Form <b>990</b>
Department of the Treasury

### \*\* PUBLIC DISCLOSURE COPY \*\*

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

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



A	For th	e 2010 calendar year, or tax year beginning and	ending	_	
B	Check if applicat	e: C Name of organization		D Employer identific	cation number
	Addr chan	Wild Salmon Center			
	Name	pe Doing Business As		94-3	166095
	Initia returi	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Term	721 NW JCH Avenue, Suite 500		(503	
	Amer	City or town, state or country, and ZIP + 4		G Gross receipts \$	5,463,425.
	Appli tion pend	FOILIAND, OK 97209-5440		H(a) Is this a group re	
	pond	F Name and address of principal officer: Guldo R. Ranr III		for affiliates?	Yes X No
		same as C above		H(b) Are all affiliates inc	
		empt status: $X 501(c)(3) 501(c)() \neq (insert no.) 4947(a)(1)$	or 527		list. (see instructions)
_		te: > www.wildsalmoncenter.org		H(c) Group exemption	
		f organization: X Corporation Trust Association Other	<b>L</b> Year	of formation: 1992 N	State of legal domicile: WA
Pa	art I		dantif		ad and
e	1	Briefly describe the organization's mission or most significant activities: To i protect the best wild salmon ecosystems		<u>.y, understan</u>	
Jan					
veri	2	Check this box I if the organization discontinued its operations or dispo		1.1	sets. 14
Ĝ	3	Number of voting members of the governing body (Part VI, line 1a)			13
ې د	4 5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)			44
itie	6	Total number of volunteers (estimate if necessary)			14
Activities & Governance		Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ă		Net unrelated business texable income from Form 990-T, line 34			0.
				Prior Year	Current Year
Ø	8	Contributions and grants (Part VIII, line 1h)		6,551,913.	5,035,074.
nu	9	Program service revenue (Part VIII, line 2g)		28,827.	80,351.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		24,815.	20,088.
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,398.	-15,248.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,608,953.	5,120,265.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,839,472.	2,355,307.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,665,771.	2,438,965.
sue	16a	Professional fundraising fees (Part IX, column (A), line 11e)	L	0.	0.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) <b>532, 4</b>			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		1,405,853.	1,427,559.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,911,096.	6,221,831.
<u>, (</u>	19	Revenue less expenses. Subtract line 18 from line 12		-302,143.	-1,101,566.
Net Assets or -und Balances			Be	eginning of Current Year	End of Year
Sse: Bala	20	Total assets (Part X, line 16)	······	5,666,370.	4,563,627.
et A Ind	21	Total liabilities (Part X, line 26)		303,713.	308,216.
		Net assets or fund balances. Subtract line 21 from line 20 Signature Block		5,362,657.	4,255,411.
		Signature block		ante and to the best of m	Included and holist it is

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Guido R. Rahr III, Pre Type or print name and title	sident and CEO		Date	
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN
Paid	Cynthia P. Bartholomew			self-employed	
Preparer	Firm's name McDonald Jacobs,			Firm's EIN	
Use Only	Firm's address 520 SW Yamhill,	Ste 500			
	Portland, OR 972	04		Phone no. 503	227-0581
May the II	RS discuss this return with the preparer shown abo	ove? (see instructions)			X Yes No
032001 02-2	22-11 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.			Form <b>990</b> (2010)

Form	990 (2010) Wild Salmon Center	94-3166095	Page <b>2</b>
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission: To identify, understand, and protect the best wild salm	on ogogrator	<b>.</b>
	of the Pacific Rim, by devising and implementing practi		
	based on the best science, to protect forever these ext		
	places and their biodiversity.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	s 🛛 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	?Yes	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by e Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of		
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	grants and	
4a	(Code:) (Expenses $2,721,066$ including grants of $1,746,250$ ) (F	levenue \$	0.)
	1) Western Pacific Program	·	,
	The Western Pacific Program of the Wild Salmon Center f		le
	Russian Far East where we work with local partners to c		
	large-scale thriving salmon ecosystems. In 2010 the Wes Program accomplished significant goals throughout the t		2
	regions of the Russian Federation: Khabarovsk, Sakhalin		٩
	Kamchatka Peninsula.		<u> </u>
	(Continued on Schedule O)		
4b	(Code:) (Expenses \$ 1,368,665. including grants of \$ 553,007.) (F 2) North America Program	levenue \$	0.)
	The goal of WSC's North America Program is to secure t	he health of	<u> </u>
	North America's most productive wild salmon populations	and the	
	watersheds that sustain them. It works toward this goa		
	development and implementation of the "salmon stronghol		
	The stronghold approach seeks to develop and demonstrat		
	pro-active approaches to managing healthy wild salmon p conserving the critical habitats they rely on.	opulations v	vnile
	conserving the critical habitats they rely on.		
	(Continued on Schedule O)		
4c	(Code:) (Expenses \$ 599,901. including grants of \$) (F 3) Conservation Science Program	levenue \$ 50	,871. <sub>)</sub>
	3) Conservation Science Program		
	In 2010 the science delivery functions within Wild Salm	on Center W	no
	largely integrated within the State of the Salmon (SoS)	which duri	ina
	2010 was a jointly sponsored program of Wild Salmon Cen		
	with staff from both organizations directly involved in		
	accomplishments. State of the Salmon catalyzes innovati	ons in Pacif	Eic
	salmon conservation and management by facilitating comm		
	learning and application of effective conservation and	fish manager	nent
	strategies around the North Pacific Rim.		
	(Continued on Schedule O)		
44	Other program services. (Describe in Schedule O.)		
μu		.80.)	
4e	Total program service expenses ► 5, 259, 663.	/	
			<b>990</b> (2010)
032002 12-21-	See Schedule O for Continuation(	s)	

