#### EXTENDED TO MAY 15, 2017

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Use Only

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. JUL 1, 2015 and ending JUN 30, A For the 2015 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number COPPER RIVER PRINCE WILLIAM SOUND Address change MARKETING ASSOCIATION Name change 56-2502443 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Final return/ 424-3459 PO BOX 199 (907)termin-ated 572,667. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return CORDOVA, AK 99574 H(a) Is this a group return Applica-F Name and address of principal officer: CHRISTA HOOVER Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status:  $\perp$  501(c)(3)  $\perp$  X 501(c)( 6 )  $\triangleleft$  (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.COPPERRIVERMARKETING.ORG **H(c)** Group exemption number ▶ **K** Form of organization: **X** Corporation Trust Association L Year of formation: 2005 M State of legal domicile: AK Part I Summary Briefly describe the organization's mission or most significant activities: INCREASE THE VALUE OF SALMON Activities & Governance HARVESTED FROM THE COPPER RIVER/PRINCE WILLIAM SOUND REGION THROUGH Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 9 Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 528,674. 565,089.Contributions and grants (Part VIII, line 1h) Revenue 1,600. 0. Program service revenue (Part VIII, line 2g) 3,629. 3,049. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 687. 575. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 534,010. 569,293. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ........ 23,458 121,333. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 81,573. 99,926. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 273,643. 194,850. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 378,674. 416,109. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 155,336. 153,184. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 636,078. 856,172. 20 Total assets (Part X, line 16) 85,673. 18,763. 21 Total liabilities (Part X, line 26) 617,315. 770,499. Net assets or fund balances. Subtract line 21 from line 20 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 Date Sign CHRISTA HOOVER, EXECUTIVE DIRECTOR Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature if self-employed ROBERT L. REHFELD 03/29/17 P00104959 Paid ▶ ELGEE REHFELD MERTZ, LLC 92-0127098 Preparer Firm's name Firm's EIN ▶

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Firm's address 9309 GLACIER HWY STE B-200

JUNEAU, AK 99801

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes No

Phone no. (907) 789-3178

) (Revenue \$

including grants of \$

#### COPPER RIVER PRINCE WILLIAM SOUND MARKETING ASSOCIATION

# Form 990 (2015) MARKETING AS Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		37	
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		37
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			l
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		х
b	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	11b		X
С	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	11c		X
d	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			l
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	j ,			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40:		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	, , , , ,	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	٠.٠		<del></del>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	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	17		Х
18	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	18		Х
19	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	19		X

# Form 990 (2015) MARKETING ASSOCIAT Part IV Checklist of Required Schedules (continued)

			Yes	NO
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	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 lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			٠,,
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			٦,
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			\ <sub>32</sub>
••	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			, v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			, v
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0		
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
<b>~</b> =	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	6-		<sub>v</sub>
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		Х	
	Note. All Form 990 filers are required to complete Schedule O	38		<u> </u>

56-2502443

Form 990 (2015) MARKETING ASSOCIATION

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part v					<u>Ш</u>
					Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	5			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r			_	Х	
0-	(gambling) winnings to prize winners?	 T		1c	Λ	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		4			
<b>L</b>	filed for the calendar year ending with or within the year covered by this return		<u> </u>	2b	Х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instruction			20		
32				3a		х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other			0.5		
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		х
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer			5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t					
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	or gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		
				7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			_		
	to file Form 8282?	1	 I	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			_		v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g 7h		
н 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained			/11		
0	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	з Бу ц	l <b>C</b>	8		
9	Sponsoring organizations maintaining donor advised funds.					
	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
_	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	يمد ا	I			
	organization is licensed to issue qualified health plans	13b		-		
	Enter the amount of reserves on hand	13c	l .	44-		Х
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14a 14b		
ט	in res, has it lieu a roini rzo to report these payments? If two, provide an explanation in scriedu.	U			990	(2015)
				, 0111		\-U IU)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year la			110
	If there are material differences in voting rights among members of the governing body, or if the governing	-		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2	Х	
3	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?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a		۰		
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	-05		
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	etion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
15	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finar	icial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	THE ORGANIZATION - (907) 424-3459			
	PO BOX 199 CORDOVA AK 99574			

