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CLIENT'S COPY

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

DECEMBER 31, 2014

PREPARED FOR:

WILD SALMON CENTER 721 NW 9TH AVENUE NO. 300 PORTLAND, OR 97209-3446

PREPARED BY:

MCDONALD JACOBS, P.C. 520 SW YAMHILL, STE 500 PORTLAND, OR 97204

AMOUNT DUE OR REFUND:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

THIS COPY OF THE RETURN IS PROVIDED FOR STATE FILING PURPOSES.

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning and ending Check if applicable: C Name of organization D Employer identification number Address change Wild Salmon Center Name change 94-3166095 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 721 NW 9th Avenue 300 (503) 222-1804 City or town, state or province, country, and ZIP or foreign postal code 9.439.442 **G** Gross receipts \$ Amended return 97209-3446 Portland, OR H(a) Is this a group return Applica-tion pending F Name and address of principal officer: Guido R. Rahr for subordinates? Yes X No same as C above H(b) Are all subordinates included? Tax-exempt status: X = 501(c)(3) = 501(c)) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ▶ www.wildsalmoncenter.org **H(c)** Group exemption number ▶ **K** Form of organization: **X** Corporation Trust Association Other > L Year of formation: 1992 M State of legal domicile: WA Part I Summary Briefly describe the organization's mission or most significant activities: To promote the conservation and Activities & Governance sustainable use of wild salmon ecosystems across the Pacific Rim. if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 16 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 30 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Prior Year Current Year** 3,409,300. 9,133,922. Contributions and grants (Part VIII, line 1h) 81,533. 179,988. Program service revenue (Part VIII, line 2g) 4,304. 2,832. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 5,157. 44,269. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 9,361,011. 3,500,294. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 616,210. 1,679,114. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 2,833,602. 2,722,558. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,368,495. 1,715,351. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 6,117,023. 4,818,307. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -1,318,013. 3,243,988. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 70 4,946,264. 8,099,696. Total assets (Part X, line 16) <u>282,7</u>86. 192,230. 21 Total liabilities (Part X, line 26) 三年 663,478. ,907,466 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Guido R. Rahr III, President and CEO Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature P00540880 Sang Ahn Paid self-employed Firm's name McDonald Jacobs, P.C. Firm's EIN ▶ 93-0900579 Preparer Firm's address \triangleright 520 SW Yamhill, Ste 500 Use Only Portland, OR 97204 Phone no. 503 227-0581 X Yes

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

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The mission of Wild Salmon Center is to promote the conservation and
	sustainable use of wild salmon ecosystems across the Pacific Rim. We
	identify science-based solutions to sustain wild salmonids and the
	human communities and livelihoods that depend on them.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4-	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 2,213,441. including grants of \$1,250,013.) (Revenue \$) North America program
	Alaska
	Pebble:
	After an enormous regional, statewide and national outreach effort from
	the entire Save Bristol Bay coalition, the Watershed Assessment comment
	numbers are in and outstanding.
	654,160 Americans submitted comments supporting EPA action to stop the
	Pebble Mine
	73 percent of all comments supported EPA action
	84 percent of Alaska comments supported EPA action
	(Continued on Schedule O)
4b	(Code:) (Expenses \$1,004,619. including grants of \$429,100.) (Revenue \$)
	Western pacific program
	Khabarovsk Wildlife Foundation (KWF) and WSC helped establish the
	Shantar Islands National Park that will protect a total of 515,500
	hectares (1,273,828 acres) and preserve the unique terrestrial and
	marine ecosystems which support a wide variety of fish and wildlife
	including pink and chum salmon populations.
	VME auggogafullu gomplotod a stata amri nammantal municum anno a
	KWF successfully completed a state environmental review process
	justifying creation of a state nature reserve on the Tugur River.
	(Continued on Schedule O)
	/constitued on benedute of
40	(Code:) (Expenses \$ 1,404,059 • including grants of \$) (Revenue \$)
70	Sustainable Fisheries and Markets Program
	Launched Salmon FIP Partnership with Highliner Foods to increase supply
	of third-party certified wild salmon to 75% of global production. Five
	major seafood buyers have joined the partnership.
	West Kamchatka Salmon Fishery Improvement project (FIP) and Sakhalin
	island Salmon FIP were formally announced and reviewed by SFP and WWF
	for their industry partners.
	Three FIP field teams implemented a series of FIP activities in
	collaboration with fishermen and local stakeholders during the summer
	of 2013. (Continued on Schedule O)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 507,873. including grants of \$) (Revenue \$ 179,988.)
4e	Total program service expenses ► 5,129,992.
	Form 990 (2014)

See Schedule O for Continuation(s)

Form 990 (2014) Wild Salmon Center Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2014)

Form 990 (2014) Wild Salmon Center Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		<u> X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	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, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
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, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		_	$\alpha\alpha$	(0014)

Form **990** (2014)

Form 990 (2014) Wild Salmon Center Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					Щ			
					Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	44						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	_1b	0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re								
_	(gambling) winnings to prize winners?	 I	 I	1c					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		30						
D	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	X				
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e -file (see instructions Did the organization have unrelated business gross income of \$1,000 or more during the year?			2-		х			
				3a 3b					
	If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No," to line 3b, provide an explanation in Schedule At any time during the calendar year, did the organization have an interest in, or a signature or other a			30					
Ta	financial account in a foreign country (such as a bank account, securities account, or other financial a		-	4a		X			
h	If "Yes," enter the name of the foreign country:	iccoui	ity:	та					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	ccoun	ts (FBAR)						
5a				5a		х			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactions.			5b		х			
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the								
	any contributions that were not tax deductible as charitable contributions?			6a		х			
b	If "Yes," did the organization include with every solicitation an express statement that such contribution								
	were not tax deductible?			6b					
7	Organizations that may receive deductible contributions under section 170(c).								
а	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
b If "Yes," did the organization notify the donor of the value of the goods or services provided?									
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	-							
	to file Form 8282?	1	 I	7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		7e		Х			
е									
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X			
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g					
н 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			7h					
0	sponsoring organization have excess business holdings at any time during the year?	by til	5	8					
9	Sponsoring organizations maintaining donor advised funds.		••••••••	Ť					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b					
10	Section 501(c)(7) organizations. Enter:								
	Initiation fees and capital contributions included on Part VIII, line 12	10a							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders	11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	? I	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a					
L	Note. See the instructions for additional information the organization must report on Schedule O.								
D	Enter the amount of reserves the organization is required to maintain by the states in which the	13b	I						
^	organization is licensed to issue qualified health plans Enter the amount of reserves on hand	13c							
	Did the exemination receive any negments for indept tenning convices during the tay years		I	14a		Х			
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule			14b		_ 			
	The state of the s	<i>,</i>			990	(2014)			
						/			

Wild Salmon Center 94-3166095 Page 6 Form 990 (2014) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 16 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 16 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AR, AZ, CO, DC, FL, GA, MA, MD, MN, NC, NJ, NM Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Upon request Another's website ___ Other *(explain in Schedule O)* Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: Katherine Holler - (503) 222-1804 721 NW 9th Avenue, Suite 300, Portland

list of

See Schedule O for full

432006 11-07-14

states

Form **990** (2014)

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

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

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

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

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

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

(A)	(B)	1			C)			(D)	(E)	(F)
Name and Title	Average hours per	box	not cl , unles cer an	heck i	more rson i	than o	n an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer p	Key employee	Highest compensated 5		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Michael Sutton	1.00	٠,,							_	0
Director (2) Stone Gossard	1 00	Х						0.	0.	0.
(2) Stone Gossard Director	1.00	Х						0.	0.	0.
(3) Leah Hair	1.00								•	
Director	1.00	Х						0.	0.	0.
(4) Randall Peterman	1.00									
Director		Х						0.	0.	0.
(5) Deke Wells	1.00									
Director		Х						0.	0.	0.
(6) John E. McCosker	1.00									
Director		Х						0.	0.	0.
(7) Ilya Sherbovich	1.00									
Director		Х						0.	0.	0.
(8) William Swindells	1.00									
Director		Х						0.	0.	0.
(9) Dan Plummer	1.00									
Director		Х						0.	0.	0.
(10) Frank Cassidy Jr.	1.00									
Director		Х						0.	0.	0.
(11) Brooks Walker	1.00								_	_
Director		Х						0.	0.	0.
(12) Fraiser Rieche	1.00									
Director		Х						0.	0.	0.
(13) Tim O'Leary	1.00									
Director	1 00	Х						0.	0.	0.
(14) John Childs	1.00									•
Director	1 00	Х						0.	0.	0.
(15) Rocky Dixion	1.00								_	0
Director	1 00	Х						0.	0.	0.
(16) Ken Morrish	1.00	37							_	^
Director	40.00	Х						0.	0.	0.
(17) David Finkel Vice President	40.00			~				120 000	0.	26 101
Aice Liesinelic	<u>I</u>		l	Х	l	<u> </u>]	120,898.	0.	26,181.