Form	990	(2010)
	000	(2010)

 Form 990 (2010)
 Wild
 Salmon
 Center

 Part IV
 Checklist of Required Schedules
 Checklist
 Checklist

			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	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	- U		
7	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
-	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	N/	А
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
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?	-		<u> </u>
	If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Х	37
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b			х	
45	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i>	45	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15	21	
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10	- 23	<u> </u>
17	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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20h		1

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

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		37	
	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				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			37
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	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		Х
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)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form	990 (2010) Wild Salmon Center	94-3166	095	P	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 32			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?		1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 44			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction	s)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a	Х	
b	If "Yes," enter the name of the foreign country: ► Russia				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action?	5b		Х
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit			
	any contributions that were not tax deductible?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	tions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	ract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fe	orm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D	id the supporting <b>N/A</b>			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12N/A	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ${ m N/A}$	10b			
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
с	Enter the amount of reserves on hand	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b		

Form <b>990</b> (2010)	
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Form 990 (	
Part VI	Go

Wild Salmon Ce	nter
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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.

Check if Schedule O contains a re-	chonco to any	quantian in this Part VI	
Check il Schedule O contains a le	sponse to any i	question in this Fait vi	

X
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	Check if Schedule O contains a response to any question in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		14		
b	Enter the number of voting members included in line 1a, above, who are independent	1b		13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervision			
	of officers, directors or trustees, or key employees to a management company or other person? $\dots$			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form §	990 wa	s filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X
6	Does the organization have members or stockholders?			6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me					
	governing body?			7a		<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per			<b>7b</b>		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year			
	by the following:					
	The governing body?				X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
	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 R	evenue	e Code.)			
					Yes	No
	Does the organization have local chapters, branches, or affiliates?			<b>10a</b>		<u> </u>
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?					
	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	iling the	e form?	<u>11a</u>		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				v	
	Does the organization have a written conflict of interest policy? If "No," go to line 13			<b>12a</b>	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	uld give	erise		v	
	to conflicts?			<b>12b</b>	Х	
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If			10	v	
40	in Schedule O how this is done				X X	
13	Does the organization have a written whistleblower policy?				X	
14	Does the organization have a written document retention and destruction policy?			14	Δ	
15	Did the process for determining compensation of the following persons include a review and approva	•	dependent			
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45-	Х	
	The organization's CEO, Executive Director, or top management official				X	
b	Other officers or key employees of the organization			<b>15b</b>	- 23	
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	montu	ith a			
iva				16a		Х
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva			10a		
U	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org					
				16b		
Sec	exempt status with respect to such arrangements?					
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ AR , AZ , CO , DC , F	'L. G	A.MA.MD.	MN . NC	. NJ	. NM
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1				/	/
10	public inspection. Indicate how you make these available. Check all that apply.		shols only availe			
	X     Own website     Another's website     X     Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, c	conflict	of interest policy	v. and fina	ncial	
	statements available to the public.	2.11101	polo	,,		
20	State the name, physical address, and telephone number of the person who possesses the books a	nd reco	ords of the organ	nization:	•	
-	Anna V. Gabbis - (503) 222-1804					

721	NW	9th	Avenue,	Suite	300,	Portland,	OR	97209-	344	16
-----	----	-----	---------	-------	------	-----------	----	--------	-----	----