## COPPER RIVER PRINCE WILLIAM SOUND MARKETING ASSOCIATION

Form 990 (2015) MARKETING ASSOCIATION

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

Check if Schedule O contains a response or note to any line in this Part VII	

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

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

Leck this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A) (B) (C) Name and Title Average Position	(D)		(F)	
Name and Title  Average  Position  (do not check more than one	Reportable	<b>(E)</b> Reportable	Estimated	
hours per box, unless person is both a	n compensation	compensation	amount of	
week	Irom	from related	other	
(list any hours for related organizations below line) line)	the organization	organizations (W-2/1099-MISC)	compensation from the	
related # # #   Figure	#g       #g   (W-2/1099-MISC)		organization	
organizations   the last of th			and related	
organizations   Individual trus   Officer   Officer   Highest comptoner   Former   F			organizations	
(1) JEFF BAILEY 2.00			_	
BOARD PRESIDENT X X	0.	0.	0.	
(2) BILL LINDOW 1.00		0	_	
BOARD VICE PRESIDENT X X	0.	0.	0.	
(3) THEA THOMAS 1.00		0	_	
BOARD SECRETARY X X	0.	0.	0.	
(4) DENNIS ZADRA BOARD TREASURER  1.00 X X	0.	0.	_	
	0.	0.	0.	
(5) LIAM CORCORAN BOARD DIRECTOR X	0.	0.	0.	
(6) SHAWN GILMAN 1.00	0.	0.	0.	
BOARD DIRECTOR	0.	0.	0.	
(7) MICHAEL HAND 1.00	0.	0.	0.	
BOARD DIRECTOR X	0.	0.	0.	
(8) SUSAN HARVEY 1.00	0.	0.	<u></u>	
BOARD DIRECTOR X	0.	0.	0.	
(9) BLYTHE THOMAS 1.00		•		
BOARD DIRECTOR X	0.	0.	0.	
(10) RICH WHEELER 1.00				
BOARD DIRECTOR X	0.	0.	0.	
(11) RICHARD BLANKE 40.00		•		
EXECUTIVE DIRECTOR	12,500.	0.	1,000.	
(12) CHRISTA HOOVER 40.00	,		,	
EXECUTIVE DIRECTOR	28,161.	0.	3,000.	
	,		<u> </u>	

(A)

COPPER RIVER PRINCE WILLIAM SOUND 56-2502443 MARKETING ASSOCIATION Page 8 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC) from the related nstitutional trustee (W-2/1099-MISC) organization organizations (ey employee and related below organizations **Offlicer** line)

1b	Sub-total					 	<b>▶</b>	40,661.	0.	4,000.
С	c Total from continuation sheets to Part VII, Section A					0.	0.	0.		
d	Total (add lines 1b and 1c)					 	<u> </u>	40,661.	0.	4,000.

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

Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual Х 3 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? If "Yes," complete Schedule J for such individual Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person

#### **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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address N	ONE	<b>(B)</b> Description of services	<b>(C)</b> Compensation

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

Form 990 (2015)

0

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### Form 990 (2015) Part VIII Statement

## COPPER RIVER PRINCE WILLIAM SOUND MARKETING ASSOCIATION

	τVII	Check if Schedule O cont		or note to any lin	e in this Part VIII			
		Oncok ii Guiredaic O cont	anis a response	or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abor Noncash contributions included in lines Total. Add lines 1a-1f	1b	1,000.	565,089.			
				Business Code				
Program Service Revenue	2 a b c d e f							
	3	Investment income (including						
	4 5	other similar amounts) Income from investment of tax Royalties	x-exempt bond p	proceeds	3,629.			3,629.
	b c	Gross rents  Less: rental expenses  Rental income or (loss)		(ii) Personal				
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Other				
	С	assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)		<b>•</b>				
Other Revenue	8 a	Gross income from fundraising including \$	g events (not of 1c). See a					
Ò		Net income or (loss) from fund		<b>&gt;</b>				
	9 a	Gross income from gaming ac Part IV, line 19	ctivities. See					
		Less: direct expenses  Net income or (loss) from gam						
	10 a	Gross sales of inventory, less and allowances	returns a	~~~				
		Net income or (loss) from sale		<b></b>	575.	575.		
[		Miscellaneous Revenu	ie	Business Code				
	11 a							
	b							
	q							
		All other revenue <b>Total.</b> Add lines 11a-11d						
	12	Total revenue. See instructions.			569,293.	575.	0.	3,629.

