GAMB001 03/18/2010 4 10 PM

Form

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2009

Open to Public

inter	nai Nevenue	Service	The organization may have to use a copy of this return to satisfy	state reporting	cquirente	7110	mapection
Α	For the 200	9 calendar y	ear, or tax year beginning , and ending				
В	Check if applica		C Name of organization Gambell Native Store		D	Employ	er identification number
\Box	Address change	e use iRS	NATIVE VILLAGE OF GAMBELL				
$\overline{\Box}$	Name change	label or print or	Doing Business As			92-	0006674
\equiv	•	type.	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E	Telepho	ne number
\Box	Initial return	See	PO Box 109			907	-985-5211
	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4		G	Gross receip	ots \$ 4,024,468
\Box	Amended return		Gambell AK 99742				
$\overline{\Box}$	Application pen	ding F Nam	e and address of principal officer		H(a) Isthisa	group return for
ш	Application pen	uiiig				affiliates	
					H((b) Are all a	
							attach a list (see instructions)
ī	Tax-exempt	status X	501(c) (4) ◄ (insert no) 4947(a)(1) or 527				,
.1	Website: ▶		100(0)		— Н	(c) Group e	exemption number
	Type of organi	-	rporation Trust Association Other	L Year of format			M State of legal domicile
	art i	Summa		Tear or format			er otate or legal domicile
	T		he organization's mission or most significant activities				
	I	-	Y SERVICE				
8	٦	OPENONII	DBRVICE				
Jan							
Б			г				
ő		ck this box		n 25% of its net	assets	1 . 1	
ಹ	1	i	members of the governing body (Rart VI, line 1a)			3	<u> </u>
ties			endent ment entitle governing body (Part VI, line 1b)			4	
Activities & Governance	5 Tota	I number of	employees Part V line Zal _ U			5	
Ac	6 Tota	I number of	olunteers (estimate if necessary)			6	
			हिंदु bus्री हिन्दी regerue ကြိမ်ကြီPart ကျို့။, column (C), line 12			7a	
			siness taxable income from Form 990-T, line 34			7b	0
			gran OGOEM an UT	F	nor Year	-+	Current Year
P				-			2 620 550
Revenue	1		revenue (Part VIII, line 2g) ne (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	217	000	3,628,550
Š	ľ		317,		362,156		
_	1	er revenue (F	927,		33,762		
			add lines 8 through 11 (must equal Part VIII, column (A), line 12)		,244,	520	4,024,468
	1		ar amounts paid (Part IX, column (A), lines 1–3)				
		•	or for members (Part IX, column (A), line 4)				
es	15 Sala	•	ompensation, employee benefits (Part IX, column (A), lines 5–10)		170,	729	192,164
Š	16a Prof	essional fun	fraising fees (Part IX, column (A), line 11e)				
Expenses	b Tota	ıl fundraısıng	expenses (Part IX, column (D), line 25) ▶				
ш	17 Othe	er expenses	(Part IX, column (A), lines 11a-11d, 11f-24f)		<u>,418,</u>		3,262,427
	1		Add lines 13–17 (must equal Part IX, column (A), line 25)		,589,		3,454,591
	19 Rev	enue less ex	penses Subtract line 18 from line 12		-344,		569,877
Net Assets or Fund Balances					g of Current		End of Year
Sset	20 Tota	ıl assets (Pa	•	· -	<u>,442,</u>		2,298,328
E S	21 Tota	ıl lıabılıtıes (F	art X, line 26)		<u>,231,</u>		2,420,534
			d balances Subtract line 21 from line 20		<u>-788,</u>	668	-122,206
<u> </u>	art II	Signatu	re Block				
			ties of perjury, I declare that I have examined this return, including accompanying sched is true, correct, and complete, Declaration of preparer (other than officer) is based on all				
			is true, correct, and complete becaration of preparer (other trial officer) is based on all	ii iiioiiiiadoii oi wi	iicii piepaie	ı ilas alıy	. I I
Sig			Judget Mester			_	123/10
He	re		re di officer			Date	· •
			DAJ. Austin, AUICA Dre. for MARY Ungoth, M	ge. of G	AMP	77 - 17 0	strue Store
		Type o	print name and title				<u> </u>
D -	:	Preparer's	Dat		Check if		Preparer's identifying number (see instructions)
Pa		signature	7		self- employed	▶ □	,,
	eparer's	Firm's norm	for yours. This tax return			EIN ▶	
US	e Only	Firm's name if self-emplo	(or yours			Phone	·
		address, an				no ►	
May	the IRS di	scuss this re	turn with the preparer shown above? (see instructions)				Yes No
For	Privacy A		rwork Reduction Act Notice, see the separate instructions.			- ··-· ··	Form 990 (20(9)
DAA	٠ -	•	•				

