Mary Dewhirst

STATE OF ALASKA
CHARITABLE ORGANIZATION ANNUAL REGISTRATION FORM
SEPTEMBER 2, 2003 THROUGH SEPTEMBER 1, 2004

This form must be filed on or before September 1st as required by AS 45.68.010

RECEIVED
NOV 0 5 2003
DEPARTMENT OF LAW
OFFICE OF ATTORNEY GENERAL
3RD JUDICIAL DISTRICT
ANCHORAGE, ALASKA

NO REGISTRATION FEE

For forms and other related information, please visit our website at www.law.state.ak.us/consumer/

Return to: ALASKA DEPARTMENT OF LAW
ATTORNEY GENERAL'S OFFICE
1031 W. 4th Ave., Suite 200
Anchorage, AK 99501-1994

1. Organization name The Ted Stevens Foundation

2. Mailing address c/o Holmes Weddle & Barcott, 701 W. 8th Ave., Ste. 700
Anchorage, AK 99501
City State Zip

3. Street address (if different) 1221 R Street
Anchorage, AK 99501
City State Zip

4. Daytime phone (907) 274 - 0666

5. Is the organization a corporation? Yes [x] No [ ]

Year incorporated: 2000 year founded 2000 (If different than year incorporated).

State of incorporation Alaska

6. Purpose of organization:

[ ] School, college or other training
[ ] Cultural or historical
[ ] Health or other services to individuals
[ ] Youth activities
[ ] Business, professional, employee or fraternal
[ ] Sports, athletic, recreational or social
[ ] Conservation or environmental
[ ] Public opinion advocacy or legal aid
[x] Other, describe: To honor the career of Senator Ted Stevens by making the papers and mementos of his career available to the public and to support programs similar to those he has supported.

CV 609
453030

OK
[illegible]
5/3/04

3322161

7. Summarize the organization's programs & activities which support its stated purposes.
The Foundation, working with an Alaska University, will make the records and mementos of Ted Stevens' career available in Alaska. It will also support entities which seek to achieve goals similar to those pursued by Senator Stevens.

8. Describe how a citizen could verify or observe these activities.
Anyone wishing information should contact the Foundation offices.

9. Under what names (other than the name above) will contributions be solicited?
none

10. Names and titles of three officers or employees receiving the greatest compensation from the organization:
no officers are being paid
no employees

11. Attach a list of names, addresses and telephone numbers of officers of the organization unless (check if applicable): SEE ATTACHED

[ ] State non-profit corporation registration is current.

12. Number of expected solicitation campaigns during this registration period: 1-4

13. Paid solicitors under contract to provide fund raising services during this registration period:

(a) Mary Dewhirst , 894 N. Lexington St., Arlington, VA 22205, 703-243-0392
Name Address Phone

(b) Is there a written contract for services provided by the named paid solicitor?
Yes [X] No [ ] If yes, please attach a copy of the contract.

(c) How is the paid solicitor's compensation calculated under the contract? (describe formula or other method of calculating compensation): Compensation based on flat fee, plus a bonus based on total funds raised.

14. Federal tax exempt status: [ ] applied for on ____/____/____
[ ] Exemption not requested. [X] 501(c)(3) granted
[ ] Exemption denied. Federal employer ID no.________

15. Check the form number(s) of the return(s) filed with the Internal Revenue Service for the most recent fiscal year.

[ ] None [x] 990/990EZ [ ] Sched. A 990 [ ] 990-PF

[ ] 990-T [ ] 5227 [ ] 1041 [ ] 1041-A

[ ] 1041-B [ ] 4720 [ ] Other ________

16. (a) Did the organization file a form 990 for the most recent fiscal year?

[X] Yes [ ] No

(b) Did the organization have an audited financial report prepared for the most recent fiscal year?

