** PUBLIC DISCLOSURE COPY **

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A	For the	ne 2009 calendar year, or tax year beginning and ending		
В	Check i applica	r Please use IRS C Name of organization	D Employer identif	ication number
	Addi	ess label or Wild Salmon Center		
F	Nam chan	e type	94-3	166095
	Initia			
F	Term	in- Specific 7.21 NTV O+b A C		
	- ated Ame	Instruc-	(503	
-	retur □Appl	City of town, state or country, and ZIP + 4	G Gross receipts \$	6,608,953.
L.	tion	POLLIANA, OR 9/209-3446	H(a) Is this a group r	
		F Name and address of principal officer: Guido R. Rahr III	for affiliates?	Yes X No
		same as C above	H(b) Are all affiliates in	
		xempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		list. (see instructions)
		ite: ▶ www.wildsalmoncenter.org	H(c) Group exemption	n number 🕨
	Form o art 1	organization: X Corporation Trust Association Other L Summary	Year of formation: 1992	M State of legal domicile: WA
4)	1	Briefly describe the organization's mission or most significant activities: To ident	ify, understa	nd and
& Governance	1	protect the best wild salmon ecosystems of t		
'n	2	Check this box if the organization discontinued its operations or disposed of r		
Š	3	54 549 549 549 549 549 549 549 549 549 5	3	14
ၓ	4	Number of independent voting members of the governing body (Part VI, line 1b)		12
ళ	5	Total number of employees (Part V, line 2a)		49
Activities	6			
₹.		Total number of volunteers (estimate if necessary)	6	17
Ac		Total gross unrelated business revenue from Part VIII, column (C), line 12		0.
	Ь	Net unrelated business taxable income from Form 990-T, line 34		0.
		0 17 17 17 17 17 17	Prior Year	Current Year
ne	8	Contributions and grants (Part VIII, line 1h)	9,092,068.	6,551,913.
Revenue	9	Program service revenue (Part VIII, line 2g)	28,867.	
Вè	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	43,736.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,287.	
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,165,958.	6,608,953.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,464,216.	2,839,472.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
Ŋ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,938,203.	2,665,771.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		The state of the s
be		Total fundraising expenses (Part IX, column (D), line 25) \$\rightarrow\$ 489,173.		
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,280,456.	1,405,853.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	7,682,875.	
		Revenue less expenses. Subtract line 18 from line 12	1,483,083.	-302,143.
Sa		Trevende 1655 expenses. Cubitact into 16 non into 12	Beginning of Current Year	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	6,167,111.	End of Year 5,666,370.
Ass Bal	20		509,383.	
et Pier	21	Total liabilities (Part X, line 26)	5,657,728.	303,713. 5,362,657.
	ırt II	Net assets or fund balances. Subtract line 21 from line 20	5,051,120.	3,304,037.
1 6		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme	nts, and to the best of my knowledge	ne and belief it is true correct
		and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	dge.	go and ponor, it to trac, correct,
٥.			1	
Sign		Signature of officer	Date	
Her	е		Date	
		Guido R. Rahr III, President		
		Type or print name and title	Chook if	
Paid		Preparer's Sure College	self- (see ins	er's idenlifying number structions)
	arer's	signature Olly 3/16	employed	
Use		Firm's name (or yours if McDONALD JACOBS, P.C.	EIN ▶	
200	~ j	self-employed), address, and		
		ZIP+4 PORTLAND, OR 97204	Phone no. ► 5	03 227-0581
Мау	the II	RS discuss this return with the preparer shown above? (see instructions)		Yes No

Form 990 (2009) 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		l	
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	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; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	Did the organization report an amount for investments · other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			411
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			_ 1531
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			199.47
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		995907	
	located outside the United States? If "Yes," complete Schedule F, Part III	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		500	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X_
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		_X_
	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		_ <u>X</u> _
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	990 (<u>X</u>

Form 990 (2009) Wild Salmon Center Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Yes	No
	United States 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 and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		х
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		
	Section 501(c)(3) and 501(c)(4) 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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? 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			4-4
	instructions for applicable filing thresholds, conditions, and exceptions):	1 44		
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 of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
	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 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	Х	
		Form 9	990 (2	2009)

Form 990 (2009) Wild Salmon Center Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
55	U.S. Information Returns. Enter -0- if not applicable 1a 42			
b)		
С	, , , , , , , , , , , , , , , , , , ,		7	
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
141	filed for the calendar year ending with or within the year covered by this return 2a 49	-		13.00
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			The state of
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	-	-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		l	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	-
b	If "Yes," enter the name of the foreign country: ► Russia			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.		10	1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	000-12-19-000	-
7	Organizations that may receive deductible contributions under section 170(c).	9 30		77.76
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
9	provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	770000		
0.00	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1000		
	benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	January V	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
^	at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			6.45
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from members or shareholders			
	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	10-		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
<u>n</u>	ii 163, Gitter the amount of tax-exempt interest received of accided duffing the year	Cause	000	(0000)

Form 990 (2009)

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.

Sec	ction A. Governing Body and Management					
9100		r r	1		Yes	No
1a		1a	14			
b	1		12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	# 6500 NAME				100
_	officer, director, trustee, or key employee?			2_		X
3	Did the organization delegate control over management duties customarily performed by or under the			19900		
	of officers, directors or trustees, or key employees to a management company or other person?			3_		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo			4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset			5		X
6	Does the organization have members or stockholders?			6		X
7a				1000		l
	governing body?			7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during the year			9 7 1	13.5
	by the following:					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea		Ì			
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)				r
			г		Yes	No
	Does the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such					
	and branches to ensure their operations are consistent with those of the organization?			10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fil	ing the form? \dots		11		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ld give rise			000000	
	to conflicts?			12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "					
	in Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva	l by independent	8			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				200-20	
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent with a	İ			
	taxable entity during the year?			16a		_X_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eval	uate its participa	tion			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organic	ınization's		313	-	
	exempt status with respect to such arrangements?		<u></u>	16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶AZ, AR, CO, DC, G.	A,MD,MA,N	IN, NC	NM	, NY	,OH
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(501(c)(3)s only)	available f	or		
	public inspection. Indicate how you make these available. Check all that apply.					
	X Own website X Another's website Dpon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, co	onflict of interest	policy, and	l finar	ncial	
	statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books are	d records of the	organizatio	on: 🕨		
	Anna V. Gabis - (503) 222-1804		- MAGE 19			
	721 NW 9th Avenue, Suite 300, Portland, OR 97209-	3446				

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."

