

TAX RETURN FILING INSTRUCTIONS

**** FORM 990 PUBLIC DISCLOSURE COPY ****

**FOR THE YEAR ENDING
DECEMBER 31, 2004**

Prepared for	THE WILD SALMON CENTER 721 NW 9TH NO. 290 PORTLAND, OR 97209
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 ONLY FOR PUBLIC DISCLOSURE PURPOSES. ANY CONFIDENTIAL INFORMATION REGARDING LARGE DONORS HAS BEEN REMOVED.

Form **990****Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

2004

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the **2004** calendar year, or tax year beginning

and ending

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

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

C Name of organization**THE WILD SALMON CENTER**

Number and street (or P.O. box if mail is not delivered to street address)

721 NW 9TH

Room/suite

290

City or town, state or country, and ZIP + 4

PORTLAND, OR 97209**D** Employer identification number**94-3166095****E** Telephone number**503-222-1804****F** Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) ▶

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

H and I are not applicable to section 527 organizations.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶**H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No
(If "No," attach a list.)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶**G** Website: ▶ **WWW.WILDSALMONCENTER.ORG****J** Organization type (check only one) ▶ ☒ 501(c) (**3**) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.**M** Check ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶**6,385,582.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	5,753,320.	
	b	Indirect public support	1b	25,500.	
	c	Government contributions (grants)	1c	167,232.	
	d	Total (add lines 1a through 1c) (cash \$ 5,875,790. noncash \$ 70,262.)	1d	5,946,052.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	425,391.	
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	3,523.	
	5	Dividends and interest from securities	5		
	6 a	Gross rents	6a		
	b	Less: rental expenses	6b		
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		
7	Other investment income (describe ▶)	7			
Revenue	8 a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	b	Less: cost or other basis and sales expenses	8a	2,982.	
	c	Gain or (loss) (attach schedule)	8b	2,701.	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	281.	
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	STMT 1	8d	281.
	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a		
	b	Less: direct expenses other than fundraising expenses	9b		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		
Revenue	10 a	Gross sales of inventory, less returns and allowances	10a		
	b	Less: cost of goods sold	10b		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
Expenses	11	Other revenue (from Part VII, line 103)	11	7,634.	
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	6,382,881.	
	13	Program services (from line 44, column (B))	13	3,895,577.	
	14	Management and general (from line 44, column (C))	14	632,250.	
	15	Fundraising (from line 44, column (D))	15	179,877.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses (add lines 16 and 44, column (A))	17	4,707,704.	
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	1,675,177.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1,072,003.	
	20	Other changes in net assets or fund balances (attach explanation)	20	0.	
Net Assets	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	2,747,180.	

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)			STATEMENT 7	
	(cash \$ <u>305,957</u> - noncash \$)	22 305,957.	305,957.		
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25 286,113.	206,493.	58,823.	20,797.
26	Other salaries and wages	26 996,028.	718,849.	204,778.	72,401.
27	Pension plan contributions	27 53,982.	40,550.	8,487.	4,945.
28	Other employee benefits	28 139,897.	119,900.	11,862.	8,135.
29	Payroll taxes	29 108,932.	86,622.	13,136.	9,174.
30	Professional fundraising fees	30			
31	Accounting fees	31 14,836.	2,944.	11,892.	
32	Legal fees	32 16,852.	6,797.	10,055.	
33	Supplies	33 267,820.	245,603.	21,595.	622.
34	Telephone	34 62,360.	46,527.	14,135.	1,698.
35	Postage and shipping	35 8,033.	2,890.	4,859.	284.
36	Occupancy	36 101,304.	84,989.	15,075.	1,240.
37	Equipment rental and maintenance	37 25,016.	18,685.	6,331.	
38	Printing and publications	38 50,382.	38,580.	5,123.	6,679.
39	Travel	39 407,380.	379,659.	13,564.	14,157.
40	Conferences, conventions, and meetings	40 16,052.	14,476.	1,198.	378.
41	Interest	41 6,685.		6,685.	
42	Depreciation, depletion, etc. (attach schedule)	42 94,454.	68,549.	25,772.	133.
43	Other expenses not covered above (itemize):				
a		43a			
b		43b			
c		43c			
d		43d			
e	SEE STATEMENT 2	43e 1,745,621.	1,507,507.	198,880.	39,234.
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44 4,707,704.	3,895,577.	632,250.	179,877.