432007 11-07-14

Form **990** (2014)

(A)	(B)	(C)			gnes	<u> </u>	(D)	(E)	Т		(F)		
Name and title	Average hours per week	box	not c , unle	Pos heck i	itior more rson i	than of s both or/trus	n an	Reportable compensation from	Reportable compensation from related		am	timate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	2)	fro orga and	pensa om th anizat d relat inizati	e ion ed
(18) Guido R. Rahr III	40.00												
President & CEO	1.0.00			Х				170,849.		0.	3 (),9	41.
(19) Sara LaBorde	40.00							100 101			•		
Executive Vice President	20.00			Х				133,194.		0.	22	2,6	21.
(20) Greg Block	32.00	-		,,				0.6 705		ا ۸	٠.		0.4
Vice President (21) Rich Lincoln	40.00			Х				86,795.		0.	۷.	5,/	94.
Managing Director	40.00	1				X		102,590.		0.	(9 6	58.
(22) Mariusz Wroblewski	40.00					125		102,330.	<u> </u>	•		, 0	50•
Director	10.00	1				x		108,594.		0.	19	9.0	99.
(23) Lucy Bernard	40.00							,		\exists		,	
Director						Х		100,147.		0.	16	5,8	72.
(24) Brian Caulette	40.00												
Director						Х		100,026.		0.	24	4,7	20.
1b Sub-total	1			·				923,093.		0.	173	3,8	86.
c Total from continuation sheets to Part VI	I. Section A						-	0.		0.		,	0.
d Total (add lines 1b and 1c)								923,093.		0.	173	3,8	86.
2 Total number of individuals (including but n								eceived more than \$100,	000 of reportable				
compensation from the organization											Г		7
										п		Yes	No
3 Did the organization list any former officer,													37
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su	•							•	•		_	v	
and related organizations greater than \$150,000? <i>If</i> "Yes," <i>complete Schedule J for such individual</i>								4	X				
											_		Х
rendered to the organization? If "Yes," com Section B. Independent Contractors	<u>ipiete Schedule</u>	e J fo	or st	ıch <u>ı</u>	oers	on .					5		
Complete this table for your five highest co	mnensated inc	lene	nde	nt co	ntr	acto	rs th	nat received more than \$	100 000 of compe		on fro	m	
	•	•							•	. iouti	511 110		
the organization. Report compensation for the calendar year ending with or within the organization's tax year.									ıc	٠,			

the organization. Report compensation for the calendar year ending with or within	r trie organization's tax year.	
(A) Name and business address	(B) Description of services	(C) Compensation
Ecotrust Properties LLC		
721 NW Ninth Avenue, Portland, OR 97209	Rent	135,216.
Resilience in Action LLC	Designed leadership	
3215 SW Patton Rd, portland, OR 97201	development program	101,355.

Form **990** (2014)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

	rt VII		Darmon C	CIICCI			74 3100	rage o
Fai	L VII							
		Check if Schedule O cont	ains a response	or note to any lir	ne in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns	1a					
, Grants mounts	b	Membership dues	1b					
Y.G	С	Fundraising events	1c	160,000.				
ar /	d	Related organizations	1d					
imil	е	Government grants (contribut	ions) 1e	147,177.				
tion	f	All other contributions, gifts, gran						
Contributions, Gifts, and Other Similar Ar		similar amounts not included abo	ve 1f 8 ,	826,745.				
dit	g	Noncash contributions included in lines	1a-1f: \$	181,588.				
<u>ठ</u> ह	h	Total. Add lines 1a-1f			9,133,922.			
		~ 1		Business Code		150 000		
e Ce	2 a	Salmon conserva	tion	900099	179,988.	179,988.		
erv	b							
n S	С							
ar Rev	d							
Program Service Revenue	e	All						
	τ	All other program service reve			179,988.			
	<u> </u>	Total. Add lines 2a-2f			119,900.			
	3	other similar amounts)			2,832.			2,832.
	4	Income from investment of ta			2,0021			1 2,0021
	5	Royalties						
	_		(i) Real	(ii) Personal				
	6 a	Gross rents		(.,,				
		Less: rental expenses						
		Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
		Net gain or (loss)		. <u></u>				
Other Revenue	8 a	Gross income from fundraisin including \$ 160,0 contributions reported on line Part IV, line 18	1c). See	120,020.				
her	b	Less: direct expenses		78,431.				
ō		Net income or (loss) from fund		>	41,589.			41,589.
		Gross income from gaming ac	-					
		Part IV, line 19						
	b	Less: direct expenses						
	С	Net income or (loss) from gam	ning activities .					
	10 a	Gross sales of inventory, less	returns					
		and allowances	a	1				
	b	Less: cost of goods sold						
]	С	Net income or (loss) from sale	s of inventory .					
		Miscellaneous Revenu		Business Code				
		Miscellaneous I	ncome	900099	2,680.			2,680.
	b							
	С							_
		All other revenue			2 (00			
		Total. Add lines 11a-11d			2,680. 9,361,011.	179,988.	0.	47,101.
432009 11-07-	12 9 14	Total revenue. See instructions.		>	p, JUI, UII.	113,300.	<u> </u>	Form 990 (2014)

Form 990 (2014) Wild Salmon Center Part IX Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	144,224.	144,224.		·					
2	Grants and other assistance to domestic individuals. See Part IV, line 22	,	,							
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1.534.890.	1,534,890.							
4	Benefits paid to or for members	_, ,	_, ,							
5	Compensation of current officers, directors,									
	trustees, and key employees	468,196.	363,826.	35,761.	68,609.					
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
_	persons described in section 4958(c)(3)(B)	1,757,751.	1,372,014.	175,064.	210,673.					
7	Other salaries and wages	1,757,751.	1,3/2,014.	1/3,004.	210,073.					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	100,866.	83,175.	6,306.	11,385.					
9	Other employee benefits	233,651.	161,536.	33,937.	38,178.					
10	Payroll taxes	162,094.	127,728.	15,419.	18,947.					
11	Fees for services (non-employees):	,								
	Management									
b	Legal	15,100.	6,456.	8,644.						
С	Accounting	17,365.		17,365.						
d	Lobbying				_					
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	,	600 017	626 101	26 250	15 560					
	column (A) amount, list line 11g expenses on Sch O.)	688,017.	636,191.	36,258.	15,568.					
12	Advertising and promotion	44,243.	23,993. 80,627.	1,135. 23,433.	19,115. 15,429.					
13	Office expenses	113,403.	00,027.	23,433.	15,429.					
14 15	Information technology									
16	Royalties Occupancy	157,820.	115,877.	25,506.	16,437.					
17	Travel	455,735.	378,646.	22,557.	54,532.					
18	Payments of travel or entertainment expenses		,		3 - 7 - 3 - 3					
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	108,247.	47,211.		61,036.					
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	19,829.	6,392.	13,280.	157.					
23	Insurance	15,896.	4,334.	11,562.						
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)									
а	Miscellaneous	60,099.	33,804.	25,959.	336.					
b	Dues & Subscriptions	13,511.	9,068.	1,863.	2,580.					
С										
d										
е	All other expenses	C 11E 000	F 100 000	454 040	F20 000					
25	Total functional expenses. Add lines 1 through 24e	6,117,023.	5,129,992.	454,049.	532,982.					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)									
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2014)					