# COPPER RIVER PRINCE WILLIAM SOUND MARKETING ASSOCIATION

Form 990 (2015)

Part IX | Statement of Functional Expenses

Secti	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All oth	er organizations must o	complete column (A).	
	Check if Schedule O contains a respon				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	101 222			
	and domestic governments. See Part IV, line 21	121,333.			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	44 000			
	trustees, and key employees	61,000.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	26,349.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	4,405.			
10	Payroll taxes	8,172.			
11	Fees for services (non-employees):				
а	Management				
b	Legal	7,902.			
С	Accounting	18,795.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	40 670			
	column (A) amount, list line 11g expenses on Sch O.)	42,679.			
12	Advertising and promotion	4,081. 13,009.			
13	Office expenses	17,928.			
14	Information technology	17,940.			
15	Royalties	14,363.			
16	Occupancy	42,161.			
17	Travel	42,101.			
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials  Conferences, conventions, and meetings	2,586.		1	
19 20		2,500		+	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,402.			
24	Other expenses. Itemize expenses not covered	-,			
	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	SUPPLIES/EQUIPMENT	28,944.			
b		-			
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	416,109.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

#### COPPER RIVER PRINCE WILLIAM SOUND MARKETING ASSOCIATION

Form 990 (2015)
Part X Balance Sheet

Pa	rt X	Balance Sheet				
		Check if Schedule O contains a response or note	e to any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		265,295.	1	4,719.
	2	Savings and temporary cash investments		370,295.	2	848,389.
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		438.	4	3,014.
	5	Loans and other receivables from current and for				
		trustees, key employees, and highest compensation	ted employees. Complete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualifi				
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section	on 501(c)(9) voluntary			
ş		employees' beneficiary organizations (see instr).	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7	
ğ	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		50.	9	50.
	10a	Land, buildings, and equipment: cost or other	1 [			
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 1			12	
	13	Investments - program-related. See Part IV, line 1	1		13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equa		636,078.	16	856,172.
	17	Accounts payable and accrued expenses		18,763.	17	85,673.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete P			21	
Se	22	Loans and other payables to current and former	officers, directors, trustees,			
Ĕ		key employees, highest compensated employees	s, and disqualified persons.			
Liabilities		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelate			23	
	24	Unsecured notes and loans payable to unrelated	third parties		24	
	25	Other liabilities (including federal income tax, pay	ables to related third			
		parties, and other liabilities not included on lines	17-24). Complete Part X of			
		Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		18,763.	26	85,673.
		Organizations that follow SFAS 117 (ASC 958)	, check here $ ightharpoonup$ and			
es		complete lines 27 through 29, and lines 33 and				
Fund Balances	27	Unrestricted net assets		617,315.	27	770,499.
Bal	28	Temporarily restricted net assets			28	
틷	29				29	
		Organizations that do not follow SFAS 117 (AS	6C 958), check here ▶ ☐			
þ		and complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds			30	
Ass	31	Paid-in or capital surplus, or land, building, or equ			31	
Net Assets or	32	Retained earnings, endowment, accumulated inc		645 045	32	BE 2 422
~	33	Total net assets or fund balances		617,315.	33	770,499.
	34	Total liabilities and net assets/fund balances		636,078.	34	856,172.

Form **990** (2015)

COPPER RIVER PRINCE WILLIAM SOUND MARKETING ASSOCIATION

Form 990 (2015)

56-2502443 Page **12** 

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			93.
2	Total expenses (must equal Part IX, column (A), line 25)	2			09.
3	Revenue less expenses. Subtract line 2 from line 1	3			84.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	61	7,3	15.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	77	0,4	99.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2015)

#### **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.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2015

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- 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.