[ ] Yes [x] No

(c) If you checked either 16(a) or 16(b) "Yes", ATTACH the most recently completed Form 990 and/or audited financial report to this registration, and skip to item 18. You MUST complete items 16(d)(1) through (10) and 17 if you answered "no" on both 16(a) and 16(b).

(d) Financial report for the accounting year ending:

(Date) 12/31/02

1. Gross revenue from all sources: $56,000.00
2. (Subtract) cost of goods sold: -0-
3. **TOTAL REVENUE:** $56,000.00
4. Gross fund raising expenses: -0-
5. (Subtract) cost of goods sold: -0-
6. Cost of solicitation: -0-
7. Management & general expenses: -0-
8. **AMOUNT APPLIED TO CHARITABLE PURPOSE:** -0-
9. Total expenses (Add Lines 6, 7, & 8): -0-
10. Surplus/(deficit)(subtract line 9 from line 3) $56,000.00

17. Did the organization pay for the fundraising services of any of the following "Outside Entities" during its most recent fiscal year?

(a) [x] No outside entity retained [ ] Contract employee

[ ] Paid solicitor (AS 45.68.900 (4) name & address:

____

____

(b) Was part of the amount paid to "Outside Entities" included in Line 16(d)(8) of the financial report? Yes [ ] No [x]

(c) If 17(b) is yes, indicate both of the following:
Total amount paid to "Outside Entities" -0-
Amount of line 16(d)(8) paid to "Outside Entities" -0-

18. I certify, under penalty of unsworn falsification in violation of AS 11.56.210, that the information contained in this Charitable Organization Registration Form is true and correct to the best of my knowledge.

DATE: 11/04/03

(SIGNATURE)

Timothy A. McKeever
(Print or type name)

President
(Print or type title)

Note: This form will be returned if items 1 through 18 are not completed or the responses are not legible. This form is not valid without a signature.

ALASKA

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
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)

▶ For organizations with gross receipts less than $100,000 and total assets less than $250,000 at the end of the year.

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

OMB No. 1545-1150

2002

Open to Public Inspection

A For the 2002 calendar year, or tax year beginning , 2002, and ending

B Check if applicable: Address change [ ] Name change [ ] Initial return [X] Final return [ ] Amended return [ ] Application pending [ ]

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

C Name of organization: THE TED STEVENS FOUNDATION

Number and street (or P.O. box, if mail is not delivered to street address): 1221 R STREET — Room/suite:

City or town, state or country, and ZIP + 4: ANCHORAGE, AK 99501

D Employer identification number 92-0172512

E Telephone number (907)274-0666

F Enter 4-digit (GEN) ▶

● *Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).*

G Accounting method: [X] Cash [ ] Accrual Other (specify) ▶

H Check ▶ [ ] if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Web site: ▶N/A

J Organization type (check only one) - [X] 501(c) (3) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

K Check ▶ [ ] if the organization's gross receipts are normally not more than $25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if $100,000 or more, file Form 990 instead of Form 990-EZ. ▶ $ 55,000.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 36 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received STMT 1			1	55,000.
	2	Program service revenue including government fees and contracts			2	
	3	Membership dues and assessments			3	
	4	Investment income			4	
	5 a	Gross amount from sale of assets other than inventory	5a			
	b	Less: cost or other basis and sales expenses	5b			
	c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)			5c	
	6	Special events and activities (attach schedule):				
	a	Gross revenue (not including $ ______ of contributions reported on line 1)	6a			
	b	Less: direct expenses other than fundraising expenses	6b			
	c	Net income or (loss) from special events and activities (line 6a less line 6b)			6c	
	7 a	Gross sales of inventory, less returns and allowances	7a			
	b	Less: cost of goods sold	7b			
	c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)			7c	
	8	Other revenue (describe ▶)			8	
	9	**Total revenue** (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) ▶			9	55,000.
Expenses	10	Grants and similar amounts paid (attach schedule)			10	
	11	Benefits paid to or for members			11	
	12	Salaries, other compensation, and employee benefits			12	
	13	Professional fees and other payments to independent contractors			13	
	14	Occupancy, rent, utilities, and maintenance			14	
	15	Printing, publications, postage, and shipping			15	
	16	Other expenses (describe ▶)			16	
	17	**Total expenses** (add lines 10 through 16) ▶			17	NONE
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)			18	55,000.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)			19	1,000.
	20	Other changes in net assets or fund balances (attach explanation)			20	
	21	Net assets or fund balances at end of year (combine lines 18 through 20) ▶			21	56,000.