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;

(iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service AccomplishmentsWhat is the organization's primary exempt purpose? **SEE STATEMENT 3**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
 (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a	SEE STATEMENT 4				
		(Grants and allocations \$	265,923.)		1,660,140.
b	SEE STATEMENT 5				
		(Grants and allocations \$	6,100.)		564,685.
c	TILLAMOOK RAINFOREST COALITION - A JOINT EFFORT OF 130 SMALL BUSINESS, ANGLER, COMMERCIAL FISHING, CONSERVATION, AND LANDOWNER GROUPS CONCERNED ABOUT THE FATE OF THE TILLAMOOK AND CLATSOP STATE FORESTS.				
		(Grants and allocations \$			825,070.
d	SEE STATEMENT 6				
		(Grants and allocations \$			574,313.
e	Other program services (attach schedule)	STATEMENT 8	(Grants and allocations \$	33,934.)	271,369.
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)				3,895,577.

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	227,622.	45	1,238,717.
	46 Savings and temporary cash investments	155,203.	46	126,886.
	47 a Accounts receivable 47a 191,306.			
	b Less: allowance for doubtful accounts 47b	53,774.	47c	191,306.
	48 a Pledges receivable 48a 100,000.			
	b Less: allowance for doubtful accounts 48b	412,682.	48c	100,000.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable 51a			
	b Less: allowance for doubtful accounts 51b		51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	25,184.	53	15,562.
	54 Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55 a Investments - land, buildings, and equipment: basis 55a			
	b Less: accumulated depreciation 55b		55c	
56 Investments - other		56		
57 a Land, buildings, and equipment: basis 57a 1,674,154.				
b Less: accumulated depreciation 57b 195,738.	230,548.	57c	1,478,416.	
58 Other assets (describe <input type="checkbox"/> REFUNDABLE ADVANCE)	150,000.	58	150,000.	
59 Total assets (add lines 45 through 58) (must equal line 74)	1,255,013.	59	3,300,887.	
Liabilities	60 Accounts payable and accrued expenses	183,010.	60	222,333.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	331,374.
	65 Other liabilities (describe <input type="checkbox"/>)		65	
	66 Total liabilities (add lines 60 through 65)	183,010.	66	553,707.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	303,246.	67	1,019,047.
	68 Temporarily restricted	768,757.	68	1,728,133.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	1,072,003.	73	2,747,180.
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	1,255,013.	74	3,300,887.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-B		Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
1	2017	2017
2	2018	2018
3	2019	2019
4	2020	2020
5	2021	2021
6	2022	2022
7	2023	2023
8	2024	2024
9	2025	2025
10	2026	2026
11	2027	2027
12	2028	2028
13	2029	2029
14	2030	2030
15	2031	2031
16	2032	2032
17	2033	2033
18	2034	2034
19	2035	2035
20	2036	2036
21	2037	2037
22	2038	2038
23	2039	2039
24	2040	2040
25	2041	2041
26	2042	2042
27	2043	2043
28	2044	2044
29	2045	2045
30	2046	2046
31	2047	2047
32	2048	2048
33	2049	2049
34	2050	2050
35	2051	2051
36	2052	2052
37	2053	2053
38	2054	2054
39	2055	2055
40	2056	2056
41	2057	2057
42	2058	2058
43	2059	2059
44	2060	2060
45	2061	2061
46	2062	2062
47	2063	2063
48	2064	2064
49	2065	2065
50	2066	2066
51	2067	2067
52	2068	2068
53	2069	2069
54	2070	2070
55	2071	2071
56	2072	2072
57	2073	2073
58	2074	2074
59	2075	2075
60	2076	2076
61	2077	2077
62	2078	2078
63	2079	2079
64	2080	2080
65	2081	2081
66	2082	2082
67	2083	2083
68	2084	2084
69	2085	2085
70	2086	2086
71	2087	2087
72	2088	2088
73	2089	2089
74	2090	2090
75	2091	2091
76	2092	2092
77	2093	2093
78	2094	2094
79	2095	2095
80	2096	2096
81	2097	2097
82	2098	2098
83	2099	2099
84	2100	2100
85	2101	2101
86	2102	2102
87	2103	2103
88	2104	2104
89	2105	2105
90	2106	2106
91	2107	2107
92	2108	2108
93	2109	2109
94	2110	2110
95	2111	2111
96	2112	2112
97	2113	2113
98	2114	2114
99	2115	2115
100	2116	2116
101	2117	2117
102	2118	2118
103	2119	2119
104	2120	2120
105	2121	2121
106	2122	2122
107	2123	2123
108	2124	2124
109	2125	2125
110	2126	2126
111	2127	2127
112	2128	2128
113	2129	2129
114	2130	2130
115	2131	2131
116		