If the organization answered "Yes," on 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.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

-	ection 501(c)(4), (5), or (6) organiza	tions: Complete Part III			
		RIVER PRINCE WIL:	LIAM SOUND	Emi	oloyer identification number
		NG ASSOCIATION			56-2502443
Par	t I-A   Complete if the org	janization is exempt und	er section 501(c)	or is a section 527	
2	Provide a description of the organiz Political expenditures Volunteer hours			<b>&gt;</b>	\$
Par	t I-B Complete if the org	ganization is exempt und	er section 501(c)	(3).	
1 1	Enter the amount of any excise tax	-		. ,	\$
	Enter the amount of any excise tax				
	f the organization incurred a sectio				
4a \	Was a correction made?				Yes No
	f "Yes," describe in Part IV.		or coation FO1(a)	avaant aaatian E01	1/2//2/
	t I-C Complete if the org Enter the amount directly expended	ganization is exempt und		•	• • • • • • • • • • • • • • • • • • • •
3 - 4   5   5   6	Enter the amount of the filing organ exempt function activities  Fotal exempt function expenditures ine 17b  Did the filing organization file Form Enter the names, addresses and ermade payments. For each organization filutions received that were propolitical action committee (PAC). If	a. Add lines 1 and 2. Enter here a  1120-POL for this year?  Inployer identification number (Ell tion listed, enter the amount paid omptly and directly delivered to a	nd on Form 1120-POL N) of all section 527 po I from the filing organiz a separate political org	blitical organizations to whe zation's funds. Also enter anization, such as a separation service.	\$ Yes No ich the filing organization the amount of political
	(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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2015

#### COPPER RIVER PRINCE WILLIAM SOUND

Schedule C (Form 990 or 990-EZ) 2015	MARKETING .	ASSOCIATION		56-2	502443 Page 2
Part II-A   Complete if the org	ganization is exe	empt under sectio	n 501(c)(3) and fil	ed Form 5768(e	election under
section 501(h)).					
A Check 🕨 📖 if the filing organiza	ition belongs to an a	filiated group (and list ir	n Part IV each affiliated	group member's nam	ne, address, EIN,
expenses, and sha	re of excess lobbying	g expenditures).			
B Check 🕨 📖 if the filing organiza	tion checked box A	and "limited control" pro	ovisions apply.		1
	ts on Lobbying Exp ditures" means amo	enditures ounts paid or incurred.	)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion	(grass roots lobbying)			
<b>b</b> Total lobbying expenditures to infl	uence a legislative b	ody (direct lobbying)			
c Total lobbying expenditures (add I					
<b>d</b> Other exempt purpose expenditur			i		
e Total exempt purpose expenditure					
f Lobbying nontaxable amount. Ent					
If the amount on line 1e, column (a)		bbying nontaxable am			
Not over \$500,000	20% c	f the amount on line 1e			
Over \$500,000 but not over \$1,00	0,000 \$100,0	000 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,0	000 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17	ess over \$1,500,000.				
Over \$17,000,000					
•			•		
g Grassroots nontaxable amount (er	nter 25% of line 1f)				
h Subtract line 1g from line 1a. If zer	o or less, enter -0-				
i Subtract line 1f from line 1c. If zero	o or less, enter -0				
j If there is an amount other than ze	ero on either line 1h o	r line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
(Some organizations t	hat made a section	veraging Period Under 501(h) election do not rate instructions for li	have to complete all	of the five columns b	pelow.
	Lobbying Exp	enditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	(c) 2014	( <b>d)</b> 2015	(e) Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
Grassroots ceiling amount					

Schedule C (Form 990 or 990-EZ) 2015

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2015 MARKETING ASSOCIATION 56-250244