Part II Balance Sheets - If Total assets on line 25, column (B) are $250,000 or more, file Form 990 instead of Form 990-EZ.

(See page 39 of the instructions.)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments STMT 2	1,000.	22	56,000.
23	Land and buildings		23	
24	Other assets (describe ▶)		24	
25	**Total assets**	1,000.	25	56,000.
26	**Total liabilities** (describe ▶)		26	
27	**Net assets or fund balances** (line 27 of column (B) must agree with line 21)	1,000.	27	56,000.

ALASKA

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Part III Statement of Program Service Accomplishments (See page 39 of the instructions.)

What is the organization's primary exempt purpose? STMT 3

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)
28 (Grants $)	28a	
29 (Grants $)	29a	
30 (Grants $)	30a	
31 Other program services (attach schedule) (Grants $)	31a	
32 **Total program service expenses** (add lines 28a through 31a) ▶	32	

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 40 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
STMT 4		-0-	-0-	-0-

Part V Other Information (Note the attachment requirement in General Instruction V, page 14.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		X
35	*If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.*		
a	Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	N/A	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a NONE		
b	Did the organization file **Form 1120-POL** for this year?	N/A	
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved. 38b N/A		
39	*501(c)(7) organizations.* Enter: a Initiation fees and capital contributions included on line 9 39a N/A		
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A		
40 a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ____; section 4912 ▶ ____; section 4955 ▶ ____		
b	*501(c)(3) and (4) organizations.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation.		X

c Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958 ▶ NONE

d Enter: Amount of tax on line 40c, above, reimbursed by the organization ▶ NONE

41 List the states with which a copy of this return is filed. ▶ ALASKA

42 The books are in care of ▶ TIM MCKEEVER Telephone no. ▶ 907-274-0666

Located at ▶ 701 WEST 8TH AVE, STE 700; ANCHORAGE, AK ZIP + 4 ▶ 99501

43 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041* - Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 NONE

Please Sign Here

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 10/13/03

▶ Timothy A McKeever ~~Treasurer~~ President
Type or print name and title.

Paid Preparer's Use Only

Preparer's signature ▶ Julie Schreingost	Date 10/10/03	Check if self-employed ▶ ☐	Preparer's SSN or PTIN (See Gen. Inst. W) P00146956
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ KPMG LLP 701 WEST 8TH AVENUE, SUITE 600 ALASKA		EIN ▶ 13-5565207	Phone no. ▶ 907 265 1200

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2002

Name of the organization: THE TED STEVENS FOUNDATION

Employer identification number: 92-0172512

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over $50,000 ▶	NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services ▶ NONE		

Part III Statements About Activities (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ ______ **(Must equal amounts on line 38, Part VI-A, or line i or Part VI-B.)**	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc.? (See **Note** below.)	3		X
4	Do you have a section 403(b) annuity plan for your employees?	4		X

Note: *Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.*

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 [ ] A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 [ ] A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 [ ] A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 [ ] A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 [ ] A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ ______

10 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b [ ] A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 [ ] An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)

13 [ ] An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 [ ] An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	NONE	1,000.	N/A	N/A	1,000.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	NONE	1,000.			1,000.
24 Line 23 minus line 17	NONE	1,000.			1,000.
25 Enter 1% of line 23	NONE	10.			

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶ 26a 20.

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ Stmt S 26b 980.