Form **990** (2014)

Form 990 (2014) Part X Balance Sheet

Pai	πX	balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	Ι						· ·
	1	Cash - non-interest-bearing		1,341,888.	1	3,493,004.	
	2	Savings and temporary cash investments			1,974,447.	2	1,092,584.
	3	Pledges and grants receivable, net		1,511,708.	3	3,221,457.	
	4	Accounts receivable, net			14,152.	4	123,370.
	5	Loans and other receivables from current and for	' ' '				
		trustees, key employees, and highest compensa					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	,				
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
ţ		employees' beneficiary organizations (see instr).			6		
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use			TO 004	8	100 045
	9				79,984.	9	122,345.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		601,616.	24 225		45.005
	b	Less: accumulated depreciation		554,680.	24,085.	10c	46,936.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equ	4)	4,946,264.	16	8,099,696.	
	17	Accounts payable and accrued expenses		282,786.	17	192,230.	
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
S	22	Loans and other payables to current and former	officers	s, directors, trustees,			
Ĭŧ		key employees, highest compensated employee		· · · · -			
Liabilities		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated	d third p	parties		24	
	25	Other liabilities (including federal income tax, pa	yables t	to related third			
		parties, and other liabilities not included on lines	s 17-24)	. Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			282,786.	26	192,230.
		Organizations that follow SFAS 117 (ASC 958), chec	k here ▶ X and			
Se		complete lines 27 through 29, and lines 33 and					
ü	27	Unrestricted net assets			1,973,205.	27	4,186,548.
Sala	28	Temporarily restricted net assets			2,690,273.	28	3,720,918.
Jd E	29			<u> </u>		29	
Fu		Organizations that do not follow SFAS 117 (A	SC 958), check here 🕨 🔲			
ō		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed	quipmer	nt fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in				32	
Z	33	Total net assets or fund balances			4,663,478.	33	7,907,466.
	34	Total liabilities and net assets/fund balances .			4,946,264.	34	8,099,696.

Form **990** (2014)

Ра	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,36					
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,11 3,24					
3	Revenue less expenses. Subtract line 2 from line 1							
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))							
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	7,90	7,4	66.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				X			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.							
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?							
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	Separate basis X Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit						
	Act and OMB Circular A-133?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required							
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3b					
			Form	990	(2014)			

Wild Salmon Center

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number Name of the organization Wild Salmon Center 94-3166095 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 exempt 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). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g ____ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. **f** Enter the number of supported organizations Provide the following information about the supported organization(s) (iii) Type of organization (iv) Is the organization (i) Name of supported (v) Amount of monetary (vi) Amount of listed in your organization (described on lines 1-9 support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	, ,	,	,			
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and		, ,	, ,	,	. ,	
	membership fees received. (Do not						
	include any "unusual grants.")	5035074.	9045212.	3067675.	3409300.	9133922.	29691183.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5035074.	9045212.	3067675.	3409300.	9133922.	29691183.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						13483885.
	Public support. Subtract line 5 from line 4.						16207298.
	ction B. Total Support	<u> </u>			T		
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	5035074.	9045212.	3067675.	3409300.	9133922.	29691183.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	20 000	0 007	U U10	4 204	0 000	44 040
	and income from similar sources	20,088.	9,097.	7,719.	4,304.	2,832.	44,040.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	15 240	1 206	2 207	F 157	44 260	40 751
	assets (Explain in Part VI.)	-15,248.	4,286.	2,287.	5,157.	44,269.	40,751. 29775974.
	Total support. Add lines 7 through 10	-1- (>				495,590.
12	Gross receipts from related activities,	•	,			12	493,390.
13	First five years. If the Form 990 is for organization, check this box and stop	-			•		ightharpoonup
Sec	ction C. Computation of Publi		centage	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		
	Public support percentage for 2014 (I		<u>-</u>	olumn (fl)		14	54.43 %
	Public support percentage from 2013					15	57.31 %
	33 1/3% support test - 2014. If the o						
	stop here. The organization qualifies						▶ 5
b	33 1/3% support test - 2013. If the		~				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test						
	more, and if the organization meets the	_					
	organization meets the "facts-and-circ						>
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s >
					Caba	dule A (Form 990	or 000 E7\ 0044

432022

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support		,				
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support					1	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				L		<u></u>
14	First five years. If the Form 990 is for	•			-		
Sac	check this box and stop here ction C. Computation of Publi						P
	Public support percentage for 2014 (I			olumn (fl)		15	0/
	Public support percentage from 2013					16	<u>%</u> %
	ction D. Computation of Inves	·				10	70
	Investment income percentage for 20			e 13 column (fl)		17	%
	Investment income percentage from					18	<u>%</u>
	33 1/3% support tests - 2014. If the						
.Ja	more than 33 1/3%, check this box ar						. —
h	33 1/3% support tests - 2013. If the						
	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	4		
	1		
	2		
	. .		
,	3a		
;	3b		
- ;	3c		
	4a		
-	4b		
4	4c		
	5a		
	5b 5c		
	6		
	J		
	7		
	8		
	3		
	9a		
	ah.		
	9b		
_ 9	9с		
	0-		
1	0a		
1	0b		
		0-EZ)	2014

Pa	rt IV Supporting Organizations (continued)			<u>-</u> -
	Cupporting Organizations (Continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		163	NO
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
а	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	110		l
000	tion B. Type I supporting Significations		Yes	No
4	Did the divertors twisters as membership of any as mare supported examinations have the necessity		162	NO
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
800	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		T.,	T
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	_		
800	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			l
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru	ıctions).		ı
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI, the role played by the organization in this regard	3b		I

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi:	zations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All					
	other Type III non-functionally integrated supporting organizations must complete Sections A through E.					
Coot	ian A. Adiustad Nat Income		(A) Drier Veer	(B) Current Year		
Seci	ion A - Adjusted Net Income		(A) Prior Year	(optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8_	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions).	4				
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functional	ally-integrated	Type III supporting orga	inization (see		
	instructions).	-				

Schedule A (Form 990 or 990-EZ) 2014

Par	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	nizations _(continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exen			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	•	(i)	(ii)	(iii)
_		Excess Distributions	Underdistributions	Distributable
3ecti	ion E - Distribution Allocations (see instructions)		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).				

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2014

OMB No. 1545-0047

Name of the organization

Employer identification number

Wild Salmon Center 94-3166095

Organization type (cneck one):						
Filers of	:	Section:				
Form 990 or 990-EZ		\overline{X} 501(c)($\overline{3}$) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990	0-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note. Or	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year					
but it mu	Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization Employer identification number

Wild Salmon Center 94-3166095

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$, 5,835,336.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* \$ 225,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.

Wild Salmon Center

94-3166095

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	14		990 990-F7 or 990-PF) (2014)

Name of organization Employer identification number Wild Salmon Center 94-3166095 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

➤ Complete if the organization is described below.
➤ Attach to Form 990 or Form 990-EZ.