4d Other program services (Describe in Schedule O)

(Expenses \$ 3,454,591 including grants of \$

4e Total program service expenses ▶ 3,454,591

Form **990** (2009)

) (Revenue \$

Form	990 (2009) Gambell Native Store 92-0006674			P	<u>age 3</u>
Pa	rt 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,"		_		v
,	complete Schedule A		1		$\frac{\mathbf{x}}{\mathbf{x}}$
2	Is the organization required to complete Schedule B, Schedule of Contributors?		2_	\vdash	
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? If "Yes," complete		᠆		
•	Schedule C, Part II		4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)		┪		
•	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		5	Ì	х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have		Ť		
•	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"				
	complete Schedule D, Part I		6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,				
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		7		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, 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 term, permanent, or				
	quasi-endowments? If "Yes," complete Schedule D, Part V		10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,				
	VII, VIII, IX, or X as applicable		11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete				
	Schedule D, Part VI				
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII				
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII				
•	Did the organization report an amount for other assets related 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				
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		<u> </u>		
400	Schedule D, Parts XI, XII, and XIII	/ !!! / !!	12	ļļ	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes No			
42	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A X	1		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		14a		
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		146		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		14b	\vdash	
10	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		15		х
16	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		16		x
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

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

٥٩	If 14 Checklist of Required Schedules (Continued)			
	Dilling and the state of the control		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 12 if "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the		-	
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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 25	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	and the second s			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		_X_
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? 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 a grant selection committee member, or to a person related to such an individual?	1	İ	
	If "Yes," complete Schedule L, Part III	27	ļ	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	ļ	<u> </u>
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 of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			.
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			-
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		x
	Part I	31		
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	J2	 	
JJ	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			<u> </u>
•	III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
-	organization? If "Yes," complete Schedule R, Part V, line 2	36		L
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	1		
	19? Note. All Form 990 filers are required to complete Schedule O	38	l	X

Га	st v Statements Regarding Other IKS Filings and Tax Compliance	—		
4	The the number and the Day 2 of Form 4000. Accord Commence and Toronto Males		Yes	No
1a	,			
	U.S. Information Returns. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b.	-		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1 1		
С		1c	3	X
20	gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	-"-		<u> </u>
2a				
b	Statements, filed for the calendar year ending with or within the year covered by this return [2a] If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 _b	1	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	-		
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
Ja	this return?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	"		
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		x
b	If "Yes," enter the name of the foreign country			
-	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
_	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions 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 services provided to the payor?	7a_		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7е		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		:	
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		_
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	-[]		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	-		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders Cross income from members or shareholders 11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them) Section 4047(-0/4) non-exercise block to the executation filtre Form 900 in liquid Form 10443	1,, 1	:	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	· 1		

Part VI

Form 990 (2009) Gambell Native Store

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	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?	2		X
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		<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		_X_
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		1	:
а	The governing body?	8a	<u> </u>	
b	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 organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		_ X
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	enue Code.)			
			Yes	No
10a		10a		X
b	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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		X
11a				
12a		12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		75
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			į
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			Ė
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ļ.,		.
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			į
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
<u> </u>	the organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17 40	List the states with which a copy of this Form 990 is required to be filed None Section 5104 required on accomplishing to make the Forms 1022 (or 1024 if analysish), 000, and 000 T (501/a)(2)a cally			
18	Section 6104 requires an organization to make its Forms 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			
10	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
20	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization GAMBELL NATIVE STORE PO BOX 109			
G.	AMBELL. AK 99742	907-98	5 _ 5	211

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."