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)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
of the lobbying activity.	Yes	No	Amo	unt
1 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:				
a Volunteers?				
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
<ul><li>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li><li>i Other activities?</li></ul>				
j Total. Add lines 1c through 1i				
2a 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				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	504( )	(F)		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ection	
			Yes	No
				37
1 Were substantially all (90% or more) dues received nondeductible by members?		1		X
<ul><li>Were substantially all (90% or more) dues received nondeductible by members?</li><li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li></ul>			Х	
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section</li> </ul>	on 501(c)	2 3 (5), or se	ection	Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	on 501(c) "No," Of	2 3 (5), or se R (b) Par	ection	Х
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> </ul>	on 501(c) "No," Of	2 3 (5), or se R (b) Par	ection	Х
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> </ul>	on 501(c) "No," Of	2 3 (5), or se R (b) Par	ection	Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  1 Dues, assessments and similar amounts from members  2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	on 501(c) "No," Of	2 3 (5), or se R (b) Par	ection	Х
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>Current year</li> </ul>	on 501(c) "No," Of	2 3 (5), or se R (b) Par	ection	Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  1 Dues, assessments and similar amounts from members  2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	on 501(c) "No," OF	2 3 (5), or se R (b) Par	ection	Х
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>Current year</li> <li>Carryover from last year</li> </ul>	on 501(c) "No," Of	2 3 (5), or se R (b) Par 1 2a 2b 2c	ection	Х
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> </ul>	on 501(c) "No," Of	2 3 (5), or se R (b) Par 1 2a 2b 2c	ection	Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	on 501(c) "No," Of	2 3 (5), or se R (b) Par 1 2a 2b 2c	ection	Х
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### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

COPPER RIVER PRINCE WILLIAM SOUND MARKETING ASSOCIATION

Employer identification number 56-2502443

Pa	rt I Organizations Maintaining Donor Adviso	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, li	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor		
	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the or		
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year ▶		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cons	servation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conserva	tion easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	tion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of	of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue staten	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	chibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	I gain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
h	Assets included in Form 990 Part Y		

Pai	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	reasures,	or Oth	er Simi	lar Asse	<b>ts</b> (contii	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ls, chec	k any of the	following th	at are a s	ignifican	use of its	collectio	n item	S
	(check all that apply):										
а	Public exhibition	d		Loan or exc	change progr	rams					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	the organizat	tion's exe	mpt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	asures, or oth	ner simila	r assets				
	to be sold to raise funds rather than to be ma	aintained as part of t	the orga	nization's c	ollection?				Yes		No
Pai	t IV Escrow and Custodial Arran								line 9, oı	r	
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contributio	ns or other a	ssets not	included	ł			
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
									Amoun	t	
С	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII.										]
Pai											
		(a) Current year		rior year	(c) Two year	-		vears back	(e) Four	rvears	back
1a	Beginning of year balance	(,	(-)	<b>,</b>	1 7		(/	,	χ-,		
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
	Other expenditures for facilities										
C	·										
	. •										
	Administrative expenses  End of year balance										
_	Provide the estimated percentage of the cur	ront voor and balans	l (line 1	a column (	a)) hold ac:						
2				g, coluitii (	a)) Helu as.						
	Board designated or quasi-endowment	%	_%								
	Permanent endowment	<del></del> i									
С	Temporarily restricted endowment	%									
0-	The percentages on lines 2a, 2b, and 2c sho		-41 41				la a	! <b>!</b> !			
3a	Are there endowment funds not in the posse	ession of the organiza	ation tha	at are neid a	and administ	erea for t	ne organ	ization	1	V	NI-
	by:								0-(1)	Yes	No
	(i) unrelated organizations										
	(ii) related organizations										
_	If "Yes" on line 3a(ii), are the related organiza				′				3b		
Bo:	Describe in Part XIII the intended uses of the		owment	tunas.							
Pai	t VI Land, Buildings, and Equipm				0 5 00		" 40				
	Complete if the organization answere					<del>-                                    </del>		.			
	Description of property	(a) Cost or o		` ,	t or other	1 ' '	ccumula		( <b>d</b> ) Boo	k value	е
		basis (investr	nent)	basis	(other)	de	preciatio	1			
	Land										
	Buildings										
	Leasehold improvements										
	Equipment										
	Other										_
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X. colur	nn (B). line	10c.)			▶			0.