a	Total expenses and losses per audited financial statements	a	4,707,704.
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities ... \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 ... \$		
(4)	Other (specify): \$		
	Add amounts on lines (1) through (4)	b	0.
c	Line a minus line b	c	4,707,704.
d	Amounts included on line 17, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990 ... \$		
(2)	Other (specify): \$		
	Add amounts on lines (1) and (2)	d	0.
e	Total expenses per line 17, Form 990 (line c plus line d)	e	4,707,704.

<div>Part 1</div> <div>List of Officers, Directors, Trustees, and Key Employees</div> <div>(A) Name and address</div>	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<div>-----</div> <div>SEE STATEMENT 9</div> <div>-----</div>		286,113.	18,392.	0.
<div>-----</div>				
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☐ Yes ☒ No

Part VI Other Information

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
b	If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b 28,700.		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed OREGON, WASHINGTON		
b	Number of employees employed in the pay period that includes March 12, 2004 90b 24		
91	The books are in care of THOMAS BLAND Telephone no. 503-222-1804		

Located at 721 NW 9TH, SUITE 290 PORTLAND, OR

ZIP + 4 97209

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ☐
and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a SALMON CONSERVATION					425,391.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	3,523.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	281.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS INCOME					7,634.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		3,804.	433,025.
105 Total (add line 104, columns (B), (D), and (E))					436,829.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	THE ORGANIZATION'S SALMON CONSERVATION PROGRAM IS CREATING A WORLD-WIDE SYSTEM OF SALMON SANCTUARIES, AND DEVELOPING THE SALMON POPULATION CONSERVATION STRATEGIES.
103A	OTHER INCOME USED FOR THE PROTECTION OF SALMON SPECIES AND ECOSYSTEMS

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	Signature of officer	Date
Paid Preparer's Use Only	Preparer's signature	Date
	Firm's name (or yours if self-employed), address, and ZIP + 4	Check if self-employed <input type="checkbox"/> Preparer's SSN or PTIN
423161 01-13-05	MCDONALD JACOBS, P.C. 520 SW YAMHILL, STE 500 PORTLAND OR 97204	EIN 93-0900579 Phone no. 503 227-0581

Department of the Treasury
Internal Revenue Service

**(Except Private Foundation) and Section 501(c)(3), 501(c)(6), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust**

Supplementary Information-(See separate instructions.)

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

OMB No. 1545-0047

2004

Name of the organization

THE WILD SALMON CENTER

Employer identification number

94: 3166095

Part I	Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
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(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ANDREI KLIMENKO ----- PORTLAND, OR	PROGRAM DIR. 40	70,078.	4,585.	
DAVID A. MOSKOWITZ ----- PORTLAND, OR	PROGRAM DIR. 40	64,104.	4,104.	
XANTHIPPE AUGEROT ----- PORTLAND, OR	PROGRAM DIR. 40	83,753.	5,464.	
DANA N. FOLEY ----- PORTLAND, OR	PROGRAM DIR. 40	62,359.	3,814.	
PETER S. RAND ----- PORTLAND, OR	PROGRAM DIR. 40	69,366.	3,366.	
Total number of other employees paid over \$50,000	0			