X Check this box if the organization did not compensate any current officer, director, or trustee

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average	Posi	(C) Position (check all that apply)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of			
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
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	(A) ` Name and Title	(B) Average	Pos	(C) Position (check all that apply)			Reportable Reportable			(F) Estimated				
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	cor or a	mount of other mpensation from the ganization of related ganization	on n d	
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			<u> </u>											
	Total		<u>L</u>					▶						
2	Total number of individuals (i reportable compensation from	•		to th	ose	liste	d abo	_	who received more than \$1	00,000 in	1			
_												Y	es	No
3	Did the organization list any f employee on line 1a? If "Yes, For any individual listed on lin	" complete Sched	ule J	for s	uch	indiv	idual	-	-			3	\perp	X
•	the organization and related and individual	organizations grea	ter th	an \$	150,	0007	If "Y	es,'	' complete Schedule J for su			4	╧	x
5	Did any person listed on line services rendered to the orga	anızatıorı? If "Yes,"										5		x
<u>Sec</u> 1	ction B. Independent Contract Complete this table for your f compensation from the organ	ive highest compe	rısate	ed in	depe	nder	nt co	ntra	ctors that received more tha	n \$100,000 of	-			
		(A) and business address						Ľ	Descrip	(B) ution of services		((Compe	C) ensatio	n
								<u> </u>						
								_						
								_						
	Total number of independent	contractors (inclus	ding !	hut n	ot lin	nited	to th	1000	listed above) who received					
DAA	more than \$100,000 in comp		-									0 Eorm 9	90 /	2000

Pa	rt V	III Staten	nent of Reve	nue			·			
		,					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S S	1a	Federated can	ากลเดกร	1a						, , , , , , , , , , , , , , , , , , , ,
Contributions, gifts, grants and other similar amounts	h	Membership di	. •	1b						
	٥	Fundraising ev		1c						
	0	_		1d						
	a	Related organi								
ons	θ,	Government grants		1e						
uti	t	All other contribution and similar amounts		.						
tip				1f						
on	g		ns included in lines 1a-	1f :	\$	_				
$\overline{}$	h	Total. Add line	s 1a-1f			▶				
Program Service Revenue						Busn. Code				
ve	2a	Sales]	3,628,550	3,628,550		
₃ Re	b									
vice	С						······································			
Ser	d									
аш	6									
ogr	f	All other progra	am service rever	nue						
P	g	Total. Add line	s 2a-2f			•	3,628,550			
	3	Investment inc	ome (including d	lividend	ls, interes	t, and				
		other similar ai	mounts)			▶	361,396	361,396		
	4	Income from in	vestment of tax-	exemp	t bond pro	ceeds 🕨	··			
	5	Royalties			-	▶ [
		·	(ı) Real		(II) P	ersonal				
	6a	Gross Rents								
	ь	Less rental exps								
	c	Rental inc or (loss)	• • • • • • • • • • • • • • • • • • • •							
	d	Net rental inco	me or (loss)			■			:	
		Gross amount from	(i) Securities		(11)	Other				,
		sales of assets	(,, 0000		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	760				
	_	other than inventory	· · · · · · · · · · · · · · · · · · ·			,,,,				
	b	Less cost or other								
	_	basis & sales exps			 	760				
	١.	Gain or (loss)	>		L	700	760	760		
	đ	Net gain or (los	·	. 1			760	760	:	
ņ	8a		om fundraising ever	าเร						
eni		(not including \$		-						
Rev			eported on line 1c)							
Other Revenue		See Part IV, line		а						
흕		Less direct ex	-	b						
_			(loss) from fundi	- 1	events	•				
	9a		om gaming activities							
		See Part IV, line		а						
		Less direct ex		b						
	С	Net income or	(loss) from gami	ng acti	vities					
	10a	Gross sales of	inventory, less							
		returns and all	owances	а						
	b	Less cost of g	oods sold	ь						
	С	Net income or	(loss) from sales	of inve	entory					
		Misc	ellaneous Revenue			Busn. Code				
	11a	NSF incom	ne				32,058	32,058	<u> </u>	
	ь	Misc. Inc	ome				1,704	1,704		
	С									
	d	All other reven	ue							
	е	Total. Add line	s 11a–11d			•	33,762			
	12	Total Revenue	e. See instruction	18			4,024,468	***************************************	0	0