2014

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Section 501(c)(3) organizations: Co.	molete Parts I-A and	d B. Do not complete	Part I-C

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

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

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

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

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

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

Tax	() (see separate instructions), then				
•	Section 501(c)(4), (5), or (6) organization	tions: Complete Part III.			
Nan	ne of organization			Empl	loyer identification number
	Wild Sa	lmon Center			94-3166095
Pa	art I-A Complete if the org	ganization is exempt unde	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organize Political expenditures Volunteer hours			> \$	
Pa	art I-B Complete if the org	ganization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	ler section 4955	> \$	
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	▶\$	
	If the organization incurred a section				
48	a Was a correction made?				Yes No
	b If "Yes," describe in Part IV.	ganization is exempt unde	or coation E01/o	avaant aaatian E01/a	1/2/
		•			
	Enter the amount directly expended Enter the amount of the filing organ exempt function activities	nization's funds contributed to oth	her organizations for se	ection 527	
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here a	nd on Form 1120-POL,	1	
4 5		nployer identification number (EIN ition listed, enter the amount paic omptly and directly delivered to a	N) of all section 527 po d from the filing organiz a separate political orga	litical organizations to which cation's funds. Also enter the anization, such as a separat	n the filing organization e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2014

L	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% of	line 1f)	107,301.	
h	Subtract line 1g from line 1a. If zero or less, e	0.		
i	Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.	

4-Year Averaging Period Under section 501(h)

ighthere is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

reporting section 4911 tax for this year?

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

			,		
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	419,195.	338,330.	371,677.	429,202.	1,558,404.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,337,606.
c Total lobbying expenditures	1,944.				1,944.
d Grassroots nontaxable amount	104,799.	84,583.	92,919.	107,301.	389,602.
e Grassroots ceiling amount (150% of line 2d, column (e))					584,403.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2014

Yes

Schedule C (Form 990 or 990-EZ) 2014 Wild Salmon Center 94-31660 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k	p)
of the	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec	tion	
	501(c)(6).			.,	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section		3	4:	
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes." Dues, assessments and similar amounts from members			,	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A	, lines 1 a	nd 2 (see	
instru	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

Pa	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor advised	d funds
	are the organization's property, subject to the organization's e	-	
6	Did the organization inform all grantees, donors, and donor ac		
	for charitable purposes and not for the benefit of the donor or		-
	impermissible private benefit?		X Yes No
Pa	t II Conservation Easements. Complete if the org	anization answered "Yes" to Form 990, Pa	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a histo	rically important land area
	Protection of natural habitat	Preservation of a certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form of	f a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a	fter 8/17/06, and not on a historic structure	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the c	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
_			
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizati	ion's financial statements that describes th	ie organization's accounting for
Pai	conservation easements. † III Organizations Maintaining Collections of	Art Historical Treasures or Oth	per Similar Assets
ı u	Complete if the organization answered "Yes" to Form 9		ici olilliai Assets.
12	If the organization elected, as permitted under SFAS 116 (ASC		ant and balance shoot works of art
Ia	historical treasures, or other similar assets held for public exh	•	•
	the text of the footnote to its financial statements that describ		se of public service, provide, iff art Alli,
h	If the organization elected, as permitted under SFAS 116 (ASC		and balance sheet works of art, historical
b	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	deation, or research in furtherance of publi	ic service, provide the following amounts
	(i) Revenue included in Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical trea		
~	the following amounts required to be reported under SFAS 11	•	gain, provide
а	Revenue included in Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		
-			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2014

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): a Public exhibition										- (COITE	iueu)	
a Public exhibition d	3	. ,	on, and other record	s, check	any of the t	following that	are a sig	gnificant i	use of its o	collection	items	3
b Scholarly research e Other Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Dring the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be solicit or loraise funds attent than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 1		,		. —								
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization collection? Ves No Part IV Excove and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is is the organization an agent, trustee, oustodian or other intermediary for contributions or other assets not included on Form 990, Part X; line 21. Beginning balance Beginning balance Beginning balance Bit Ending balance Bit Endonment Funds. Complete if the organization has been provided in Part XIII Bit Endonment Funds. Bit Ending balance Bit Ending	а		C									
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be said to raise funds a rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 9, or reported on amount on Form 990, Part X, line 10, or Form 990, Part X, line 10, or Form 990, Part X, line 11, or Form 990, Part X, line 21, for escrow or custodial account liability? 5 Distributions during the year 6 Distributions during the year 7 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 10, l	b		e	(Other							
year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to asies funds rather than to be maintained as part of the organization's collection?	С											
To be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No	4								se in Part	XIII.		
Secrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X. line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	5								_	_	_	_
Teported an amount on Form 990, Part X, line 21. Temperature Temp	_											No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form '90, Part X?	Pai			ete if the	organizatio	n answered '	'Yes" to I	Form 990), Part IV,	line 9, or		
No Form 990, Part X												
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance	1a								_	_	_	_
Amount									L	Yes		No
c Beginning balance d Additions during the year e Distributions during the year 1 tending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1 Beginning of year balance 1 Contributions 2 No If Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. 1 Beginning of year balance 2 No If Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. 1 Beginning of year balance 2 No If Yes, explain the arrangement in Part XIII. Check here if the explanation answered "Yes" to Form 990, Part IV, line 10. 1 Contributions 2 No If Yes explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. 1 Described the organizations of the contribution answered "Yes" to Form 990, Part IV, line 10. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 3 Board designated or quasi-endowment Py6 5 Permanent endowment Py6 6 Temporarily restricted endowment Py6 7 Secretary of the organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. 2 Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property 1 (a) Cost or other basis (investment) basis (other) 1 Cost or other basis (investment) 1 Cost or other basis (other) 1 Cost or other basis	b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing ta	able:							
d Additions during the year Distributions during the year 1 1 1 1 1 1 1 1 1										Amoun	t	
e Distributions during the year 1 1 1 1 1 1 1 1 1	С	Beginning balance						. <u>1c</u>				
f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years b	d	Additions during the year						. 1d				
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization and Equipment Complete if the organization and Equipment	е	Distributions during the year						. 1e				
b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 190, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back	f	Ending balance						. 1f				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back	2a	Did the organization include an amount on F	orm 990, Part X, line	21, for e	scrow or cu	ustodial acco	unt liabili	ty?	L	Yes		_ No
a Beginning of year balance	b											
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	Pai	rt V Endowment Funds. Complete	f the organization an	swered '	"Yes" to Fo	rm 990, Part	IV, line 1	0.				
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶			(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three	years back	(e) Fou	r years	back
c Net investment earnings, gains, and losses d' Grants or scholarships	1a											
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	b	Contributions										
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	С	Net investment earnings, gains, and losses										
and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (al)) held as: a Board designated or quasi-endowment ▶	d	Grants or scholarships										
f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	е	Other expenditures for facilities										
g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment		and programs										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	f	Administrative expenses										
a Board designated or quasi-endowment ▶	g	End of year balance										
b Permanent endowment ►	2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g	, column (a)) held as:						
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment c Other Other Other 167, 545. 56, 374. 11, 171. d Equipment 260. 167, 409. 167, 409. 0.	а	Board designated or quasi-endowment		_%								
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iiii) related organizations (iiiii) related organizations (iiii) related organizations (iii) related	b	Permanent endowment	%									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other Other Other 167,545. 167,409. 167,409. Other	С	Temporarily restricted endowment ▶	%									
Second S		The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.									
(ii) unrelated organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment d Equipment e Other Other Other 13a(ii) 3a(ii) 3a(ii) 3b Chacking 3b Chacking 3b Chacking 3c Ab Chacking 3c Action 3c	За	Are there endowment funds not in the posse	ssion of the organiza	tion that	are held ar	nd administer	ed for the	e organiz	ation			
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value Buildings c Leasehold improvements d Equipment d Equipment d Equipment d Sa(ii) 3b 11a. See Form 990, Part X, line 10. (d) Book value 15a. See Form 990, Part X, line 10. 15b. Cost or other basis (other) 15c. Accumulated depreciation 16c. Accumulated		by:									Yes	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment d Equipment e Other 167,409. 167,409.		(i) unrelated organizations								3a(i)		
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment d Equipment e Other Other Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value		(ii) related organizations								3a(ii)		
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land Buildings C Leasehold improvements 67,545. 56,374. 11,171. d Equipment 366,662. 330,897. 35,765. e Other 167,409. 167,409. 0.	b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedi	ule R?					3b		
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings 567,545. 56,374. 11,171. c Leasehold improvements 677,545. 56,374. 11,171. d Equipment 366,662. 330,897. 35,765. e Other 167,409. 167,409. 0.	4			wment fu	unds.							
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation	Pai	rt VI Land, Buildings, and Equipm	ent.									
tal Land basis (investment) basis (other) depreciation b Buildings C Leasehold improvements 67,545. 56,374. 11,171. d Equipment 366,662. 330,897. 35,765. e Other 167,409. 167,409. 0.		Complete if the organization answere	d "Yes" to Form 990	, Part IV,	line 11a. S	ee Form 990,	Part X, I	ine 10.				
b Buildings 67,545. 56,374. 11,171. c Leasehold improvements 366,662. 330,897. 35,765. e Other 167,409. 167,409. 0.		Description of property	1 ' '				٠,			(d) Boo	k valu	ie
c Leasehold improvements 67,545. 56,374. 11,171. d Equipment 366,662. 330,897. 35,765. e Other 167,409. 167,409. 0.	1a	Land										
c Leasehold improvements 67,545. 56,374. 11,171. d Equipment 366,662. 330,897. 35,765. e Other 167,409. 167,409. 0.	b	Buildings										
e Other 167,409. 167,409. 0.	С											
e Other 167,409. 167,409. 0.	d	Equipment								3	5,7	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	е				16	7,409.	1	$167,\overline{4}$	09.			
	Tota	I. Add lines 1a through 1e. <i>(Column (d) must</i> e	qual Form 990, Part	X, colum	n (B), line 1	0c.)			. ▶	4	6,9	<u> 36.</u>