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

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

(a) Name and address of each independent contractor paid more than \$50,000		(b) Type of service	(c) Compensation
LIMBO FILMS ----- 1801 NW NORTHRUP, PORTLAND, OR 97209 ----- ----- ----- ----- ----- -----			62,124.
Total number of others receiving over \$50,000 for professional services		0	

Yes	No
-----	----

- | | | |
|---|---|--|
| 1 | X | |
|---|---|--|

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- | | |
|-----------|----------|
| 2a | X |
|-----------|----------|

- | | | |
|-----------|--|----------|
| 2b | | X |
|-----------|--|----------|

- | | | |
|-----------|--|----------|
| 2c | | X |
|-----------|--|----------|

- | | |
|----|---|
| 2d | X |
|----|---|

- | | |
|----|---|
| 2e | X |
|----|---|

- y

- | | | |
|----|--|---|
| 3b | | X |
|----|--|---|

- 11

- | | | |
|----|--|---|
| 4b | | X |
|----|--|---|

- _____

- ed in:

(b) Line number
from above

- 10

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,879,522.	1,710,781.	2,234,148.	1,438,878.	8,263,329.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose		1,192,987.	26,462.	1,500.	1,220,949.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	2,650.	7,937.	16,940.	6,311.	33,838.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	8,931.	1,071.	SEE STATEMENT 10 9,559.	6,042.	25,603.
23 Total of lines 15 through 22	2,891,103.	2,912,776.	2,287,109.	1,452,731.	9,543,719.
24 Line 23 minus line 17	2,891,103.	1,719,789.	2,260,647.	1,451,231.	8,322,770.
25 Enter 1% of line 23	28,911.	29,128.	22,871.	14,527.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 166,455.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 3,491,605.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 8,322,770.
d Add: Amounts from column (e) for lines: 18 33,838. 19 22 25,603. 26b 3,491,605.					26d 3,551,046.
e Public support (line 26c minus line 26d total)					26e 4,771,724.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 57.3334%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2003) (2002) (2001) (2000)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2003) (2002) (2001) (2000)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)			27f N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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

Schedule A (Form 990 or 990-EZ) 2004

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

(To be completed ONLY by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	227,120.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	226,565.
38	Total lobbying expenditures (add lines 36 and 37)	38	453,685.
39	Other exempt purpose expenditures	39	4,254,019.
40	Total exempt purpose expenditures (add lines 38 and 39)	40	4,707,704.
41	Lobbying nontaxable amount. Enter the amount from the following table -		
If the amount on line 40 is - The lobbying nontaxable amount is -			
Not over \$500,000 20% of the amount on line 40			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000			
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000		41	385,385.
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			
42	Grassroots nontaxable amount (enter 25% of line 41)	42	96,346.
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	130,774.
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	68,300.

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

4-Year Averaging Period Under Section 501(h)

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

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount	385,385.	280,407.	0.	0.	665,792.
46 Lobbying ceiling amount (150% of line 45(e))					998,688.
47 Total lobbying expenditures	453,685.	0.	0.	0.	453,685.
48 Grassroots nontaxable amount	96,346.	70,102.	0.	0.	166,448.
49 Grassroots ceiling amount (150% of line 48(e))					249,672.
50 Grassroots lobbying expenditures	227,120.	0.	0.	0.	227,120.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0.

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

12

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2004

Name of organization

THE WILD SALMON CENTER

Employer identification number

94-3166095

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

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

General Rule-

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

Special Rules-

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

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

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

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2004)

Name of organization

Employer identification number

THE WILD SALMON CENTER

94-3166095

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 335,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 2,559,123.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 723,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE WILD SALMON CENTER

94-3166095

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 276,346.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

FORM 990	GAIN (LOSS) FROM SALE OF OTHER ASSETS	STATEMENT	1
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DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
OFFICE EQUIPMENT	VARIOUS	VARIOUS	PURCHASED	
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC
	2,982.	5,544.	0.	2,843.
TO FM 990, PART I, LN 8	2,982.	5,544.	0.	2,843.
				NET GAIN OR (LOSS)
				281.
				281.