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

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

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

(A) Name and Title	(B) Average hours			(C Pos	C) ition		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Michael Sutton Board Chair	1.00	х		х			0.	0.	0.
Stone Gossard Director		Х					0.	0.	0.
Leah Hair Director	1.00	х					0.	0.	0.
John Kitzhaber Director		X					0.	0.	
Jim Lichatowich									0.
<u>Director</u> Sydney McNiff-Ferguson	1.00	X					0.	0.	0.
<u>Director</u> Werner K. Paulus	1.00	X					0.	0.	0.
Director Dmitry Pavlov	1.00	Х					0.	0.	0.
Director James W. Ratzlaff	1.00	X					11,400.	0.	0.
Director Peter Seligmann	1.00	х					0.	0.	0.
Director	1.00	Х		-			0.	0.	0.
Peter Soverel Director	1.00	х					32,492.	0.	1,306.
Jack Stanford Director	1.00	х					0.	0.	0.
David Wimberly Director	1.00	х					0.	0.	0.
John E. McCosker Director	1.00	х					0.	0.	0.
Guido R. Rahr III President & CEO	40.00			х			 154,688.	0.	21,823.
Jeffrey Baumgartner Exec. VP; Board Sec/Trea	40.00			x			100,500.	0.	18,432.
Thomas C. Bland	40.00			X			78,433.	0.	15,138.
CFO	±0.00			Λ	-		 10,433.	0.1	13,130.

Part VII Section A. Officers, Directors, Tru	stees, Key E	mple	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)			
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average	,_		Pos			L A	Reportable	Reportable	2000	stima	
	hours per		neci	(all	tnat	app	iy)	compensation from	compensation from related	a	mour othe	
	week	ndividual trustee or director						the	organizations	con		sation
		se or d	stee			nsated		organization	(W-2/1099-MISC)		from 1	
		trust	nstitutional trustee		oyee	Highest compensated employee		(W-2/1099-MISC)		9.3		ation
		ividua	itution	Officer	Key employee	hest c	Former			10.000	nd rel Janiza	ated ations
	60% 1575 and 781 to 600 Mar 100 Mar 100 Mar	E	Isi	ŧ	Key	훈통	For			0.9	,	
Greg Block												
VP Conservation Programs	40.00			X				79,642.	0.	1	5,	298.
Rachel Uris	8 0 0 10								5			
VP Rsrces., Commncation.	40.00		-	X		ļ.,		42,170.	0.	<u> </u>	4,	871.
-			-							-		
			ĺ									
					-							
							eranimi-			 		
(
												1110
	-											
										ļ		eronos .
							_	499,325.	0.	 	<i>c</i> (868.
Total Total number of individuals (including but n) wh	0 10				0,0	000.
compensation from the organization	ot innited to th	USC	11316	u ai	JUVE	5) VVI	10 16	eceived more than \$100	,000 iii reportable			2
demperioanen nem me organization	ns besiden	10 - 20	307.000			-01-01	140-10				Yes	
3 Did the organization list any former officer,	director or tru	stee	, key	y em	ploy	yee,	or h	nighest compensated en	nployee on			
line 1a? If "Yes," complete Schedule J for s	uch individual						,			3		X
4 For any individual listed on line 1a, is the su	m of reportab	e cc	mpe	ensa	ation	and	oth	ner compensation from t	he organization	ACC		
and related organizations greater than \$150),000? If "Yes,	" co	mple	ete S	Sche	edule	Jf	or such individual		4	X	
5 Did any person listed on line 1a receive or a				rom	any	unre	elate	ed organization for servi	ces rendered to		1	
the organization? If "Yes," complete Schede	ule J for such _I	oers	on .							5		X
Section B. Independent Contractors		•						Enter A corrected to the about the Enterodorman Laboratory			• 10000 7000	
 Complete this table for your five highest countries the organization. NONE	npensated inc	epe	enae	nt c	ontr	acto	rs ti	nat received more than	\$ 100,000 of compens	ation 1	rom	
the organization. NONE			-				Т	(B)			C)	
Name and business	address							Description of s	ervices C	compe		on
***************************************					0							
	0											
							_					
							\dashv				-	
O Total number of independent contractors (in	aduding but =	o+ 6-	nita	4 + ~	tha	no lie	+0~	aboval who received	oro than		70 17	
2 Total number of independent contractors (ir \$100,000 in compensation from the organiz		ot III	inte	י נס		se IIS)	ted	above) who received m	ore mail			
φτου,σου in compensation from the organiz	ation		-							Form	990	(2009)
										OILL		(2003)

31,625.

25,415. Form **990** (2009)

Total revenue. See instructions. _____ | 6,608,953.

Form 990 (2009) Wild Salmon C Part IX Statement of Functional Expenses

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

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	977,708.	977,708.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	1,861,764.	1,861,764.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	576,193.	376,357.	97,014.	102,822.
6	Compensation not included above, to disqualified	NO. 100 MILES		332033444404	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,579,737.	1,201,690.	156,950.	221,097.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	71,217.	49,932.	7,419.	13,866.
9	Other employee benefits	281,208.	201,707.	40,688.	38,813.
10	Payroll taxes	157,416.	116,331.	18,340.	22,745.
11	Fees for services (non-employees):				
E					
b		4,173.	2,292.	1,881.	
	Accounting	17,921.	1,900.	16,021.	
C		22,375.	22,375.		
e					
f	· · · · · · · · · · · · · · · · · · ·	004 617	000 440		
g		284,617.	280,442.		4,175.
12	Advertising and promotion	59,204.	51,994.	632.	6,578.
13	Office expenses	83,178.	40,362.	33,496.	9,320.
14	Information technology		-		
15	Royalties	175,296.	124,438.	24 100	16 660
16	Occupancy	420,062.		34,190. 23,165.	16,668.
17	Travel	420,002.	364,400.	23,103.	32,497.
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials Conferences, conventions, and meetings	64,860.	64,680.	135.	1 E
19	127 35 37	6,474.	04,000.	6,474.	45.
20	Payments to affiliates	0,4/4.		0,4/4.	
21	Depreciation, depletion, and amortization	100,993.	64,754.	32,168.	4,071.
23	**************************************	19,638.	7,869.	11,593.	176.
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)	1370301	7,0051	11,333.	170.
а	Miscellaneous expense	74,657.	33,237.	25,951.	15,469.
b	a	30,521.	30,521.	•	
c		19,730.	19,555.	125.	50.
d		19,421.	18,321.	1,100.	
е	Dues and Subscriptions	2,733.	1,026.	926.	781.
f					
25	Total functional expenses. Add lines 1 through 24f	6,911,096.	5,913,655.	508,268.	489,173.
26	Joint costs. Check here if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Pa	ırt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,049,913.	1	886,989
	2	Savings and temporary cash investments			2,401,001.	2	2,940,367
	3	Pledges and grants receivable, net		************	1,470,973.	3	1,315,362
	4	Accounts receivable, net			5,466.	4	3,905
	5	Receivables from current and former officers, dire				<u> </u>	
		employees, and highest compensated employees	s. Complete P	art II			
		of Schedule L		L		5	
	6	Receivables from other disqualified persons (as d	lefined under	section		7.39	
		4958(f)(1)) and persons described in section 4958	B(c)(3)(B). Con	plete			
		Part II of Schedule L	*******		V	6	
ts	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			8		
Ÿ	9	Prepaid expenses and deferred charges			63,259.	9	54,200.
	10a	Land, buildings, and equipment: cost or other	1				
		basis. Complete Part VI of Schedule D	10a	524,913.			
	ь	Less: accumulated depreciation		368,741.	1,176,499.	10c	156,172.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 11		12	309,375.		
	13	Investments - program-related. See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equal			6,167,111.	16	5,666,370.
	17	Accounts payable and accrued expenses			373,286.	17	232,572.
	18	Grants payable		18			
	19	Deferred revenue				19	2,743.
	20	Tax-exempt bond liabilities				20	
Ŋ	21	Escrow or custodial account liability. Complete Pa				21	
Liabilities	22	Payables to current and former officers, directors,					
abil	\$528 ES	highest compensated employees, and disqualified	d persons. Co	mplete Part II			
ij		of Schedule L				22	
	23	Secured mortgages and notes payable to unrelate			136,097.	23	68,398.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities. Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			509,383.	26	303,713.
		Organizations that follow SFAS 117, check here				Steak in the	
S		lines 27 through 29, and lines 33 and 34.				3/4/2	
nç	27	Unrestricted net assets			2,756,071.	27	1,791,552.
Net Assets or Fund Balances	28	Temporarily restricted net assets			2,901,657.	28	3,571,105.
d B	29					29	
Ë		Organizations that do not follow SFAS 117, che					
٥.		complete lines 30 through 34.					
sts	30	Capital stock or trust principal, or current funds			30		
SS	31	Paid-in or capital surplus, or land, building, or equi				31	
et A	32	Retained earnings, endowment, accumulated inco				32	
ž	33	Total net assets or fund balances			5,657,728.	33	5,362,657.
	34	Total liabilities and net assets/fund balances			6,167,111.	34	5,666,370.