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 MARKETING A	SSOCIATION		56	-2502443 <sub>Page</sub> :
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value	uation: Cost or end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.	5 000 D 1 11 / 11			
Complete if the organization answered "Yes"  (a) Description of investment	(b) Book value			d-of-year market value
	(b) book value	(C) Method of Valu	dation. Cost of end	1-01-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8) (9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990 Part IV line	11d See Form 990 P:	art X line 15	
	Description	114. 000 1 01111 000, 1 1	are 74, 1110 101	(b) Book value
(1)	•			. ,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		<b>&gt;</b>	
Part X Other Liabilities.	,		,	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 9	990, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ........................▶ 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

5

	COPPER RIVER PRINCE WILLIAM	SO	UND		
Sche	dule D (Form 990) 2015 MARKETING ASSOCIATION			56-	2502443 Page
Pai	t XI Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Revenue per R	eturr	າ.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	572,667
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
	Donated services and use of facilities	2b			
	Recoveries of prior year grants	2c			
	Other (Describe in Part XIII.)	2d	3,374.		
	Add lines 2a through 2d			2e	3,374
3	Subtract line 2e from line 1			3	569,293
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

c Add lines 4a and 4b

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 419,483. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: a Donated services and use of facilities **b** Prior year adjustments 2c c Other losses d Other (Describe in Part XIII.) 3,374. e Add lines 2a through 2d 416,109. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) c Add lines 4a and 4b 416,109. 5 Total expenses, Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

#### Part XIII Supplemental Information.

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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART X, LINE 2:

THE ASSOCIATION IS ORGANIZED UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE AS A NONPROFIT, TAX EXEMPT ORGANIZATION. THE ASSOCIATION IS NOT CLASSIFIED AS A PRIVATE FOUNDATION. THE ORGANIZATION FOLLOWS THE PROVISIONS OF FASB ASC 740 INCOME TAXES, AND MANAGEMENT BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN. THE ORGANIZATION'S FEDERAL INCOME TAX RETURNS (FORM 990) ARE SUBJECT TO POSSIBLE EXAMINATION BY THE INTERNAL REVENUE SERVICE UNTIL THE EXPIRATION OF THE RELATED STATUTE OF LIMITATIONS ON THOSE TAX RETURNS, WHICH, IN GENERAL, HAVE A THREE-YEAR STATUTE OF LIMITATIONS.

### COPPER RIVER PRINCE WILLIAM SOUND

Schedule D (Form 990) 2015	MARKETING ASSOCIATION	56-2502443 Page 5
Schedule D (Form 990) 2015  Part XIII   Supplemental Info	ormation (continued)	
		2 274
COST OF GOODS SOLD		3,374.
PART XII, LINE 2D	- OTHER ADJUSTMENTS:	
COST OF GOODS SOLD		3,374.
		_

#### SCHEDULE I (Form 990)

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization COPPER RI  MARKETING			ОИИО				Employer identification number $56-2502443$
Part I General Information on Grants a						· ·	
<ol> <li>Does the organization maintain records criteria used to award the grants or assis</li> <li>Describe in Part IV the organization's pro</li> </ol>	stance?				-	sistance, and the selec	tion X Yes No
Part II Grants and Other Assistance to	<del>-</del>				anization answered "	Yes" on Form 990, Part	IV, line 21, for any
recipient that received more than a 1 (a) Name and address of organization or government	\$5,000. Part II car ( <b>b)</b> EIN	c) IRC section if applicable	tional space is need (d) Amount of cash grant	ded.  (e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRINCE WILLIAM SCIENCE CENTER PO BOX 705 CORDOVA, AK 99574	92-0129853	501(C)(3)	92,428.	0.			FISH PASSAGE SONOR SURVEY PROJECT
ALASKA COMMUNITY FOUNDATION 3201 C STREET, SUITE 110 ANCHORAGE, AK 99503	92-0155067	501(C)(3)	10,000.	0.			CORDOVA CENTER FUND
COPPER RIVER WATERSHED PROJECT PO BOX 1560 CORDOVA, AK 99574	92-0162546	501(C)(3)	6,114.	0.			MARKETING PROJECTS
CORDOVA DISTRICT FISHERMEN UNITED PO BOX 939 CORDOVA, AK 99574	92-0035037	501(C)(3)	5,460.	0.			SCHOLARSHIP AND BUOY FUND DONATIONS
2 Enter total number of section 501(c)(3) a	I Ind government o	<u>I</u> rganizations listed in tl	ne line 1 table		<u> </u>	<u> </u>	▶ 4.