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c 1,000.

d Add: Amounts from column (e) for lines: 18 ______ 19 ______ 22 ______ 26b 980. ▶ 26d 980.

e Public support (line 26c minus line 26d total) ▶ 26e 20.

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** Statement S ▶ 26f 2.0000 %

27 **Organizations described on line 12:** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return. Enter the sum of such amounts for each year:**

(2001) ______ (2000) ______ (1999) NOT APPLICABLE (1998) ______

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year:

(2001) ______ (2000) ______ (1999) ______ (1998) ______

c Add: Amounts from column (e) for lines: 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c

d Add: Line 27a total ______ and line 27b total ______ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶ 27f

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return. Do not include these grants in line 15.**

Part V **Private School Questionnaire** (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768) NOT APPLICABLE

Check ▶ a [ ] if the organization belongs to an affiliated group.
Check ▶ b [ ] if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -	41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is -	**The lobbying nontaxable amount is -**
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities** NOT APPLICABLE
(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h.)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2002

Name of organization

THE TED STEVENS FOUNDATION

Employer identification number

92-0172512

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

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

General Rule -

[X] For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules -

[ ] For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of $5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year.) . . . . ► $ ________

Caution: *Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).*

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3)) -

List in Part I each contributor whose contributions total more than $1,000 during the year that were for a religious, charitable, etc., purpose. To determine the $1,000, aggregate all of a contributor's gifts for the year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that received **any** charitable contributions and listed **any** charitable contributors on Part I must also complete Part III.

If a section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list **any** charitable contributors on Part I, check the box on line A at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

Specific Instructions

Note: *You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.*

Part I. In column **(a)**, identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year; and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).

Part II. In column **(a)**, show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc., purposes must complete Parts I through III for those persons whose gifts totaled more than $1,000 during the year. Show also, in the heading of Part III, total gifts that were $1,000 or less and were for a religious, charitable, etc., purpose. *Complete this information only on the first Part III page.*

If an amount is set aside for a religious, charitable, etc., purpose, show in column **(d)** how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column **(e)** and explain the relationship between the two organizations.

Name of organization: THE TED STEVENS FOUNDATION

Employer identification number: 92-0172512

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	NORTHERN LIGHTS PAC 1 MASSACHUSETTS AVE NW #880 WASHINGTON, DC 20001	45,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
2	POLLOCK CONSERVATION FUND 1200 WESTLAKE AVE N. SUITE 900 SEATTLE, WA 98109	10,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
			Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
			Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
			Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
			Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

FORM 990EZ, PART II - CASH, SAVINGS AND INVESTMENTS

DESCRIPTION	BEGINNING OF YEAR	END OF YEAR
CASH	1,000.	56,000.
TOTALS	1,000.	56,000.

FORM 990EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO ASSIST IN EDUCATING AND INFORMING THE PUBLIC ABOUT THE CAREER OF SENATOR TED STEVENS, TO MAKE GRANTS TO OTHER PUBLIC CHARITIES AND TO PROVIDE PROGRAMS WHICH EDUCATE, ENCOURAGE COMMUNICATION, RELIEVE POVERTY AND PROMOTE COMMUNITY WELFARE THROUGHOUT THE STATE OF ALASKA AND THE UNITED STATES.

HE TED STEVENS FOUNDATION 92-0172512

ORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

AME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCOUNT
IM MCKEEVER 221 R STREET NCHORAGE, AK 99501	PRESIDENT 4 HRS/MTH	NONE	NONE	NONE
DITH OPINSKY 221 R STREET NCHORAGE, AK 99501	SECRETARY/TREASURER 2 HRS/MTH	NONE	NONE	NONE
LORIA MCCUTCHEON 221 R STREET NCHORAGE, AK 99501	DIRECTOR 2 HRS/MTH	NONE	NONE	NONE
REVOR MCCABE 221 R STREET NCHORAGE, AK 99501	DIRECTOR 2 HRS/MTH	NONE	NONE	NONE
VILLIAM PHILLIPS 221 R STREET NCHORAGE, AK 99501	DIRECTOR 2 HRS/MTH	NONE	NONE	NONE
ARRY BURTON 221 R STREET NCHORAGE, AK 99501	DIRECTOR 2 HRS/MTH	NONE	NONE	NONE
IITCH ROSE 221 R STREET NCHORAGE, AK 99501	DIRECTOR 2 HRS/MTH	NONE	NONE	NONE
	GRAND TOTALS	NONE	NONE	NONE