5,666,370. Form **990** (2009)

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		х
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
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 Schedule O.		9 10	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			1
	consolidated basis, separate basis, or both:			15.
	X Separate basis Consolidated basis Both consolidated and separate basis	4000		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single 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 audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		Form	990 (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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. ➤ See separate instructions.

Name of the organization
Wild Salmon Conte

Employer identification number

-373			almon Center						94	<u> -3166</u>	<u> 095</u>	
Part I	Reason	for Public Cha	rity Status (All organi	zations mu	ist comple	te this par	t.) See ins	tructions.				
he orga	nization is not	a private foundatior	n because it is: (For lines	1 through	11, check	only one b	oox.)					
1	A church, co	nvention of church	es, or association of chui	rches desc	ribed in se	ection 170)(b)(1)(A)(i).				
2	A school des	scribed in section 1	70(b)(1)(A)(ii). (Attach So	chedule E.)	G.							
3	A hospital or	a cooperative hosp	oital service organization	described	in section	170(b)(1)	(A)(iii).					
4	A medical re	search organization	operated in conjunction	with a hos	pital desc	ribed in s e	ection 170	(b)(1)(A)(i	ii). Enter th	ne hospital	's nam	ne,
	city, and sta	te:			100 200 00000							
5	An organizat	tion operated for the	e benefit of a college or u	niversity o	wned or o	perated by	a govern	mental un	it describe	d in		
	section 170	(b)(1)(A)(iv). (Comp	lete Part II.)									
6 🔲	A federal, sta	ate, or local governr	ment or governmental un	it describe	d in sectio	n 170(b)(1)(A)(v).					
7 X	An organizat	ion that normally re	ceives a substantial part	of its supp	ort from a	governme	ental unit d	or from the	general p	ublic desc	ribed i	n
	section 170	(b)(1)(A)(vi). (Compl	lete Part II.)									
8 🔲	A community	y trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 🔲	An organizat	ion that normally re-	ceives: (1) more than 33	1/3% of its	support f	rom contr	ibutions, n	nembershi	ip fees, and	d gross red	ceipts	from
	activities rela	ated to its exempt fu	unctions - subject to certa	ain excepti	ons, and (2) no more	than 33	1/3% of its	s support fi	rom gross	invest	ment
	income and	unrelated business	taxable income (less sec	tion 511 ta	x) from bu	sinesses :	acquired b	y the orga	anization af	fter June 3	0, 197	' 5.
	See section	509(a)(2). (Complet	te Part III.)					× × × × ×				
10 🔲			perated exclusively to te	st for publ	ic safety. S	See sectio	on 509(a)(4	1).				
11 🔲	An organizat	ion organized and o	perated exclusively for the	he benefit	of, to perfo	orm the fu	nctions of	or to carr	y out the p	ourposes o	of one	or
	more publicly	y supported organiz	ations described in secti	ion 509(a)(1) or section	on 509(a)(2	2). See se e	ction 509(a)(3). Chec	ck the box	that	
	describes th	e type of supporting	g organization and compl	lete lines 1	1e through	11h.						
	a Type	ı ь[Type II	с 🔲 Тур	e III - Fund	tionally in	tegrated		d 🔲	Type III - C	Other	
е 🔙	By checking	this box, I certify th	at the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified pe	ersons oth	er tha	n
	foundation n	nanagers and other	than one or more publicl	y supporte	d organiza	ations des	cribed in s	ection 50	9(a)(1) or se	ection 509	(a)(2).	
f	If the organiz	ation received a wr	itten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check t	this box									
g	Since Augus	t 17, 2006, has the	organization accepted a	ny gift or c	ontributior	from any	of the foll	owing per	sons?	8		
	(i) A perso	n who directly or in	directly controls, either a	lone or tog	ether with	persons o	described	in (ii) and (iii) below,		Yes	No
	the gov	erning body of the s	supported organization?							11g(i)		
	(ii) A family	member of a perso	on described in (i) above?) 						11g(ii)		
	(iii) A 35%	controlled entity of a	a person described in (i)	or (ii) above	e?				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11g(iii)		
h	Provide the f	ollowing information	n about the supported or	ganization	(s).							
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the c	organization		u notify the	(vi) Is	the	(vii) Am	ount o	f
700	anization		organization (described on lines 1-9		sted in your		tion in col.	organizátie (i) organiz	ed in the	supp		
			above or IRC section	governing	document?	(i) of you	r support?	U.S	.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
								144				
otal					Manager to the			and the second second				