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2015) MARKETING ASSO	OCIATION				56-2502443	Page 2
Part III Grants and Other Assistance to Domestic Individu Part III can be duplicated if additional space is neede		organization answ	vered "Yes" on Form 9	990, Part IV, line 22.		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash	n assistance
Part IV Supplemental Information. Provide the information	required in Part I, lir	ne 2, Part III, columi	n (b), and any other a	dditional information.		
PART I, LINE 2:						
COPPER RIVER PRINCE WILLIAM SOUNI	D MARKETIN	G ASSOCIA	TION GRANTS	FUNDING		
THROUGH A PROJECT PROPOSAL SYSTEM	M. PROPOSA	LS ARE REV	VIEWED BY T	HE DIRECTORS,		
SELECTED AND VOTED ON. CONTRACTS	AND TIMEL	INES ARE I	ESTABLISHED	BY THE		
EXECUTIVE DIRECTOR AND THE GRANTI	EE. ORIGIN	AL INVOICE	ES ARE REQU	IRED FOR		
REIMBURSEMENT. GRANT FUNDS ARE AV	VAILABLE F	OR DISBUR	SEMENT ON A	MONTHLY		
BASIS OVER THE COURSE OF THE PRO	POSED PROJ	ECT. THE	PROPOSAL, T	HE CONTRACT		
AND THE FINAL REPORT DOCUMENT THE	E GRANT AN	D PROPOSAI	<b>ւ</b> .			

#### 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 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. COPPER RIVER PRINCE WILLIAM SOUND MARKETING ASSOCIATION

**Employer identification number** 56-2502443

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: EFFECTIVE MARKETING, QUALITY ENHANCEMENT, RESEARCH AND COOPERATIVE PARTNERSHIPS. FORM 990, PART VI, SECTION A, LINE 2: ONE DIRECTOR IS THE DAUGHTER OF EXECUTIVE DIRECTOR. FORM 990, PART VI, SECTION A, LINE 6: A PERSON MAY BECOME A VOTING MEMBER OF THE ORGANIZATION BY: HOLDING AN AREA E PERMIT AND PAYING AN ANNUAL MEMBERSHIP LEVY OF ONE PERCENT (1%) OF ANNUAL EX-VESSEL SEAFOOD SALES; OR PAYING A MEMBERSHIP FEE. FORM 990, PART VI, SECTION A, LINE 7A: VOTING MEMBERS ANNUALLY ELECT DIRECTORS TO SERVE ON THE BOARD. FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WILL BE PRESENTED TO THE BOARD AT THE FIRST BOARD MEETING FOLLOWING COMPLETION OF THE 990, WHICH MAY NOT BE BEFORE THE REQUIRED FILING DATE. FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS AND STAFF ARE REQUESTED TO DIVULGE CONFLICTS AT BOARD MEETINGS.

EXECUTIVE PERFORMANCE AND COMPENSATION IS REVIEWED BY THE BOARD ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15A:

MARKETING ASSOCIATION  JPON CONCLUSION OF THE REVIEW, THE BOARD DETERMINES THE  FORM 990, PART VI, SECTION C, LINE 18:	S6-2502443  RELEVANT SALARY.
FORM 990, PART VI, SECTION C, LINE 18:	RELEVANT SALARY.
ORGANIZATION'S FORMS 1024 AND 990 ARE AVAILABLE TO THE	PUBLIC UPON REQUEST.
FORM 990, PART VI, SECTION C, LINE 19:	
OCCUMENTS ARE HOUSED AT THE ORGANIZATION'S OFFICE IN CO	RDOVA, ALASKA AND
MADE AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
MARKETING CONSULTANTS	21,250
PUBLIC RELATIONS AND STRATEGIC PLANNING	19,159
BOAT CHARTERS	2,270
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	42,679.