FEDERAL FOOTNOTES

FORM 990, SCHEDULE A, PART IV-A - SUPPORT SCHEDULE
LINE 26B: ONLY ONE CONTRIBUTION HAS BEEN RECEIVED. IT IS ANTICIPATED THAT THE TED STEVENS FOUNDATION WILL PASS THE PUBLIC SUPPORT TEST WITHIN THE FOUR YEAR DETERMINATION PERIOD.

STATE OF ALASKA

FRANK H. MURKOWSKI, GOVERNOR

DEPARTMENT OF LAW

OFFICE OF THE ATTORNEY GENERAL

1031 WEST 4TH AVENUE, SUITE 200
ANCHORAGE, ALASKA 99501-5903
PHONE: (907)269-5100
FAX: (907)276-3697

May 3, 2004

Timothy A. McKeever
The Ted Stevens Foundation
C/o Holmes Weddle & Barcott
701 W. 8th. Ave., Ste. 700
Anchorage, AK 99501

Re: Registration for 9/02/03 through 9/01/004

Dear Mr. McKeever:

We received the 2003-2004 charitable organization registration form for The Ted Stevens Foundation. This letter is to inform you that the charitable organization registration form is complete. However, a paid solicitor you named in your registration form, Mary Dewhirst, is not registered as a paid solicitor in Alaska. A paid solicitor may not solicit contributions of money or property for a charitable organization for compensation unless the paid solicitor is registered with the Alaska Department of Law. Please check to make sure Mary Dewhirst is registered prior to commencement of any solicitation campaign.

This is to advise you that Alaska law requires the following information be included in all paid solicitor contracts with a charitable organization:

> A paid solicitor may not solicit contributions on behalf of a charitable organization unless the paid solicitor executes a written contract with the charitable organization that clearly states the respective obligations of the paid solicitor and the charitable organization, including:
>
> (1) a statement of the method to be used to calculate the compensation of the paid solicitor; the statement must include a reasonable estimate of the expenses, including the estimated compensation of the paid solicitor, to be incurred, directly or indirectly, by the charitable organization in connection with the solicitation;
>
> (2) a statement of the charitable purpose to be *described in the solicitation*; and

(3) the percentage of the gross contributions that the charitable organization is to receive.

See Alaska Statute 45.68.020 (a)(1), (2) and (3). There was no contract included with your application for registration for The Ted Stevens Foundation. Please ensure that all future paid solicitor contracts are submitted to the Department of Law with the application materials and contain all of the information outlined above.

Your registration will expire on September 1, 2004. Alaska law requires a charitable organization to renew its registration each year to continue soliciting contributions of money or other property within the State of Alaska.

If you have any questions regarding your registration, please contact the undersigned at (907) 269-5207.

Sincerely,

GREGG D. RENKES
ATTORNEY GENERAL

By: Lisa C. Turrini

Lisa C. Turrini
Investigator

STATE OF ALASKA

FRANK H. MURKOWSKI, GOVERNOR

DEPARTMENT OF LAW

OFFICE OF THE ATTORNEY GENERAL

1031 WEST 4TH AVENUE, SUITE 200
ANCHORAGE, ALASKA 99501-5903
PHONE: (907)269-5100
FAX: (907)276-3697

May 3, 2004

Re: The Ted Stevens Foundation contract with Mary Dewhirst.