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Wild Salmon Center 94-31660
Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if you checke	d the box on line 5	i, 7, or 8 of Part I.)				(0000.0 -
Se	ction A. Public Support			as himbo to the	530 10.880 (i. 10.080 No.)		
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5483767.	7716091.	4104618.	9092068.	6551913.	32948457.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						ļ
	or expended on its behalf		<u> </u>				
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5483767.	7716091.	4104618.	9092068.	6551913.	32948457.
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)						16907974.
6	Public support. Subtract line 5 from line 4.						16040483.
Se	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	5483767.	7716091.	4104618.	9092068.	6551913.	32948457.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	V					
	and income from similar sources	12,207.	71,216.	133,062.	44,107.	25,415.	286,007.
9	Net income from unrelated business			ij .			
	activities, whether or not the						
	business is regularly carried on				,-	41	
10	Other income. Do not include gain				**		
	or loss from the sale of capital						
	assets (Explain in Part IV.)	12,071.	6,308.	7,827.	937.	2,798.	
11	Total support. Add lines 7 through 10						33264405.
	Gross receipts from related activities,				***************************************	12	624,004.
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	ax year as a section	n 501(c)(3)	
_	organization, check this box and stop				****		>
	ction C. Computation of Publ					- T	
	Public support percentage for 2009 (I						48.22 %
	Public support percentage from 2008						50.20 %
16a	33 1/3% support test - 2009. If the or						
	stop here. The organization qualifies						
b	33 1/3% support test - 2008. If the or						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test	er annamentation regions are ex-					
	more, and if the organization meets th	ie "facts-and-circu	mstances" test, ch	eck this box and :	stop here. Explain	in Part IV how the)

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Pa	art III Support Schedule for 0	Organizations	Described in	Section 509(a	a)(2) (Complete on	ly if you checked the b	ox on line 9 of Part I
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 performed, 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						
3	furnished by a governmental unit to						
	the examination without shares						
6	Total. Add lines 1 through 5						
7 2	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons 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						
(Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Se	ction B. Total Support					4874	
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	tax year as a sect	on 501(c)(3) organiz	ation,
					***********		▶□
Sec	ction C. Computation of Publi	ic Support Pe	rcentage				esta di Colonia
	Public support percentage for 2009 (li			column (f)) ,	·	15	%
16	Public support percentage from 2008	Schedule A, Part	III, line 15			16	%
	ction D. Computation of Inves		and the second s				
17	Investment income percentage for 20			ne 13. column (fl)		17	%
18	Investment income percentage from 2						%
	33 1/3% support tests - 2009. If the						
198	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2008. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is n	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che						the contract of the contract o
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	nstructions	>

Schedule A (Form 990 or 990-EZ) 2009

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

2009

	Wi	ld Salmon Center	94-3166095
Organiz	ation type (check or	ne):	
Filers of	:	Section:	
Form 99	0 or 990-EZ	X 501(c)(3) (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 990	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	
	•	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 Ru	le. See instructions.
General	Rule		
	For an organization contributor. Comple	filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in moste Parts I and II.	oney or property) from any one
Special I	Rules		
	509(a)(1) and 170(b)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the region (1)(A)(vi), and received from any one contributor, during the year, a contribution of the Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
	aggregate contribut	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or uelty to children or animals. Complete Parts I, II, and III.	
	contributions for us If this box is checke purpose. Do not co	(7), (8), or (10) organization filing Form 990 or 990·EZ that received from any one contribute exclusively for religious, charitable, etc., purposes, but these contributions did not aged, enter here the total contributions that were received during the year for an exclusively mplete any of the parts unless the General Rule applies to this organization because it, etc., contributions of \$5,000 or more during the year.	gregate to more than \$1,000. <i>ly</i> religious, charitable, etc., received nonexclusively
but it mu	st answer "No" on I	at is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 g requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF.

	-	_	
Page	1 of	2 of Part	1

Name of organization

Employer identification number

Wild Salmon Center

94-3166095

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$\$ <u>1,533,939.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6		\$\$	Person X Payroll
023452 02-01	1-10	Schedule B (Form	990, 990-EZ, or 990-PF) (2009)

_	•	^
Page	2 of	2 of Part I

Name of organization

Employer identification number

Wild Salmon	Center
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94-3166095

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$26,012.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8		\$\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
NO.	Name, address, and zir + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Page 1 of 1 of Part II
Employer identification number

Wild Salmon Center

94-3166095

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	Bonds and accrued interest		
		\$ 473,988.	02/20/19
(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. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	Terror .
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	10	\$	0. 990-EZ. or 990-PF)

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

Inspection Inspection

Continue FOI(x/g) arganizations Consults Date I A and D. Da not consults Date I O

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

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

If the organization answered "Yes," 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.
- 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), the	If the organization a	nswered "Yes,"	to Form 990	Part IV,	line 5 (P	roxy Tax)	, then
---	-----------------------	----------------	-------------	----------	-----------	-----------	--------

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
	Wild Sa	lmon Center	a 190		94-3166095
Pa	art I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527 of	organization.
	Provide a description of the organization				
	Political expenditures				
3	Volunteer hours				
Pa	art I-B Complete if the org	ganization is exempt und	er section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization und	er section 4955	> \$	S
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	5 > \$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
	Was a correction made?				Yes No
	If "Yes," describe in Part IV.		==		
-		ganization is exempt und			
	Enter the amount directly expended				
2	Enter the amount of the filing organ				
	exempt function activities				
3	Total exempt function expenditures			5	
	line 17b				
	Did the filing organization file Form				
5	Enter the names, addresses and en For each organization listed, enter t				
	that were promptly and directly deli			- 1985 - 1987 (1982) - 1983 (1983) - 1985 (1983) 1986 (1986) 1986 (1986) 1986 (1986)	
	(PAC). If additional space is needed	and the second of the second o	inization, odon do a do	parate ocgregated fand of t	a political action committee
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(C) EIN	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
				- 	delivered to a separate political organization.
					If none, enter -0
	and the second section of the section of t				
					- Secretary
	2000 1000				
				10.31	