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 Wild Salmon	Center	94-3166095 Page
Part VII Investments - Other Securities.		
Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	I1c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		

			Othe			i uit 71,	001.	(D) IIII0	10.7	_
Total	(Col	(h) must e	nual Fo	orm 990,	Part X	col	(R) line	13)	-

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2014

Pai	rt XI	Reconciliation of Revenue per Audited Financial Statement	ts With Revenue per Re	turn.	
		Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			
1	Total	revenue, gains, and other support per audited financial statements		1	
2	Amou	ints included on line 1 but not on Form 990, Part VIII, line 12:			
а		nrealized gains (losses) on investments	2a		
b		ted services and use of facilities			
С		veries of prior year grants			
d	Other	(Describe in Part XIII.)	2d		
е		nes 2a through 2d		2e	_
3		act line 2e from line 1		3	_
4		ints included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а		tment expenses not included on Form 990, Part VIII, line 7b		-	
b		(Describe in Part XIII.)	4b		
		ines 4a and 4b		4c	_
5 Pa	rt XII	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	nts With Fynansas nar P	5 Return	_
ı u	I C XII	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	its with Expenses per in	icturii.	
_	Total			1	-
1		expenses and losses per audited financial statements ints included on line 1 but not on Form 990, Part IX, line 25:		-	-
a		ted services and use of facilities	2a		
b		year adjustments			
C			_		
d		(Describe in Part XIII.)			
		ines 2a through 2d		2e	
3		act line 2e from line 1		3	-
4		ints included on Form 990, Part IX, line 25, but not on line 1:			_
а		tment expenses not included on Form 990, Part VIII, line 7b	4a		
b		(Describe in Part XIII.)	4b		
С		nes 4a and 4b		4c	
5	Total	expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)		5	
Pa	rt XIII	Supplemental Information.			
Prov	ide the	descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV $\frac{1}{2}$, lines 1b and 2b; Part V, line 4;	; Part X, line 2; Part XI,	
lines	2d and	d 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	onal information.		
					_
D	_L 37	Time 2.			
Pai	ct X	i, Line 2:			_
mui	7 ∩D	GANIZATION FOLLOWS THE PROVISIONS OF FAS	בם אפר שרסדר אררי	CINTING FOR	
1111	2 010	AT 10 GMOLGIVONI EIII GWOLLOT MOLIAGIMAD.	DD ADC TOTTC ACC	OUNTING FOR	-
IINC	ERT	AINTY IN INCOME TAXES. MANAGEMENT HAS E	VALUATED THE OR	GANTZATTON'S	
					-
TA	K PO	SITIONS AND CONCLUDED THAT THERE ARE NO	UNCERTAIN TAX P	OSITIONS THAT	
REÇ	QUIR	E ADJUSTMENT TO THE FINANCIAL STATEMENTS	TO COMPLY WITH	PROVISIONS	
OF	THI	S TOPIC.			
					_
					_
					_
					-
					_

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

2014
Open to Public Inspection

Name of the organization

Employer identification number

	ld Salmon Cen	ter				94-316609	5
Pa	rt I General Infor	mation on A	ctivities Out	side the United States. Compl	ete if the organ	ization answered "Y	es" on
	Form 990, Part IV	/, line 14b.					
1				ds to substantiate the amount of its gra			🖂
	the grantees' eligibility to	or the grants or a	issistance, and t	he selection criteria used to award the	grants or assis	tance? X	Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	e organization's រ	procedures for monitoring the use of its	s grants and oth	ner assistance outsi	de the
3	Activities per Region. (The	ne following Part	I, line 3 table ca	n be duplicated if additional space is r	needed.)		1
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
					Grants for	=	
					network of		
	sia and newly			Program services, grants		in Russian	
inde	ependent states			to recipients in region	Far East an	d Kamchatka	464,100.
	h America nada and Mexico,			Program services, grants	Grants for	protection of	
	not U.S.)			to recipients in region	Skeena wate	=	1,105,790.
3 a	Sub-total	0	0				1,569,890.
	Total from continuation sheets to Part I	0	0				0.
С	Totals (add lines 3a						1 560 000

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2014

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
			Education and					
		Russia and the	Outreach/Salmon					
		newly Independent	rivers					
		States	conservation/habitat	40,000.	Wire Transfer	0.		
		Russia and the						
			Protected Area					
		States	Support	80,000.	Wire Transfer	0.		
		Russia and the	Protected Area					
		newly Independent						
		States	Support/Kol Zakaznik	195 400	Wire Transfer	0.		
		scaces	Support/Kor Zakaznik	105,400.	wire mansier	0.		
		Russia and the	Protected Area					
		newly Independent	Creation; Creation of					
		States	Watershed Councils	90,700.	Wire Transfer	0.		
		Russia and the						
		newly Independent	Protected Area					
		States	Support	33,000.	Wire Transfer	0.		
		North America						
		(Canada and						
		Mexico, but not	Skeena Conservation					
		U.S.)	Grant	1105790.	Wire Transfer	0.		