FORM 990	OTHER EXPENSES	STATEMENT	2
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
CONTRACT PERSONNEL	496,290.	452,182.	30,935.	13,173.
DUES & SUBSCRIPTIONS	21,803.	3,542.	15,384.	2,877.
INSURANCE	19,424.	6,904.	12,520.	
MAPPING	34,430.	25,979.	2,653.	5,798.
MEETINGS	72,034.	53,725.	6,299.	12,010.
MEDIA OUTREACH	138,329.	137,840.	489.	
MISCELLANEOUS EXPENSE	1,103.	40.		1,063.
OTHER PERSONNEL EXPENSE	39,586.	36,083.	1,076.	2,427.
PROFESSIONAL SERVICES	171,195.	152,259.	17,416.	1,520.
RECRUITMENT EXPENSE	7,641.	1,842.	5,776.	23.
TAXES & LICENSES	134,941.	78,266.	56,332.	343.
TRANSLATION & INTERPRETATION	20,329.	20,329.		
PROGRAM EQUIPMENT	7,735.	7,735.		
BAD DEBT EXPENSE	127,096.	127,096.		
LOBBYING	453,685.	403,685.	50,000.	
TOTAL TO FM 990, LN 43	1,745,621.	1,507,507.	198,880.	39,234.

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT	3
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EXPLANATION

TO IDENTIFY AND PROTECT THE MOST PRODUCTIVE AND SPECIES-RICH REMAINING SALMON ECOSYSTEMS ALONG THE NORTHERN PACIFIC RIM.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	4
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DESCRIPTION OF PROGRAM SERVICE ONE

KAMCHATKA SALMON BIODIVERSITY PROGRAM - A JOINT EFFORT OF THE RUSSIAN GOVERNMENT AND THE WILD SALMON CENTER TO SUPPORT THE CONSERVATION, RESEARCH, AND ECONOMIC DEVELOPMENT OF SALMON, TROUT, AND STEELHEAD ON RUSSIA'S KAMCHATKA PENINSULA.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	265,923.	1,660,140.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	5
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DESCRIPTION OF PROGRAM SERVICE TWO

CASCADIA SALMON BIODIVERSITY PROGRAM - A JOINT EFFORT OF THE WILD SALMON CENTER, OREGON TROUT, AND ECOTRUST TO CREATE A SYSTEM OF SANCTUARIES FOR NATIVE SALMON AND STEELHEAD IN THE UNITED STATES PACIFIC NORTHWEST, FOCUSING ON THE MOST PRODUCTIVE AND SPECIES-RICH SALMON ECO-SYSTEMS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE B	6,100.	564,685.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	6
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DESCRIPTION OF PROGRAM SERVICE FOUR

THE STATE OF THE SALMON PROGRAM IS A COOPERATIVELY ORGANIZED SOURCE OF INFORMATION AND KNOWLEDGE ON NORTH PACIFIC SALMON - A RESOURCE THAT WILL FOSTER INFORMED POLICY TO ENSURE A THRIVING FUTURE FOR SALMON AND ALL LIFE THAT DEPENDS ON THE CONTINUING EXISTENCE OF SALMON.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE D		574,313.

FORM 990	CASH GRANTS AND ALLOCATIONS	STATEMENT	7
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CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
	SEE ATTACHED		NONE	305,957.