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 Part II-A Complete if the org	Wild	Salmo	n Center	501(a)(2) and fil	94-3	166095 Page 2
(election under sec			npt under section	1 50 1(c)(s) and in	ea Form 5/68	
A Check if the filing organiza	400 CAS 1200		100 mm			
B Check ▶ if the filing organiza	поп спеске	d box A ar	d "limited control" pro	visions apply.	/ \ P.P.	
	ts on Lobby ditures" me		nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public	opinion (g	grass roots lobbying)		0.	
b Total lobbying expenditures to influ	uence a legi:	slative bod	y (direct lobbying)		33,061.	
c Total lobbying expenditures (add li	nes 1a and	1b)	•••••		33,061.	
d Other exempt purpose expenditure	es				6,878,035.	
e Total exempt purpose expenditure	s (add lines	1c and 1d)		6,911,096.	
f Lobbying nontaxable amount. Ente	er the amou	nt from the	following table in both	ocolumns.	495,555.	
If the amount on line 1e, column (a) o	r (b) is:	The lobi	oying nontaxable amo	ount is:		
Not over \$500,000		20% of 1	he amount on line 1e.			
Over \$500,000 but not over \$1,000		ter was a second	O plus 15% of the exce			
Over \$1,000,000 but not over \$1,5			0 plus 10% of the exce			
Over \$1,500,000 but not over \$17,	000,000		0 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000	89(5)	\$1,000,0	000.			
					102 000	
g Grassroots nontaxable amount (en					123,889.	
h Subtract line 1g from line 1a. If zero					0.	
i Subtract line 1f from line 1c. If zeroj If there is an amount other than zer			ing 41 did the eventire		0.	
NO SCHENEROUSE IN THE STANDARD SCHOOL STANDARD SCHOOL STANDARD SCHOOL STANDARD					Г	7v
reporting section 4911 tax for this			raging Period Under		<u> </u>	Yes No
3.00 pt - 10 p	ations that	made a se	ection 501(h) election instructions for line	do not have to comp		
	Lobby	ing Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 20	006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount	408	,307.	446,655.	534,144.	495,555.	1,884,661.
b Lobbying ceiling amount						
(150% of line 2a, column(e))						2,826,992.
c Total lobbying expenditures			1,500.		33,061.	34,561.
d Crossreats portsychia amount	100	,077.	111,664.	133,536.	123,889.	471,166.
d Grassroots nontaxable amount e Grassroots ceiling amount	102	, 0 / / •	111,004.	133,330.	123,003.	4/1,100.
(150% of line 2d, column (e))		[g - 5]				706,749.
(70070 01 1110 24, 00141111 (0))						100,143.
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2009 Wild Salmon Center 94-3166095 Page 3 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)).

loc or a Vo						0)
loc or a Vo		Yes	No		Amo	ount
or a Vo	uring the year, did the filing organization attempt to influence foreign, national, state or				idae i	
a Vo	cal legislation, including any attempt to influence public opinion on a legislative matter					
	referendum, through the use of:					
L Do	plunteers?					
D Pa	aid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	edia advertisements?					
d Ma	ailings to members, legislators, or the public?					
	ublications, or published or broadcast statements?					
	rants to other organizations for lobbying purposes?					
	irect contact with legislators, their staffs, government officials, or a legislative body?					
	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	ther activities? If "Yes," describe in Part IV					
	otal. Add lines 1c through 1i					
	d the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	"Yes," enter the amount of any tax incurred under section 4912	149				
	"Yes," enter the amount of any tax incurred by organization managers under section 4912	.9-31 = VY	-1,244	e H		
	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	5044.	(=\)			
art II	II-A Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6).	n 501(c)	(5), or	' se	ction	
	001(0)(0).		-		Yes	1
	ere substantially all (90% or more) dues received nondeductible by members?		[1		
1/1/4	cic substantially all (cost of more) duce received nemocacinic by members,			_		
	d the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
Dic Dic	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines III-A, lines III-A, lines III-A, lines III-A, lines III-A	n 501(c)	(5), or			
Did Did art II	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."	n 501(c) t III-A, lii	(5), or ne 3 is	s ar		
Dic Dic art II	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Les, assessments and similar amounts from members	n 501(c) t III-A, liı	(5), or ne 3 is	3 se		
Dice Dice Dice Dice Dice Dice Dice Dice	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes." Les, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	n 501(c) t III-A, liı	(5), or ne 3 is	s ar		
Dice Dice Dice Dice Dice Dice Dice Dice	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Les, assessments and similar amounts from members exercion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	n 501(c) t III-A, lii	(5), or ne 3 is	s ar		
Did Did Du Se ex a Cu	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Less, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year	n 501(c) t III-A, lii	(5), or ne 3 is	s ar		
Did Did Du Se ex a Cu b Ca	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Les, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year arryover from last year	n 501(c) t III-A, lii	(5), or ne 3 is	3 ' se s ar 1		
Dice Dice Dice Dice Dice Dice Dice Dice	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Les, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year surryover from last year solutions.	n 501(c) t III-A, lii	(5), or ne 3 is	3 se s ar		
Dice Dice Duck See ex a Cub Ca Co To Ag	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Les, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year arryover from last year sortal section 6033(e)(1)(A) notices of nondeductible section 162(e) dues section 162(e) dues	n 501(c) t III-A, lii	(5), or ne 3 is	3 ' se s ar 1		
Duck See ex a Cub Ca To	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Les, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year surryover from last year organization in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception 162 (e) the section 162 (e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception 162 (e) the section 162	n 501(c) t III-A, lii	(5), or ne 3 is	3 se s ar		
Du Du Se ex a Cu b Ca c To Ag If r	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Les, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year earryover from last year earryover from last year earryover from last year earryover section 6033(e)(1)(A) notices of nondeductible section 162(e) dues enotices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excepts the organization agree to carryover to the reasonable estimate of nondeductible lobbying and province of the excepts the organization agree to carryover to the reasonable estimate of nondeductible lobbying and provinces are section 162(e) dues the organization agree to carryover to the reasonable estimate of nondeductible lobbying and provinces are section 162(e) dues the organization agree to carryover to the reasonable estimate of nondeductible lobbying and provinces are section 162(e) dues the organization agree to carryover to the reasonable estimate of nondeductible lobbying and provinces are section 162(e) and the provinces are section 162	n 501(c) t III-A, lii al	(5), or ne 3 is	3 r se s ar 1 22a 22b 22c		
Did Did Did Did See ex a Cu b Ca c To G Ag	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Les, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year surryover from last year organization in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception 162 (e) the section 162 (e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception 162 (e) the section 162	n 501(c) t III-A, lii al	(5), or ne 3 is	3 se s ar		

Schedule D

(Form 990)

Part I

2

3

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

Name of the organization

Wild Salmon Center 94-3166095 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year)

Aggregate value at end of year

5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised for	ınds			
	are the organization's property, subject to the organization's exclusive legal control?		, <u> </u>	Yes	N
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	only			
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conf	erring			
	impermissible private benefit?			Yes	\square N
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part I	V, line 7			
1	Purpose(s) of conservation easements held by the organization (check all that apply).				
	Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historic	ally imp	ortant land	area	
	X Protection of natural habitat Preservation of a certified	historic	structure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a	conserv	ation easer	nent on	the last
	day of the tax year.				
			Held at the	End of the	ne Tax Yea
а	Total number of conservation easements	2a			
b	HIZ. INC. INC. INC. INC. INC. INC. INC. INC	02020			
С	Number of conservation easements on a certified historic structure included in (a)	2c			
d	Number of conservation easements included in (c) acquired after 8/17/06	2d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the org		n during the	tax	
	year ▶ 1				
4	Number of states where property subject to conservation easement is located ▶				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements it holds?			Yes	X N
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during				0
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the	year 🕨	\$	0 .	<u> </u>
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)	(B)(i)	\$0000 00		
	and section 170(h)(4)(B)(ii)?	******		Yes	X N
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense state			e sheet,	and

3	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 17 o(n)(4)(b)(i)
	and section 170(h)(4)(B)(ii)?
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for
	conservation easements.
aı	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to

the	se items:			
(i)	Revenues included in Form 990, Part VIII, line 1		\$	
	Assets included in Form 990, Part X		\$	
If th	e organization received or held works of art, historical treasures, or other similar assets for financial gain, pr	ovic	de	
the	following amounts required to be reported under SFAS 116 relating to these items:			

a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

2

Schedule D (Form 990) 2009

55,442.