To Whom It May Concern:

The Ted Stevens Foundation listed Mary Dewhirst as a paid solicitor with whom they have contracted during the current registration period.

This is to inform you that under Alaska law, a person may not solicit contributions of money or property for a charitable organization for compensation unless the person is registered as a paid solicitor. "Solicit" means to request, directly or indirectly, and includes:

(A) an oral or written request;
(B) a request made by an announcement to the news media or by radio, television, telephone, telegraph, telefax machine, or other transmission of images or information;
(C) a request made in a handbill or other written advertisement that is distributed or posted;
(D) the sale of or attempt to sell, a membership, an advertisement, advertising space, or a tangible item by making a request for financial support for a charitable organization or purpose, by using or referring to the name of a charitable organization as a reason for making the request, or by making a statement that all or part of the sale proceeds will be used for a charitable purpose or benefit a charitable organization.

See Alaska Statute 45.68.010 and 45.68.900(5).

Alaska law requires that any person who solicits contributions for compensation, either orally or in writing, must be registered as a paid solicitor prior to engaging in the solicitations. Our records indicate that Mary Dewhirst is not currently registered as a paid solicitor with the Department of Law.

Please ensure that Mary Dewhirst becomes registered as a paid solicitor with the Department of Law **prior** to commencing any solicitations in Alaska on behalf of The Ted Stevens Foundation.

Additionally, Alaska law requires the following information be included in all paid solicitor contracts with a charitable organization:

A paid solicitor may not solicit contributions on behalf of a charitable organization unless the paid solicitor executes a written contract with the charitable organization that clearly states the respective obligations of the paid solicitor and the charitable organization, including

(1) a statement of the method to be used to calculate the compensation of the paid solicitor; the statement must include a reasonable estimate of the expenses, including the estimated compensation of the paid solicitor, to be incurred, directly or indirectly, by the charitable organization in connection with the solicitation;
(2) a statement of the charitable purpose to be *described in the solicitation*; and
(3) the percentage of the gross contributions that the charitable organization is to receive.

See Alaska Statute 45.68.020 (a)(1), (2) and (3). Please ensure that all future paid solicitor contracts be submitted to the Department of Law and ensure that they contain all of the information outlined above.

Thank you for your attention to this matter.

Sincerely,

GREGG D. RENKES
ATTORNEY GENERAL

By: Lisa C. Turrini
Lisa C. Turrini
Investigator

LAW OFFICES OF
HOLMES WEDDLE & BARCOTT
A PROFESSIONAL CORPORATION

701 WEST EIGHTH AVENUE, SUITE 700 · ANCHORAGE, ALASKA 99501-3408
TELEPHONE (907) 274-0666 · FAX (907) 277-4657

TIMOTHY A. MCKEEVER
E-MAIL: tmckeever@hwb-law.com

May 24, 2004

Lisa C. Turrini
Investigator
Attorney General's Office
1031 West Fourth Avenue, Suite 200
Anchorage, AK 99501-5903

MAY 26 2004

Re: The Ted Stevens Foundation
Our File No. 391.1513

Dear Ms. Turrini:

I am the president of the Ted Stevens Foundation and I am responding to a May 3, 2004, memo addressed to Whom It May Concern. The letter suggests that Mary Dewhirst should become registered as a paid solicitor in the State of Alaska.

I wanted to clarify that Ms. Dewhirst is a paid solicitor for the Ted Stevens Foundation but she does not engage in solicitation as that term is used under Alaska law in the State of Alaska. She engages in solicitation for contributions to the Foundation only in other states or the District of Columbia.

In light of that fact it does not appear to me that Ms. Dewhirst is required to be registered as a paid solicitor under Alaska law. I would appreciate it if you could advise me whether my interpretation in this regard is correct. I look forward to hearing from you.

Very truly yours,

Timothy A. McKeever

TAM:cmj

cc: Mary Dewhirst

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