Form 8	868 (Rev. 1-2014)					Page 2
<ul><li>If you</li></ul>	u are filing for an Additional (Not Automatic) 3-Month Ex	xtension, o	complete only Part II and check thi	s box	<b>&gt;</b>	X
Note.	Only complete Part II if you have already been granted an	automatic	3-month extension on a previously t	iled Form	8868.	
<ul><li>If you</li></ul>	u are filing for an Automatic 3-Month Extension, comple					
Part	II Additional (Not Automatic) 3-Month E	xtensio	<b>n of Time.</b> Only file the origin	al (no co	opies needed).	
			Enter filer's	identifyir	ng number, see in	structions
Type o				Employe	identification num	ber (EIN) or
print	COPPER RIVER PRINCE WILLIAM					
File by the					56-25024	43
due date filing your return. Se	number, street, and room or suite no. If a P.O. box, s	see instruc	tions.	Social se	curity number (SS	N)
instruction	City, town or post office, state, and ZIP code. For a f	foreign add	lress, see instructions.			
	CONDOVA, AR 33374					
Enter th	ne Return code for the return that this application is for (fi	lo a conara	te application for each return)			0 1
Enterti	ie neturii code for the return that this application is for (iii	е а ѕерага	tte application for each return)			[ • ] ± ]
Applica	ation	Return	Application			Return
Is For	2001	Code	Is For			Code
	90 or Form 990-EZ	01	101 01			Code
Form 9		02	Form 1041-A			08
	720 (individual)	03	Form 4720 (other than individual)			09
Form 9	,	04	Form 5227			10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	90-T (trust other than above)	06	Form 8870			12
STOP!	Do not complete Part II if you were not already grante	d an autor	natic 3-month extension on a prev	iously file	ed Form 8868.	
	THE ORGANIZATI	ON				
	books are in the care of $\blacktriangleright$ PO BOX 199 - C	ORDOV	A, AK 99574			
Tele	phone No. ► (907) 424-3459		Fax No. ▶			
<ul><li>If the</li></ul>	e organization does not have an office or place of busines	ss in the Ur	nited States, check this box		<b>&gt;</b>	
<ul><li>If thi</li></ul>	s is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole group,	check this
box 🕨	. If it is for part of the group, check this box		ach a list with the names and EINs o	f all memb	ers the extension	s for.
	request an additional 3-month extension of time until		15, 2017		20 2016	
5 F	or calendar year, or other tax year beginning	JUL 1	, 2015 , and endin	g JUN	30, 2016	<u> </u>
6 If	the tax year entered in line 5 is for less than 12 months,	check reas	on: Initial return	Final r	eturn	
l	Change in accounting period					
	tate in detail why you need the extension	TMTON	AT MINE DO BINIGO	DD ED 3	DING BUE	
_	THE ORGANIZATION REQUESTS ADD	TITON	AL TIME TO FINISH	PREPA	RING THE	
_	RETURN					
_						
-						
-						
8a If	this application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069	enter the tentative tax less any			
	onrefundable credits. See instructions.	, or 0003,	enter the tentative tax, less any	8a	\$	0.
_	this application is for Forms 990-PF, 990-T, 4720, or 606	9 enter an	v refundable credits and estimated	- Ju	<b>—</b>	
	ax payments made. Include any prior year overpayment a		•			
	previously with Form 8868.	morrod do t	a croant and any amount paid	8b	\$	0.
-	calance due. Subtract line 8b from line 8a. Include your p	ayment wit	th this form, if required, by using		+	
	FTPS (Electronic Federal Tax Payment System). See insti	•	,, <b></b>	8c	\$	0.
			st be completed for Part II		*	
Under p	enalties of perjury, I declare that I have examined this form, inclu , correct, and complete, and that I am authorized to prepare this f		-	-	f my knowledge and	belief,
Signatur				Date		
Signatal	Title P	<b>-</b>		Duto	Form <b>8868</b> (F	Rev. 1-2014\