Part IX Statement of Functional Expenses

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

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

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
	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 governments and			•					
•	organizations in the U.S. See Part IV, line 21				‡ ‡				
2	Grants and other assistance to individuals in								
_	the U.S. See Part IV, line 22				III				
3	Grants and other assistance to governments,								
-	organizations, and individuals outside the				‡				
	U S See Part IV, lines 15 and 16				‡				
4	Benefits paid to or for members								
5	Compensation of current officers, directors,		1						
•	trustees, and key employees								
6	Compensation not included above, to disqualified			<u></u>					
•	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)		Ì						
7	Other salaries and wages	172,328	172,328						
8	Pension plan contributions (include section 401(k)				· · · · · · · · · · · · · · · · · · ·				
J	and section 403(b) employer contributions)	112	112						
9	Other employee benefits	4,818	4,818	 					
10	Payroll taxes	14,906	14,906		 				
	•	14,300	11,500		 				
11	Fees for services (non-employees)								
a	Management								
b	Legal	11,831	11,831						
C	Accounting	11,031	11,031	 					
d	Lobbying				1				
0	Professional fundraising services. See Part IV, line 17				1				
f	Investment management fees			······································					
g	Other	1 011	1 011	 					
12	Advertising and promotion	1,011	1,011						
13	Office expenses	39,130	39,130						
14	Information technology								
15	Royalties								
16	Occupancy	73,763	73,763						
17	Travel	25,390	25,390						
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	28,900	28,900						
20	Interest	35,140	35,140	<u> </u>					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	53,222	53,222						
23	Insurance	37,121	37,121	· · · · · · · · · · · · · · · · · · ·					
				-					
24	Other expenses Itemize expenses not				‡				
	covered above (Expenses grouped together				‡				
	and labeled miscellaneous may not exceed								
	5% of total expenses shown on line 25 below)				<u></u>				
а	Cost of sales	2,723,296	2,723,296						
b	Inventory loss	103,697	103,697						
С	Outside Labor	76,724	76,724						
d	Discounts	64,805	64,805						
0	Repair & maintenance	51,966	51,966						
_	All other expenses	-63,569	-63,569						
25		3,454,591	3,454,591						
26			, -						
	SOP 98-2 Complete this line only if the								
	organization reported in column (B) joint costs]				
	from a combined educational campaign and fundraising solicitation								
DAA		<u> </u>			Form 990 (2009)				

Pi	art X	Balance Sheet		0000071		rage 11
		•		(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing	· · ·	109,153	1	45,600
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		361,924	4	251,475
	5	Receivables from current and former officers, directors, tro	ustees, key			
		employees, and highest compensated employees. Comple	· · · · · · · · · · · · · · · · · · ·			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined up	nder section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B				
•		Part II of Schedule L			6	
St.	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		1,212,738	8	1,303,416
Ä	9	Prepaid expenses and deferred charges			9	
		Land, buildings, and equipment cost or	1			·
		other basis Complete Part VI of Schedule D	10a 1,123,904			
	ь	Less accumulated depreciation	10b 883,344	283,893	10c	240,560
	11	Investments—publicly traded securities		<u> </u>	11	•
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11	Ī		13	
	14	Intangible assets	<u>[</u>		14	
	15	Other assets See Part IV, line 11	Ì	475,192	15	457,277
	16	Total assets. Add lines 1 through 15 (must equal line 34)	į.	2,442,900	16	2,298,328
\dashv	17	Accounts payable and accrued expenses	-	3,231,568	17	1,590,044
Í	18	Grants payable	ļ.		18	
	19	Deferred revenue	ļ į		19	
	20	Tax-exempt bond liabilities	<u> </u>		20	
ွှ	21	Escrow or custodial account liability Complete Part IV of S	Schedule D		21	
Liabilities		Payables to current and former officers, directors, trustees	F			
ا≝	22	employees, highest compensated employees, and disqual				
<u>ia</u>		persons Complete Part II of Schedule L	illeo :		22	
-	23	Secured mortgages and notes payable to unrelated third p	narties		23	
	24	Unsecured notes and loans payable to unrelated third part	Ti di		24	
	25	Other liabilities Complete Part X of Schedule D			25	830,490
i	26	Total liabilities. Add lines 17 through 25	<u> </u>	3,231,568	26	2,420,534
5		Organizations that follow SFAS 117, check here	and			2,020,001
ë		complete lines 27 through 29, and lines 33 and 34.	, a			
an	27	Unrestricted net assets			27	
3a	28	Temporarily restricted net assets	ŀ		28	
<u> </u>	29	Permanently restricted net assets	-		29	
5		Organizations that do not follow SFAS 117, check her	• ► X			
ᆫ		and complete lines 30 through 34.				
0	30	Capital stock or trust principal, or current funds		-443,719	30	-692,083
ets	31	Paid-in or capital surplus, or land, building, or equipment f	und	2.23,1.23	31	372,003
SS	32	Retained earnings, endowment, accumulated income, or or		-344,949		569,877
Net Assets or Fund Balances	33	Total net assets or fund balances	Julio, lulius	-788,668		-122,206
	JJ	rotal fiet assets of fully balafiles	<u> </u>	2,442,900		2,298,328