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt
	the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

▶	 6
•	(

Schedule F (Form 990) 2014

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.									
Part III can be duplicated if action (a) Type of grant or assistance		dditional space is neede	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Wild Sal Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

(estimated number of recipients), as applicable. Also complete this part to provide any additional information.
Part I, Line 2:
On a regular basis, usually quarterly, grantees are required to provide a
grant report to the Organization to ensure that progress on deliverables
is occuring. The Organization requires that satisfactory progress on
deliverables and the achievement of outcomes is necessary for the next
payment to be remitted to the grantee.
Part II, Column (d):
Region: Russia and the newly Independent States
(d) Purpose of Grant: Education and Outreach/Salmon rivers
conservation/habitat restoration/informational coverage

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 9.4 – 3.1.6.6.0.9.5

WIIU Sa	Imon center				34-3100	095
Part I Fundraising Activities. required to complete this part	Complete if the organization answe	red "Y	es" to	Form 990, Part IV, li	ne 17. Form 990-EZ	filers are not
1 Indicate whether the organization rais	ed funds through any of the following	n activ	ities (Check all that apply		
				overnment grants		
b Internet and email solicitations	f Solicitat	ion of	gover	nment grants		
c Phone solicitations	g Special	fundra	ising e	events		
d In-person solicitations	<u>-</u>		ŭ			
	and the same and the same section of the same section of	/: I		Carrier Broad and America		
2 a Did the organization have a written o						
key employees listed in Form 990, Pa	art VII) or entity in connection with pr	ofessi	onal fu	undraising services?	Yes	L No
b If "Yes," list the ten highest paid indi	viduals or entities (fundraisers) pursu	ant to	agree	ments under which t	he fundraiser is to be	е
compensated at least \$5,000 by the	organization.					
,				·		
		(iii)	Did		(v) Amount paid	(-:\ Amount noid
(i) Name and address of individual	(ii) Activity	(iii) fundr have c	aiser	(iv) Gross receipts	to (or retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	(ii) Activity	or con	trol of	from activity	fundraiser	organization
		contrib	itions?		listed in col. (i)	
		Yes	No			
		100	110	1		
		•				
Total				<u> </u>		
3 List all states in which the organizatio	n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is exempt from reg	gistration
or licensing.						

432081 08-28-14

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

Schedule G (Form 990 or 990-EZ) 2014

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events None (add col. (a) through Turner Event col. (c)) (event type) (total number) (event type) 280,020. 280,020. Gross receipts 2 Less: Contributions 160,000. 160,000. 120,020. **3** Gross income (line 1 minus line 2) 120,020. 4 Cash prizes 5 Noncash prizes Direct Expenses 57,431. 57,431. Rent/facility costs 7 Food and beverages 8 Entertainment 21,000. 21,000. Other direct expenses 78,431. **10** Direct expense summary. Add lines 4 through 9 in column (d) 41,589. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: _ 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain: Schedule G (Form 990 or 990-EZ) 2014 432082 08-28-14

Schedule G (Form 990 or 990-EZ) 2014 WIId Salmon Center	94-3166095 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity form	
to administer charitable gaming?	
13 Indicate the percentage of gaming activity conducted in:	
	122
a The organization's facility	
b An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and	I records:
Name ▶	
Address	_
15a Does the organization have a contract with a third party from whom the organization receives gaming revenu	e? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and t	he amount
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	
,	
Name	
Address ▶	
16 Gaming manager information:	
Name	
Gaming manager compensation \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or	spent in the
organization's own exempt activities during the tax year ▶ \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v	and Part III lines 0 Ob 10b 15b
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	, and Fart III, lines 9, 90, 100, 130,

Schedule G	G (Form 990 or 990-EZ)	Wild Salmon	Center	94-3166095	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Infor	rmation (continued)			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	on Conton						Employer identification number
Wild Salm							94-3166095
Does the organization maintain records to criteria used to award the grants or assis Describe in Part IV the organization's pro-	o substantiate the					stance, and the selecti	₹
Part II Grants and Other Assistance to I					anization answered "	es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$	5,000. Part II can	be duplicated if addit	ional space is neede	ed.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Oregon Chapter, Sierra Club							
1821 SE Ankeny Street							Tillamook State Forest
Portland, OR 97214	94-6069890	501(c)(3)	33,489.	0.			project
California Trout							
870 Market St., Suite 528							Salmon Stronghold
San Francisco, CA 94102	23-7097680	501(c)(3)	4,545.	0.			Initiative Project
							Public education and
Pacific Rivers Council							outreach to generate
317 SW Alder St, Ste 900							support for wilderness &
Portland, OR 97204	93-0946133	501(c)(3)	8,213.	0.			lands protection in OR
New Venture Fund 1201 Connecticut Ave NW, Ste 300 Washington, DC 20036	20-5806345	501(c)(3)	90,000.	0.			Bristol Bay United Campaign
Association of Northwest Steelhead							
6641 SE Lake Rd							Wilderness and
Milwaukie, OR 97222	91-1031100	501(c)(3)	3,142.	0.			Conservation Campaign
Northwest Sportfishing Industry Association - 16524 S Bradley Road							Public education and outreach to generate support for wilderness &
- Oregon City, OR 97045	93-1107831		4,834.	0.			lands protection in OR
2 Enter total number of section 501(c)(3) are	•	•					> 6.
3 Enter total number of other organizations							
I UA For Panarwork Poduction Act Natica	can the Instructi	one for Earm 000					Schodulo I (Form 900) (2014)

Schedule I (Form 990) (2014)

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" to Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Provide the information req	<u>I</u> Juired in Part I, lin	e 2, Part III, column	_l n (b), and any other ac	l Iditional information.	
Part I, Line 2:					
Grantees are required to report on	the prog	ress of ac	ctivites pe	rformed and	
deliverables attained in order to :	receive g	rant payme	ents. The O	rganization	
reserves the right to examine the					
organization.					

SCHEDULE J (Form 990)

Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. Inspection Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Wild Salmon Center

Employer identification number

94-3166095

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х Х Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		_X_
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2014

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

Wild Salmon Center

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred benefits compensation		(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
(1) Guido R. Rahr III	(i)	150,849.	20,000.	0.	10,846.	20,095.		
President & CEO	(ii)	0.	0.	0.	0.	0.		0.
(2) Sara LaBorde	(i)	123,194.	10,000.	0.	8,890.	13,731.	155,815.	0.
Executive Vice President	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
-	(i)							
	(ii)							
	(i)							
	(ii)							
-	(i)							
	(ii)							
	(11)						l	<u> </u>

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Employer identification number

Types of Property	
Check if applicable on contribution amounts reported on items contribution amounts reported on items contributed from 990, Part VIII, line 1g 1 Art - Works of art 2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	nts
3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
Clothing and household goods Cars and other vehicles Boats and planes Intellectual property Securities - Publicly traded X 922 50,931. Sale value Securities - Closely held stock X 835 38,166. Sale value Securities - Partnership, LLC, or trust interests Securities - Miscellaneous Qualified conservation contribution - Historic structures	
6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 922 50,931. Sale value 10 Securities - Closely held stock X 835 38,166. Sale value 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
8 Intellectual property 9 Securities - Publicly traded X 922 50,931. Sale value 10 Securities - Closely held stock X 835 38,166. Sale value 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
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11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
trust interests Securities - Miscellaneous Qualified conservation contribution - Historic structures	
12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures	
Historic structures	
14 Qualified conservation contribution - Other	
15 Real estate - Residential	
16 Real estate - Commercial	
17 Real estate - Other	
18 Collectibles	
19 Food inventory	
20 Drugs and medical supplies	
21 Taxidermy	
22 Historical artifacts	
23 Scientific specimens	
24 Archeological artifacts	
25 Other ▶ (Auction donat) X 15 72,089. Retail value.	
26 Other ▶ (Software dona) X 1 13,172. Retail value.	
27 Other ▶ (Other goods) X 4 7,230. Retail value.	
28 Other ▶ ()	
29 Number of Forms 8283 received by the organization during the tax year for contributions	
for which the organization completed Form 8283, Part IV, Donee Acknowledgement	
Ye	s No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it	
must hold for at least three years from the date of the initial contribution, and which is not required to be used for	
exempt purposes for the entire holding period?	<u> </u>
b If "Yes," describe the arrangement in Part II.	
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31	<u> </u>
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash	
contributions?	<u> </u>
b If "Yes," describe in Part II.	
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	
describe in Part II.	