84,404.

156,172.

141,758.

200,953.

d Equipment

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

197,200.

285,357.

uncertain tax positions under FIN 48.

Schedule D (Form 990) 2009

Wild Salmon Center

94-3166095 Page 3

During 2009, WSC transferred the land to North Pacific Land Trust.

Schedule F (Form 990)

Statement of Activities Outside the United States

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

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number

Wild Salmon Ce	nter				94-31660	95
		ctivities Ou	tside the United States. Comp	lete if the organi	ization answered	"Yes"
to Form 990, P						
			ds to substantiate the amount of the grasslection criteria used to award the gra			Yes No
galactic special control (- model destace at 2000 relations and a security of the control			procedures for monitoring the use of	grant funds outs	side the United St	ates.
(a) Region	(b) Number of offices in the region		(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	is a prog describe	ity listed in (d) ram service, specific type e(s) in region	(f) Total expenditures for region
Russia and newly			WSC is building a network of salmon sanctuaries in the Russian Far East and			
independent states	0	0	Kamchatka,			1,861,764.
					-5	
4-0-						
<u></u>						
Totals	> 0	0				1,861,764.

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

Schedule F (Form 990) 2009

Wild Salmon Center

Schedule F (Form 990) 2009

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any ecipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of non-cash assistance 0 0 o 0 (g) Amount of assistance non-cash Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement 108,750, Wire transfer Wire transfer 1068615, Wire transfer Wire transfer (f) Manner of Wire transfer 105,566, 30,000. 530,000 of cash grant (e) Amount (d) Purpose of lewly Independent Protected Area Protected Area Wenly Independent Protected Area Protected Area Protected area grant Creation reation Creation Support upport Wenly Independent lewly Independent Wenly Independent tussia and the ussia and the Russia and the Russia and the ussia and the (c) Region States States states states States (b) IRS code section and EIN (if applicable) (a) Name of organization Q

Schedule F (Form 990) 2009

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

က

28

94-3166095

Page 3

Wild Salmon Center

Schedule F (Form 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Schedule F-1 (Form 990) if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)			8			Schedule F (Form 990) 2009
(b) vs (bo appre						ule F (For
(g) Description of non-cash assistance						Sched
(f) Amount of non-cash assistance	0		*			
(e) Manner of cash disbursement	18,833,Wire transfer					
(d) Amount of cash grant	18,833,					
(c) Number of recipients	ት					
(b) Region	Russia and newly independent states					
(a) Type of grant or assistance	Scientific Research and Support for Protected Area Creation					

Schedule F (Form 990) 2009 Wild Salmon Center	94-3166095	Page 4
Part IV Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information.		
Schedule F, Part I, Line 2: On a regular basis, usually	quarterly,	
grantees are required to provide a grant report to the Org	anization to	
ensure that progress on deliverables is occuring. The Orga	nization	
requires that satisfactory progress on deliverables and th	e achievement	
of outcomes is necessary for the next payment to be remitt	ed to the	
grantee.		
	2	
		19
		
	K. RESSELL 20	
	1	

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Open to Public OMB No. 1545-0047

Inspection

Name of the organization							Employer identification number
	Wild Salmon Center						94-3166095
Part I General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	sistance, and the selec	tion
criteria used to award the grants or assistance?	sistance?	***************************************					X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	rocedures for moni	toring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	e United States. C	omplete if the orga	inization answered ")	res" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000. Check this	s box if no one recipier	nt received more th	an \$5,000. Use Pa	rt IV and Schedule I-	1 (Form 990) if addition	lal space is needed
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
The Freshwater Trust							
65 SW Yamhill Street, Ste. 200							
Portland, OR 97204	93-0843521	501(c)(3)	10,000,	0.			Ecosystem protection
Wheeler Soil and Water							
Conservation District - 38289							
Highway 19-207 - Fossil, OR 97830	93-6099479		5,000.	0.			Ecosystem protection
California Trout Inc.							
870 Market St Suite 528							
. 0	23-7097680	501(c)(3)	16,467.	0.			Ecosystem protection
l S							
419 Sixth Street, Suite 200							
	38-1612715	501(c)(3)	10,000.	0.			Ecosystem protection
North Olympic Land Trust							
antne			32				
Port Angeles, WA 98362	91-1500378	501(c)(3)	0.	936,241.		Land	Conservation
2 Enter total number of section 501(c)(3) and government organizations	and government or	ganizations		1			4.
3 Enter total number of other organizations	ns	***************************************					1.
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	uction Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2009

94-3166095

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Part III

(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. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the informatio	n required in Part I,	line 2, and any other	additional information.	
Schedule I, Part I, Line 2: Grantees	are	required to	to report on	on the progress	
of activities performed and deliverabl	B	ttained in	order to	attained in order to receive grant	
payments. Wild Salmon Center reserves	1	the right to e	examine the books	books and	
records of the receiving organization.	ion.				

Schedule I (Form 990) 2009

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

➤ Complete if the organization answered "Yes" to Form 990, Part IV, line 23. 2009

Open to Public Inspection

Employer identification number

Schedule J (Form 990) 2009

Name of the organization

➤ Attach to Form 990. ➤ See separate instructions.

Wild Salmon Center 94-3166095 **Questions Regarding Compensation** 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 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Written employment contract X Compensation committee X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee X Form 990 of other organizations 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: a Receive a severance payment or change-of-control payment? X 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c 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) and 501(c)(4) organizations must complete lines 5-9. 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: a The organization? X X Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 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: X The organization? 6a X Any related organization? 6b 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 X not described in lines 5 and 6? If "Yes," describe in Part III 7 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 Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III X 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Wild Salmon Center Schedule J (Form 990) 2009 Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

compensation incentive compensation 137,188. 17,500.			(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Betirement and	(D) Nontaxable	(E) Total of columns	(F)
Rahr III (0) 137,188. (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·(l)·(B)	reported in prior Form 990 or Form 990-EZ
Rahr III (III) (II		Ξ	188	17,500.			21,823.	176,511.	174,270.
	Rahr III	(E)							
		Ξ							
	(ii)	(ii)	0.00000000						
	<u> </u>	(E)							
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	5	ε							
		 : (E)							
	15	8							
		ε							
	ii)	(ii)							
		Ξ							
(i) (ii) (ii) (iii)	(ii)	(ii)							
		Ξ							
	(ii	(ii)							
	5	Ξ							
	(ii)	(ii)							
	(1)	Θ							
	ii)	(E)							
(ii) (iii) (i		Ξ							
(ii) (iii) (iii)	ii)	(II)							
(0)	<u> </u>	Ξ							
(ii) (iii)	ii)	(ii)							
(ii)	<u> </u>	Ξ							
(0)	(ii	(ii)							
	<u> </u>	Ξ							
(ii)	(ii)	Œ							