Form **990** (2009)

orm	990 (2009) Gambell Native Store	92-0006674		Pa	ge 12
Pa	rt XI Financial Statements and Reporting				
	,		_	Yes	No
1	Accounting method used to prepare the Form 990 X Cash	Accrual Other			
	If the organization changed its method of accounting from a prior year of	or checked "Other," explain in			
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by a	n independent accountant?	2a		_X
b	Were the organization's financial statements audited by an independent	t accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that as	ssumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selectio	n of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process	cess during the tax year, explain in			
	Schedule O				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the finan	ncial statements for the year were			
	issued on a consolidated basis, separate basis, or both				
	Separate basis Consolidated basis Both consolidate	d and separate basis			
3a	As a result of a federal award, was the organization required to undergo	an audit or audits as set forth in			İ
	the Single Audit Act and OMB Circular A-133?		3a		
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 st	eps taken to undergo such audits	3ь		

Form **990** (2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No 1545-0047
2009
Open to Public

Inspection

Name of the organization Employer identification number Gambell Native Store NATIVE VILLAGE OF GAMBELL 92-0006674 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. Part I (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) 2 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. line 7. Part II 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 through 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 Tax Year Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2с Number of conservation easements included in (c) acquired after 8/17/06 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? 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 Yes 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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. 1a 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 b 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 a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedule D (Form 990) 2009

240,560

e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Federal income taxes 830,490 \blacktriangleright Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

^{2.} FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

<u>Sche</u>	dule D (Form 990) 2009 Gambell Native Store	92-000667	14	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7_	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	
	rt XII Reconciliation of Revenue per Audited Financial Statemer	nts With Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	1	
c	Recoveries of prior year grants	2c	1	
ď	Other (Describe in Part XIV)	2d	1	
е	Add lines 2a through 2d		2е	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	 	
_	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a	Other (Describe in Part XIV)	4b	1	
b	,	40]	4c	
_	Add lines 4a and 4b Table source Add lines 2 and 4a (This must source Form 800, Root I, line 13.)		5	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) It XIII Reconciliation of Expenses per Audited Financial Statement	onte With Exponent por E		
		ents with Expenses per h	Cetuii	<u></u>
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	اما		
а	Donated services and use of facilities	2a	-	
b	Prior year adjustments	2b	-	
C	Other losses	2c	-	
d	Other (Describe in Part XIV)	2d	┨. ┆	
θ	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-	
b	Other (Describe in Part XIV)	4b	-	
С	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	<u> </u>
Pa	rt XIV Supplemental Information			
om	plete 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		
nd 2	b; Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2d and 4b Also complete		
nis p	art to provide any additional information			
	. – – – – – – – – – – – – – – – – – – –			
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Sche	dule	D (F	orm	990)	2009	•	Gar	mbe	11	Na	ati	ve	St	ore	Э						9	92-	00	06	67	4				Page 5
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Inspection

2009 Open to Public

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Employer identification number 92-0006674

Name of the organization

Gambell Native Store
NATIVE VILLAGE OF GAMBELL

Form 990, Part III, Line 4d - All Other Achievements

Community Service

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

ĠAMBELL Gambell Native Store

Book Group Summary 12/01/09 - 12/31/09

03/19/2010 3:30 PM

Page 1

FYE: 12/31/2009 Mth: 12/31/2009

Group	Cost Beginning	Cost Acquisitions	Cost Disposals	Cost Ending	Depreciation Prior	Depreciation Additions	Depreciation Reductions	Depreciation Ending
BUILDING	245,016 49	0.00	0.00	245,016 49	188,827 46	736 50		189,563.96
STORE AND OFFICE	148,515.97	0 00	0 00	148,515 97	129,686.62	672.96	0 00	130,359.58
TANK FARMS	719,742 67	0 00	0 00	719,742 67	556,625.51	2,861 71	0 00	559,487 22
VEHICLES	10,628 55	0.00	0.00	10,628.55	3,771.95	160.59	0 00	3,932.54
Grand Total	1,123,903 68	0 00	0 00	1,123,903 68	878,911.54	4,431.76	0 00	883,343 30