For Paperwork Reduction Act Notice, see the Instructions for Form 990. LHA

Schedule M (Form 990) (2014)

432142 08-12-14

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

Form 990, Part III, Line 4a, Program Service Accomplishments:
98 percent of Bristol bay comments supported EPA action
Anglo American, one half of the Pebble partnership, announced that the
Pebble project was not worth the financial risk and walked away. Anglo
American was the company that had the financial resources to develop
the Pebble Mine.
Northern dynasty, the remaining entity of the Pebble Partnership,
pledged to continue the project, but due to financial losses, recently
laid off most of the Alaska work force.
After reviewing the citizens' alternative Bristol Bay Area Plan, the
Alaska Department of Natural Resources (DNR) released additional
amendments to its revised Bristol Bay Area Plan. The amendments
increased the fish and wildlife habitat classification from 1.2 million
acres to 7 million acres.
Susitna Dam:
WSC partnered with Trout Unlimited to increase our capacity to review,
comment and make recommendations about the Alaska Energy Authority's
ongoing scientific studies, a critical component of the FERC licensing
process.
The Salmon Stronghold Initiative:

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization **Employer identification number** 94-3166095 Wild Salmon Center WSC partnered with National Fish and Wildlife Foundation, Oregon Watershed Enhancement Board, and the Oregon Governor's Office to establish an Oregon Stronghold Fund, which awarded over \$625,000 in grants to wild salmon conservation projects in six Oregon strongholds. Working with partners in Tillamook, WSC played a key role in advancing a \$7 million, 523 acre tidal wetlands restoration project in the Tillamook Bay stronghold by helping to secure \$2.7 from NOAA; and providing Tillamook County \$22k to secure purchase options on two critical parcels covering 77 acres. Washington, Oregon, and NOAA recommended that the Northwest Power and Conservation Council recognize and support a network of strongholds in the 10 year Columbia Basin Program update. Oregon and California highlighted their state salmon stronghold programs in proposals to NOAA requesting Pacific Salmon Recovery funds. The CA Stronghold Team has determined three priorities for the California Stronghold Program, including: augmenting cold water flows; restoring floodplain and estuaries; and reconnecting habitats within working landscapes. Partners (Cal Trout, TU, TNC, and CDFW) have begun to develop a legislative concept for a California Salmon Stronghold Conservation bill that supports these strategies. WSC awarded \$15,000 to California partners to initiate the South Fork Eel stronghold pilot, which will develop and test a methodology to determine minimum flow criteria based on salmon habitat needs. WSC also provided \$15,000 to partners in the Smith River stronghold to maintain a critical monitoring program.

432212 08-27-14

Name of the organization Wild Salmon Center	94-3166095
WSC has formed a joint effort with the SkeenaWild Conserva	tion Trust to
safeguard the wild salmon and steelhead in British Columbi	a. This
collaborative is call the Skeena Stronghold Partnership.	
Olympic Peninsula:	
Washington Coast Sustainable Salmon Plan (WCSSP) was adopt	ed by
Governor's Salmon Recovery Office on September 30, 2013.	The 30-year
plan addresses eight species of salmon with complex and va	ried life
histories, uses an ecosystem-wide perspective and covers 3	.75 million
acres of the coast region. The plan's vision: Protect the	Best,
Restore the Rest.	
WSC has a long history with WCSSP including:	
Helping create the organization in 2008 after a year of sc	oping with
four coastal Lead Entities	
Leading a collaborative Needs Assessment for the coast to	create a
blueprint for moving forward with conservation and recover	y (2009)
Partnering with The Nature Conservancy to help WCSSP devel	op an All-H
conservation plan for 4 million acres of the Washington Co	ast
(2009-2011)	
Developing a detailed implementation, monitoring and fundi	ng plan
(2012-2013)	
Providing ongoing scientific analysis and mapping	
Institutionalizing the salmon stronghold approach	
Serving as the primary advocate for wild fish issues durin	g
conservation planning and we held multiple authoritative c	ommittee

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Wild Salmon Center	94-3166095
Supported WCSSP in the creation of its sister non-profit	the
Washington Coast Sustainable Salmon Foundation (founded 20	13)
State funding coalition created with TNC and local stakeho	lders to
leverage \$10M in 2014 state funds to implement the Washing	ton Coast
Sustainable Salmon Plan.	
Clallam County's Environmental Designations for the Shorel	ine Master
Program Update released July 2013 for public review. WSC	is currently
conducting a review of this material to ensure that conser	vation
priorities are met and to prepare for public testimony as	needed. This
will provide new protections to 70 miles or river habitat	in the
Quillayute River.	
Oregon:	
The state of Oregon released the draft Coastal Multi-speci	es
Conservation and Management Plan, which contains 21 wild f	ish emphasis
areas and several improvements to the harvest of wild salm	on.
WSC strengthened aquatic protections in proposed federal 1	egislation
affecting the management of over two million acres of fede	ral
forestlands on several of Western Oregon's iconic wild sal	mon rivers.
House of Representatives quadrupled riparian buffer width	and included
private conservation lands fund in O&C Lands bill in respo	nse to WSC
(and partners) advocacy. WSC is now working closely with S	en. Wyden
staff and NGOs to include statutory aquatic protections in	forthcoming
legislative proposals.	

Name of the organization **Employer identification number** Wild Salmon Center 94-3166095 WSC raised public awareness of the importance of BLM lands in Western Oregon for wild salmon and drinking water through major media, including leading newspapers and national public radio. (WSC featured on NPR's "Think Out Loud" to debate O&C Lands management proposals.) Board of Forestry created a new legal category -- "High Value Conservation Areas" for state forests, where conservation directs and management activities. Draft maps show 100,000 acres in the conservation classification, including 30% of the Tillamook District, which contains numerous Salmon Anchor Habitats. Over 150 people attend public hearings and overwhelmingly voice support for Conservation Areas, including numerous elected officials and representatives from conservation and recreation communities. Opposition at hearings was minimal. Over 2000 comments in favor of the Conservation Areas poured into Oregon Forestry Department. More than 60 businesses, 25 groups, 2 counties, and 4 cities endorsed state forest conservation. Board of Forestry created a stakeholder group including elected officials, timber owners, the Wild Salmon Center, and recreation groups to explore revenue diversification that will allow agency stability and increased conservation. Governor Kitzhaber met with the stakeholder group and expressed his support for an expedited outcome. Form 990, Part III, Line 4b, Program Service Accomplishments: Sakalin Environment Watch (SEW) prepared justification for creation of Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization Wild Salmon Center	Employer identification number 94-3166095
a State Nature Reserve in the Nabil River watershed and su	bmitted the
documentation to the Sakhalin Ministry of Forestry. The Na	bil River is
a key salmon watershed for the critically endangered Sakha	lin taimen.
SEW conducted 170 escapement surveys for pink, chum, and c	oho in
Vostochny reserve (Sakhalin) in addition to 32 spawning es	capement
surveys for pink salmon in 8 districts on 27 rivers in 201	3.
RFE public watershed councils organized over 400 anti-poace	hing raids on
salmon spawning Rivers in 2013.	
WSC helped Russian conservation partners to raise over \$45	0,000
primarily from Russian sources.	
The Kamchatka Ministry of Natural Resources and Ecology an	d the
Kamchatka Governor's Office have set the process in motion	for the Kol
Salmon Refuge to become fully funded by the regional gover	nment, which
should be completed by the end of 2016.	
The Kamchatka Ministry of Fisheries approved and implement	ed
Ust-Bolsherestsk public watershed council management recom	mendations
for Bolshaya River watershed in 2013 for the third year in	a row.
Kamchatka Regional Salmon Festival has officially become p	art of the
Russia-wide Presidential Program in 2013.	
Bolshaya River (Kamchatka) was announced the finalist of t	he 2013
Thiess International Riverprize for outstanding achievemen 432212 8chee	ts in