Schedule J (Form 990) 2009

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Open to Public

Name of the organization

Inspection

Employer identification number

Schedule M (Form 990) 2009

	Wild Salmon	Center				94-3	3166	095	j
Pa	rt I Types of Property					80 - G - 1000 F	Saatua - Ni		
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported or Form 990, Part VIII, line	8	(d Method of d reven	etermiı	ning	
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests	100 000 000					11211 52		5
4	Books and publications					THE SEC. OF SE			
5	Clothing and household goods	j %							
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property			AND THE STATE OF T					
9	Securities - Publicly traded	X	2	532,840	. Fai	r Market	: Va	lue	
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								- Coloredon
	trust interests	Ma to state the shall	3 10 1010 3130 00 70 5000	1700 1000 1000 1000 1000 1000					
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								**
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory						8.0		
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts		15110652 144 005014			11,0			
23	Scientific specimens			2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4					
24	Archeological artifacts								
25	Other • ()		(2 - 2 - 27	
26	Other • ()								
27	Other • ()								
28	Other ()								
29	Number of Forms 8283 received by the organi	zation during	the tax year for c	ontributions					
	for which the organization completed Form 82	83, Part IV, D	onee Acknowledg	ment 29	W-140			0	
								Yes	No
30a	During the year, did the organization receive b								
	at least three years from the date of the initial	contribution,	and which is not r	equired to be used for e	kempt pu	irposes for		1. 11	
	the entire holding period?			*****************************	•••••		30a		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance					?	31	X	
32a	Does the organization hire or use third parties	or related org	ganizations to soli	cit, process, or sell nonca	ash				
	contributions?			(**********		32a		X
b	If "Yes," describe in Part II.								
33	If the organization did not report revenues in c	olumn (c) for	a type of property	for which column (a) is	checked,				
	describe in Part II.								

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

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

Form 990, Part III, Line 4a, Program Service Accomplishments
(Continued from Page 2) State of the Salmon Triennial Conference was
held in February, 2009 to secure the participation and support of key
conservation partners and advance a salmon management paradigm shift
built on salmon conservation principles.
Canada's Pacific Fisheries Resource Conservation Council, with support
from Wild Salmon Center, publicly announced at a news conference in
June, 2009 their endorsement of the salmon stronghold approach and
intention to pilot the approach on the Harrison River (Fraser River
basin).
The Wild Salmon Center's Salmon Atlas was published in Russian; 500
copies were distributed throughout the Russian Far East and Moscow to
schools, libraries, government agencies, NGO's and other partners.
Revision and validation of the North American Salmon Stronghold
Partnership stronghold database was completed for California, and
significant progress was made for the Washington Coastal Area planning
unit.
Wild Salmon Center and partner salmon scientists finalized, and North
American Salmon Stronghold Partnership Steering Committee adopted, a
stronghold classification strategy and technical process to identify
"core" and "contributing" strongholds.

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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2009
Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

72 020000
Intrinsic Potential models for Copper River, Alaska, that will inform
the Alaska Department of Fish & Game salmon conservation planning, were
developed and validated by September, 2009.
Credible salmon status/trends monitoring was designed and implemented,
and monitoring baseline was established on Sakhalin, Russia.
Russian-operated Taimen genetic monitoring program was initiated on
Sakhalin, Russia.
Form 990, Part III, Line 4b, Program Service Accomplishments
(Continued from Page 2) North American Salmon Stronghold Partnership
3-year Strategic Plan was adopted by the North American Salmon
Stronghold Partnership Steering Committee.
Russian Salmon Ecosystem Initiative:
The Russian Federal Fisheries Agency (VNIRO), Russian Academy of
Sciences and salmon specialists from six regions of the Russian Far
East and Moscow, with the direct support of Wild Salmon Center,
prioritized salmon watersheds for conservation in Russia.
A working group of Russian salmon specialists was formed (at the
prioritization workshop described above) and charged with recommending
to the Russian Federal Fisheries Agency a strategy for creating three
types of salmon zones (Wild Salmon Zones, Commercial Fishery Zones and
Hatchery Fighery Zones)

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

Encouraged by Wild Salmon Center, State of the Salmon and Russian

colleagues, the governments of the Russian Federation and the United

States committed (within the new work plan under Area V of the

bilateral U.S.-Russia environmental agreement) to collaborate on

conservation of salmon stronghold rivers and conduct a bilateral

dialogue to examine the effects of hatchery salmon upon wild fish.

Points regarding the development of bilateral protected area networks
and strategies, conservation of salmon on key rivers and in marine
areas, and establishment of public-private partnerships focused upon
coastal ecosystems were included in the Civil Society Summit's (Moscow,
July 6-7) recommendations to the presidents of the Russian Federation
and the United States.

Through Wild Salmon Center's facilitation, Russian Federation and

United States government representatives delivered salmon conservation

and sustainable-focused presentations at the annual meeting of the

Intergovernmental Consultative Committee (ICC), a bilateral,

fisheries-focused forum.

The fiscal year 2010 U.S. Forest Service Foreign Operations budget
included \$500,000 for U.S. Forest Service International to support
salmon strongholds in Russia; and their State and Private Forestry
budget was increased to \$9.8 million to help support the Russian Far
East Salmon Biodiversity Partnership.

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

Form 990, Part III, Line 4c, Program Service Accomplishments
(Continued from Page 2) 3) Opala River basin: Identified as a priority
river under the federal prioritization process, making it eligible for
a Federal Fisheries Protection Zone.
All WSC priority refuges were included in the Kamchatka protected area
development plan.
Kol Protected Area Management Plan was formally adopted by the
Kamchatka government.
Sakhalin, Russia:
Official functioning watershed councils were established in three
Sakhalin regions (Uglegorsk, Nogliki, and/or Makarov) as part of the
SSI council network; total number of councils is now six.
Khabarovsk, Russia:
Agreement was signed with Khabarovsk Federal Fisheries Agency to lead
the documentation and approval process for protection of the Nimelin
River under the new Federal Fishery Protection Zone designation.
Sarufutsu Basin, Japan:
Sarufutsu Environmental Conservation Forest was created and formally
announced by Oji Paper Group Ltd.