TOTAL INCLUDED ON FORM 990, PART II, LINE 22	305,957.
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<u>Activity</u>	<u>Amount</u>	<u>Name</u>	<u>Address</u>
public outreach	1,050	Elisovo Association of Indigenous People	Kamchatka, Russia
public outreach	549	WFBF office in Koryakia	Kamchatka, Russia
public outreach	1,033	Elisovo Association KMNS	Kamchatka, Russia
science	103	Borisenko, student Kamchatka University	Kamchatka, Russia
public outreach	14,613	Sobolevo schools	Kamchatka, Russia
public outreach	651	Miscellaneous	Kamchatka, Russia
Antipoaching	5,675	Sevvostrivvod	Kamchatka, Russia
Antipoaching	35,000	Kamchatka Sustainable Fisheries Foundation	Kamchatka, Russia
public outreach	100	Hoh River Trust	Seattle, WA
public outreach	6,000	The North Umpqua Foundation	Roseburg, OR
public outreach	4,000	Thomas Dunklin	Arcata, CA
public outreach	28,067	Greenpoint Ltd.	Hershey, PA
public outreach	3,000	DodoSong	Portland, OR
Antipoaching	3,001	Krechet (Hunting and Fishing Society)	Khabarovsk, Russia
public outreach	1,310	Magadan Center for the Environment	Magadan, Russia
science	12,000	MANT-DV (Interregional Association of Independent Tour Operators)	Khabarovsk, Russia
public outreach	2,500	Okhotsk Wild Nature Fund	Magadan, Russia
public outreach	4,500	Sakhalin Environment Watch	Yuzhno-Sakhalinsk, Russia
public outreach	8,458	Sakhalin Wild Nature Fund	Yuzhno-Sakhalinsk, Russia
science	2,165	Anatoliy Semenchenko	Vladivostok, Russia
science	110,300	University of Montana	Missoula, MT
science	13,500	Kirill Kuzishchin, Ph.D	Moscow, Russia
science	8,265	Marina Gruzdeva, Ph.D	Moscow, Russia
science	15,300	Dmitriy Pavlov, Ph.D	Moscow, Russia
science	5,100	Sergey Pavlov	Moscow, Russia
science	3,165	Oleg Pustovit, Ph.D	Kamchatka, Russia
science	15,300	Ksenia Savvaitova, Ph.D	Moscow, Russia
science	1,250	Sergey Sokolov	Moscow, Russia
	<u>305,957</u>		

FORM 990	OTHER PROGRAM SERVICES	STATEMENT	8
DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES	
RUSSIAN FAR EAST SALMON BIODIVERSITY PROGRAM - COLLABORATION WITH SCIENTISTS AND POLICY EXPERTS ACROSS RUSSIAN FAR EAST TO DEVELOP CONSERVATION STRATEGIES AND AND ACTION PLANS TO TO PROTECT THE MOST SPECIES-RICH, HEALTHY AND UNIQUE SALMON WATERSHEDS ACROSS THE RUSSIAN FAR EAST, FROM PRIMORYE TO CHUKOTKA.	33,934.	271,369.	
TOTAL TO FORM 990, PART III, LINE E	33,934.	271,369.	

FORM 990	PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES	STATEMENT	9
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN EXPENSE CONTRIB ACCOUNT	
DIMITRI S. PAVLOV C/O ORGANIZATION PORTLAND, OR	VICE PRESIDENT 5	0.	0.	0.
EHOR BOYANOWSKY C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.
VLADIMIR BURKANOV C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.
MARK T. GATES C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.
JOHN MCGLENN C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.

THE WILD SALMON CENTER

94-3166095

THOMAS MCGUANE C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.
WERNER K. PAULUS C/O ORGANIZATION PORTLAND, OR	CHAIRMAN 2	0.	0.	0.
SAM WALTON C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.
JAMES W. RATZLAFF C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.
PETER SELIGMANN C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.
JACK STANFORD, PH.D. C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.
J. DAVID WIMBERLY C/O ORGANIZATION PORTLAND, OR	DIRECTOR 2	0.	0.	0.
PETER W. SOVEREL C/O ORGANIZATION PORTLAND, OR	DIRECTOR 40	87,298.	3,500.	0.
GUIDO R. RAHR C/O ORGANIZATION PORTLAND, OR	WSC PRESIDENT 40	108,541.	7,013.	0.
THOMAS C. BLAND C/O ORGANIZATION PORTLAND, OR	CHIEF FINANCIAL OFFICER 40	90,274.	7,879.	0.

TOTALS INCLUDED ON FORM 990, PART V

286,113.	18,392.	0.
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SCHEDULE A	OTHER INCOME			STATEMENT 10
DESCRIPTION	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT
OTHER RELATED TO EXEMPT PURPOSE INCOME	8,931.	1,071.	9,559.	6,042.
TOTAL TO SCHEDULE A, LINE 22	8,931.	1,071.	9,559.	6,042.