b>		
Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18 ) . . . . .		<b>5</b>	

**Part XIV 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 XIV, lines 1b and 2b, Part XV, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation



**2008**

**Open to Public Inspection**

**SCHEDULE O (Form 990)**

Department of the Treasury Internal Revenue Service

**Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

**Name of the organization**  
 RESOURCE DEVELOPMENT COUNCIL OF ALASKA  
**Employer identification number**  
 92-0048833

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 8b		RESOURCE DEVELOPMENT COUNCIL DOES NOT HAVE committees that have authority to act on behalf of the Board/Executive Committee

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Form 990 is prepared by an accounting firm, and is then reviewed by the RESOURCE DEVELOPMENT COUNCIL contract bookkeeper, Executive Director and President

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The President, in consultation with the Executive Committee (during an Executive Session), evaluates the Executive Director's performance, presents comparables derived from other like organizations' Form 990s and other boards for which they serve, and ensuring discussion develops the compensation of the Executive Director

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 18		A copy of RESOURCE DEVELOPMENT COUNCIL'S Form 990 is available upon request

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THESE DOCUMENTS ARE AVAILABLE UPON REQUEST

See separate instructions. Attach to your tax return.

(s) shown on return URCE DEVELOPMENT COUNCIL OF KA	Business or activity to which this form relates  Form 990 Page 10	Identifying number  92-0048833
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**Part I Election To Expense Certain Property Under Section 179**  
**Note: If you have any listed property, complete Part V before you complete Part I.**

Maximum amount See the instructions for a higher limit for certain businesses . . . . .	<b>1</b>	250,000
Total cost of section 179 property placed in service (see instructions) . . . . .	<b>2</b>	
Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	<b>3</b>	800,000
Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- . . . . .	<b>4</b>	
Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . .	<b>5</b>	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
Listed property Enter the amount from line 29 . . . . .	<b>7</b>	
Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . . . .	<b>8</b>	
Representative deduction Enter the smaller of line 5 or line 8 . . . . .	<b>9</b>	
Carryover of disallowed deduction from line 13 of your 2007 Form 4562 . . . . .	<b>10</b>	
Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . .	<b>11</b>	
Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . . . . .	<b>12</b>	
Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 . . . . .	<b>13</b>	

**Do not use Part II or Part III below for listed property. Instead, use Part V.**

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	<b>14</b>	
Property subject to section 168(f)(1) election . . . . .	<b>15</b>	
Other depreciation (including ACRS) . . . . .	<b>16</b>	6,039

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

MACRS deductions for assets placed in service in tax years beginning before 2008 . . . . .	<b>17</b>	
If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . . .		<input type="checkbox"/>

**Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
1-year property						
2-year property						
3-year property						
5-year property						
7-year property						
10-year property						
15-year property			25 yrs		S/L	
Residential rental property			27.5 yrs	MM	S/L	
Nonresidential real property			27.5 yrs	MM	S/L	
Nonresidential real property			39 yrs	MM	S/L	
Nonresidential real property				MM	S/L	

**Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

Class life				S/L	
2-year			12 yrs	S/L	
10-year			40 yrs	MM	S/L

**Part IV Summary (See instructions)**

Listed property Enter amount from line 28 . . . . .	<b>21</b>	
Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr.	<b>22</b>	6,039

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**

**Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

Do you have evidence to support the business/investment use claimed?  Yes  No **24b** If "Yes," is the evidence written?  Yes  No

(a) Description of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation/deduction	(i) Elected section 179 cost
Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25	
Property used more than 50% in a qualified business use								
		%						
		%						
		%						
Property used 50% or less in a qualified business use								
		%			S/L -			
		%			S/L -			
		%			S/L -			
Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28		
Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Total commuting miles driven during the year												
Total other personal (noncommuting) miles driven												
Total miles driven during the year. Add lines 30 through 32												
Was the vehicle available for personal use during off-duty hours?												
Was the vehicle used primarily by a more than 5% owner or related person?												
Was another vehicle available for personal use?												

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Question	Yes	No
Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.		
Do you treat all use of vehicles by employees as personal use?		
Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
Amortization of costs that begins during your 2008 tax year (see instructions)					
Amortization of costs that began before your 2008 tax year				43	844
<b>Total.</b> Add amounts in column (f). See the instructions for where to report				44	844

**Additional Data**

**Software ID:**

**Software Version:**

**EIN:** 92-0048833

**Name:** RESOURCE DEVELOPMENT COUNCIL OF ALASKA

**Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -**

	<b>Business Code</b>	<b>(A) Total Revenue</b>	<b>(B) Related or Exempt Function Revenue</b>	<b>(C) Unrelated Business Revenue</b>	<b>(D) Revenue Excluded from Tax under IRC 512, 513, or 514</b>
<b>a</b>	MEMBERSHIP REVENUES	900,099	659,028		
<b>b</b>	SPECIAL PROJECTS	900,099	77,460		
<b>c</b>	CONFERENCE	900,099	48,288		
<b>d</b>	RESOURCE REVIEW	900,099	23,445		
<b>e</b>	BREAKFAST MEETINGS	900,099	23,076		