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization Employer identification number Wild Salmon Center 94-3166095 Tillamook Basin, Oregon: The Tillamook/Clatsop Forest Management Plan revision maintained protection of Salmon Anchor Habitats and riparian buffers. Olympic Peninsula, Washington: Elk Creek property title was transferred to North Olympic Land Trust. Form 990, Part III, Line 4d, Other Program Services: Conservation Strategy IV: Pursue sustainable resource management. Sustainable Commercial Fisheries: The Western Pacific Sustainable Fisheries Coalition was established as a funcitoning body, and began implementation of a comprehensive regional anti-poaching strategy for the Russian Far East. The Russian Fishery Improvement Partnership added five major international seafood companies and one Russian seafood company, and initiated a fishery reform strategy. Four regions in Sakhalin elected to enter full Marine Stewardship Council assessment in early 2010, and are currently developing and implementing work plans to lay groundwork for successful certification. With Wild Salmon Center support, the Japanese government has completed a draft wild salmon policy that includes requirements for setting and meeting wild stock escapement goals through harvest controls.

(Form 990)

932211 02-03-10

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

Schedule O (Form 990) 2009

Japanese scientists implemented the second year of wild stock
assessments as identified in draft wild salmon policy and which is
required for Marine Stewardship Council certification.
Wild Salmon Center completed a comprehensive review of Marine
Stewardship Council draft assessment for Iturup Island chum and pink
salmon fisheries, resulting in resolution of potential hatchery and
mixed stock fishery issues being included as conditions of
certification.
Salmon principles and fisheries management:
Wild Salmon Center-recommended harvest to maximize the conservation of
rapidly declining Chinook salmon populations was adopted in Oregon.
State of the Salmon co-sponsored a hatchery impact assessment workshop
in Vancouver, B.C. in February, 2009 with the Watershed Watch Salmon
Society and Canadian Department of Fisheries and Oceans to explore
hatchery issues surrounding hatcheries in British Columbia and possible
assessment strategies for implementing Canada's Wild Salmon Policy.
Form 990, Part VI, Section B, line 11: The Wild Salmon Center's process
for review of Form 990 by the Audit Committee and by the Board of Directors
is as follows:
The external accounting firm prepares Form 990 and supplemental
schedules as soon as nossible after the completion of the audit and

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

(Form 990)

932211 02-03-10

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Wild Salmon Center

Employer identification number 94-3166095

Administration for review. After reviewing Form 990, the Director of

Finance and Administration forwards a draft of the return to the Executive

Vice President (EVP) for approval. Once the EVP has approved Form 990 and

supplemental schedules, the return is forwarded to the Audit/Finance

Committee for its review and approval.

After the Audit/Finance Committee has approved the return, the Director of Finance instructs the external accounting firm to prepare a final version of the return for signature by the CEO for filing with the Internal Revenue Service (IRS). Every effort will be made to file the return in a timely manner with the IRS.

A copy of the completed, signed and filed Form 990 with schedules will be included in the next Board of Directors Meeting packet for review by the Board.

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 Director of Finance and
Administration 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 six years, but if we did, the nature of
the conflict would be reviewed by the Board, and appropriate actions would
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

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 compensation of the
following persons included review and approval by independent persons,
comparability data, and contemporaneous substantiation of the deliberations
and decisions. The year this process was last undertaken for each of the
management officials is stated below:
Chief Executive Officer - 2008
Chief Financial Officer - 2007
VP Conservation Programs - 2007
For those whose salaries were \$100,000 or more, a 10% salary reduction
was made effective April 1 - December 31, 2009 due to the economic
situation.
Form 990, Part VI, Line 17, List of States receiving copy of Form 990:
AZ, AR, CO, DC, GA, MD, MA, MN, NC, NM, NY, OH, OR, PA, TN, UT, VA, WA, WI, NJ, FL
Form 990, Part VI, Section C, Line 19: The Wild Salmon Center's
financial statements are available to the public on the Organization's own
website. WSC's Articles of Incorporation, Bylaws and Conflict of Interest
Policy are available upon request from the Director of Finance.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 Attach to Form 990. Related Organizations and Unrelated Partnerships

2009 Open to Public Inspection OMB No. 1545-0047

Employer identification number 94-3166095

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Wild Salmon Center (2) Part

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	ations (Complete if the organization ans	swered "Yes" to Form 990, Pa	rt IV, line 34 because	it had one or more r	elated tax-exempt
(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
North Pacific Salmon Trust - 20-5602442 721 NW 9th Avenue, Suite 300 Portland, OR 97209-3446	To promote long-term salmon abundance, diversity, and habitat protection.	Oregon	501(c)(3)	170(b)(1)	Wild Salmon Center
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instr	ice, see the Instructions for Form 990.				Schedule R (Form 990) 2009

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94-3166095

Page 2

Schedule R (Form 990) 2009 Wild Salmon Center

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

General or managing partner? Percentage ownership Schedule R (Form 990) 2009 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets <u>(a</u> ate allocations? Disproportion-Yes No Ξ Share of total income Share of end-of-year assets <u>6</u> Type of entity (C corp, S corp, or trust) 9 Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) <u>ပ</u> 46 (d)
Direct controlling entity Primary activity 9 Legal domicile (state or foreign country) <u>(C</u> Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> 932162 02-04-10 Part IV

Page 3

Schedule R (Form 990) 2009 Wild Salmon Center

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes	ŝ
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		1a		×
b Giff, grant, or capital contribution to other organization(s)		1b	×	
c Gift, grant, or capital contribution from other organization(s)		2		×
d Loans or loan guarantees to or for other organization(s)		₽		×
e Loans or loan guarantees by other organization(s)		-		×
f Sale of assets to other organization(s)		14		×
g Purchase of assets from other organization(s)		1g		×
h Exchange of assets		4		×
i Lease of facilities, equipment, or other assets to other organization(s)		;		×
j Lease of facilities, equipment, or other assets from other organization(s)		Ŧ		×
k Performance of services or membership or fundraising solicitations for other organization(s)		¥		×
l Performance of services or membership or fundraising solicitations by other organization(s)		1		×
m Sharing of facilities, equipment, mailing lists, or other assets		1		×
n Sharing of paid employees		4		×
o Reimbursement paid to other organization for expenses		9		×
p Reimbursement paid by other organization for expenses		10		×
q Other transfer of cash or property to other organization(s)	***************************************	19		×
r Other transfer of cash or property from other organization(s)		4		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	saction thresholds.			
(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved	nvolved	_
(1)				
(2)				
(3)				
(4)				
(5)				
(9)				
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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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.

(c)	140		5	(2)	5		
(a)	(a)	<u> </u>	<u>(</u>)	(a)	Ξ	6)	
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of- year assets	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
		country)	Yes No	•	Yes No	(Form 1065)	
			*				
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						Schedule R (Form 990) 2009	990) 2009

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