Name of the organization Wild Salmon Center	Employer identification number 94-3166095
sustainable river management.	
US Forest Service specialists visited Koppi River Prot	tected Area
(Khabarovsk Region) to share best practices in fire	
prevention/management and reforestation in the area.	
WSC established close working relationship with the ne	ewly established
non-profit Russian Salmon Association - an organizatio	on focused on
developing and supporting responsible sport and recrea	ational fishing
policies and practices.	
WSC work in Kamchatka has once again been included in	the wild salmonid
conservation section of the bilateral Area V agreement	between Russia
and US federal governments.	
Form 990, Part III, Line 4c, Program Service Accomplis	shments:
Hatcheries have been removed from the Shiretoko Nation	nal Park as part
of the Hokkaido chum FIP work.	
Form 990, Part III, Line 4d, Other Program Services:	
State of the Salmon Program	
In concert with Sustainable Fisheries staff, developed	d and launched two
new regional Fishery Improvement Project (FIP) umbrell	las for Sakhalin
and Western Kamchatka. Public web pages were created t	chat include
detailed description of the improvement needs in the i	fisheries, action
plans, and successes to date. These regional FIP umbre	ellas provide a
mechanism for major seafood buyers to encourage their	suppliers to
engage in an improvement process.	

Schedule O (Form 990 or 990-EZ) (2014) Page 2 Name of the organization **Employer identification number** 94-3166095 Wild Salmon Center Completed beta version of a new Salmon FIP tracker tool to give stakeholders easy access to sustainability information on salmon fisheries. Worked with fishery companies to develop mutually agreed upon annual

action plans to meet MSC standards for key rivers.

Expenses \$ 507,873. including grants of \$ 0. Revenue \$ 179,988.

Form 990, Part VI, Section A, line 1:

The Executive Committee is made up of the board chair, and the committee chairs for Audit/Finance and Nominating Committees, as well as the President & CEO and two additional board members. It is chaired by the current board chair. Bylaws allow the committee to perform most, but not all of the Board functions. Most importantly, the committee is prohibited from altering or repealing the Bylaws and Articles of Incorporation; electing, appointing or removing any director, officer or committee member; adopting a plan of merger with another corporation; authorizing the voluntary dissolution of the organization.

Form 990, Part VI, Section B, line 11:

The external accounting firm prepares Form 990 and supplemental schedules as soon as possible after the completion of the annual financial audit, and forwards a draft of the return to the Chief Financial Officer for review. After reviewing Form 990, the CFO forwards a draft of the return to the Executive Vice President for approval. Once the EVP has approved Form 990 and supplemental schedules, the return is forwarded to all Board members

for its review and to the Audit/Finance Committee for its review and

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization
Wild Salmon Center

Employer identification number 94-3166095

approval. After the Audit/Finance Committee has approved the return, the

CFO instructs the external accounting firm to prepare a final version of
the return for signature by the President and CEO for filing with the

Internal Revenue Service. Every effort is made to file the return in a

timely manner with the IRS. A copy of the completed, signed and filed Form

990 with schedules is presented at the next Board of Directors meeting.

Form 990, Part VI, Section B, Line 12c:

On an annual basis, Board members and all employees complete the conflict of interest questionnaire, which asks them to list each of the potential conflicts as described in the policy. The Executive Vice President and the CFO review the forms and disclosures for all members of the Board and staff, respectively. For the Board members, the Executive Vice President makes a summary of the results and gives them to the Executive Committee for review. The Executive Committee of the Board makes a determination as to whether the perceived conflict is real or not. We have not had a real conflict in the last nine years, but if we did, the nature of the conflict would be reviewed by the Board, and appropriate actions would be taken (depending on the type of conflict) to eliminate the conflict (This could be as simple as the Board member recusing him/herself from a decision, to disposing or terminating the conflicting relationship). For employees, the management committee would review the conflict and perform a similar function to resolve the conflict.

Form 990, Part VI, Section B, Line 15:

Wild Salmon Center's process for determining CEO compensation included a survey and review of comparable data for other similar nonprofits in the

US. It was prepared by Katherine Holler, CFO and reviewed by Sara LaBorde,

432212
08-27-14
Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization Wild Salmon Center	Employer identification number 94-3166095
Executive Vice President. Any adjustments are approved by	the Compensation
Committee of the BOD.	
Form 990, Part VI, Line 17, List of States receiving copy	of Form 990:
AR, AZ, CO, DC, FL, GA, MA, MD, MN, NC, NJ, NM, NY, OH, OR, PA, TN, UT, VA, N	WA,WI
Form 990, Part VI, Section C, Line 19:	
WSC's audited financials are available on the WSC's websit	te; Articles of
Incorporation, Bylaws and Conflict of Interest Policy are	available upon
request from the CFO.	
Form 990, Part IX, Line 11g, Other Fees:	
IT Services:	
Program service expenses	636,191.
Management and general expenses	36,258.
Fundraising expenses	15,568.
Total expenses	688,017.
Total Other Fees on Form 990, Part IX, line 11g, Col A	688,017.
Form 990, Part XII, Line 2c	
The process has not changed from the prior year.	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

94-3166095

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) (d) Legal domicile (state or foreign country)			(e) (f) nd-of-year assets Direct corentit		9
	_						
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations Complete if the organization a	nswered "Yes" on Form 990	, Part IV, line 34 be	ecause it had one o	or more related tax-exe	empt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	cont	g) 512(b)(13) rolled tity?
North Pacific Salmon Trust - 20-5602442 721 NW 9th Avenue, Suite 300 Portland, OR 97209	Promote long-term salmon abundance, diversity, and habitat protection.	Oregon	501(c)(3)	170(b)(1) (A)(vi)	N/A	res	X
	proceeding.			,			21

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

Wild Salmon Center

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Schedule R (Form 990) 2014

	Identification of Deleted Opposite to Toyoble as a Deute auchin	Complete if the examination enginered	"Voo" on Form 000	Dort IV line 04 because it had one or mar	o rolotod
Part III	Identification of Related Organizations Taxable as a Partnership	Complete if the organization answered	res on Form 990	, Part IV, line 34 because it had one or mor	e related
raitiii	organizations treated as a partnership during the tax year.				
	organizations trouted as a partitional partition of the tark years				

(a)	(b)	(c)	(d)	(e)	(f)	(g)	l	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	I	ortionate itions?	Code V-UBI amount in box 20 of Schedule	managir partner	or Percentage ownership
		country)		sections 512-514)		833613		No	K-1 (Form 1065)	Yes N	0

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity?	
		country)		,				Yes	No
-									
-									

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1a

X

Yes No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)				1b	X				
c Gift, grant, or capital contribution from related organization(s)				1c	X				
d Loans or loan guarantees to or for related organization(s)				1d	X				
e Loans or loan guarantees by related organization(s)				1e	X				
f Dividends from related organization(s)				1f	X				
g Sale of assets to related organization(s)				1g	X				
h Purchase of assets from related organization(s)				1h	X				
i Exchange of assets with related organization(s)				1i	X				
j Lease of facilities, equipment, or other assets to related organization(s)				1j	X				
					77				
k Lease of facilities, equipment, or other assets from related organization(s)					<u> X</u>				
I Performance of services or membership or fundraising solicitations for related of					X				
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
Sharing of paid employees with related organization(s)				10	X				
					v				
p Reimbursement paid to related organization(s) for expenses				1p	X				
q Reimbursement paid by related organization(s) for expenses				1q	^				
Chartenafar of each ar property to related arganization(a)				4	Х				
					$\frac{x}{x}$				
S Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information or				18	Λ.				
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amour	nt involved					
Ç .	type (a-s)								
(1)									
(2)									
(3)									
(4)									
(5)									
(6)					20) 0044				
H32163 08-14-14	61		Sched	ule R (Form 9	90) 2014				

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) Percentage ownership
	-									