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

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

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

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average hours per week	<u> </u>		Pos all 1		app	oly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	In stitutio nal trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Michael Sutton										
Board Chair	1.00	Х		Х				0.	0.	0.
Stone Gossard										
Director	1.00	Х						0.	0.	0.
Leah Hair										
Director	1.00	Х						0.	0.	0.
John Kitzhaber										
Director	1.00	Х						0.	0.	0.
Jim Lichatowich										
Director	1.00	Х						0.	0.	0.
Sydney McNiff-Ferguson										
Director	1.00	Х						0.	0.	0.
Werner K. Paulus										
Director	1.00	Х						0.	0.	0.
Dmitry Pavlov										
Director	1.00	Х						11,400.	0.	0.
James W. Ratzlaff										
Director	1.00	Х						0.	0.	0.
Peter Seligmann										
Director	1.00	Х						0.	0.	0.
Peter Soverel										
Director	1.00	Х						0.	0.	0.
Jack Stanford										
Director	1.00	Х						0.	0.	0.
John E. McCosker										
Director	1.00	Х						0.	0.	0.
Oleg Alekseev										
Director	1.00	Х						0.	0.	0.
Guido R. Rahr III										
President & CEO	40.00			Х				147,625.	0.	23,563.
Jeffrey Baumgartner										
Exec. VP; Board Sec/Treas	40.00			Х				110,115.	0.	19,033.
Greg Block										<b>-</b>
VP Conservation Programs	18.00			Х				48,034.	0.	6,560.

032007 12-21-10

	almon Cent	tei	<u> </u>						94-33	166	095	P	age <b>8</b>
Part VII Section A. Officers, Directors,		mplo	oyee			ligh	est		ees (continued)				
(A) Name and title	( <b>B</b> ) Average hours per week	(cl	heck	(C Posi all t	ition		ly)	<b>(D)</b> Reportable compensation	(E) Reportable compensatic	on	an	(F) timate nount	of
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	s	com fr org and	other pensa om th anizat d relat anizat	ation ne tion ted
Richard Lincoln	40.00							4.0.4.0.7.0					
State of the Salmon Director	40.00					X		104,070.		0.	1	8,1	.06.
1b Sub-total								421,244.		0.	6	7,2	62.
c Total from continuation sheets to Par								0. 421,244.		0.	6	7 2	0.
<ul><li>d Total (add lines 1b and 1c)</li><li>2 Total number of individuals (including b)</li></ul>						e) wh	io r	-	),000 in reportabl	-	0	,,,	102.
compensation from the organization	•											Yes	3 No
<b>3</b> Did the organization list any <b>former</b> offi line 1a? <i>If</i> "Yes," <i>complete Schedule J i</i>	-				•			nighest compensated er			3	103	x
4 For any individual listed on line 1a, is th		le co	ompe	ensa	tior	n and	l ot	her compensation from	the organization			х	
<ul><li>and related organizations greater than \$</li><li>Did any person listed on line 1a receive</li></ul>									idual for services		4		
rendered to the organization? If "Yes," of	complete Schedul	e J f	or su	ıch į	oers	son .		-			5		Х
Section B. Independent Contractors           1         Complete this table for your five highes the organization.           NONE	t compensated in	depe	ende	nt c	ontr	racto	ors t	hat received more than	\$100,000 of con	npens	ation f	rom	
(A) Name and busin	ess address							<b>(B)</b> Description of s	ervices	с	(C ompei		on
2 Total number of independent contractor	· •	iot li	mite	d to		~	stec	above) who received m	nore than				
\$100,000 in compensation from the org	anization 🕨				(	0							

Form	990	(201	0)

# Form 990 (2010) Wild Salmon Center Part VIII Statement of Revenue

### 94-3166095 Page 9

Part VIII	Statement of Revenue				
		(A) Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512, 513, or 514
sta 1a	Federated campaigns 1a				
d Dun	Membership dues 1b				
s and	Fundraising events 1c 23,568.	,			
	Related organizations 1d				
e liñi	Government grants (contributions) 1e 278,252.	,			
jo g	All other contributions, gifts, grants, and				
ibu	similar amounts not included above If [4, 733, 254.	,			
Contributions, and other simi d G J a	Noncash contributions included in lines 1a-1f: \$ 12,018.	,			
<u>а</u> р	Total. Add lines 1a-1f	5,035,074.			
	Business Code				
ଞ 2 a	Salmon conservation 900099	80,351.	80,351.		
φ b					
s la S					
p leve					
Program Service Revenue a p 2 d b					
ھ <sub>f</sub>	All other program service revenue				
g	Total. Add lines 2a-2f	80,351.			
	Investment income (including dividends, interest, and				
	other similar amounts)	20,088.			20,088.
4	Income from investment of tax-exempt bond proceeds				
5	Royalties				
	(i) Real (ii) Personal	_			
	Gross Rents	_			
	Less: rental expenses	_			
	Rental income or (loss)				
d	Net rental income or (loss)				
7 a	Gross amount from sales of (i) Securities (ii) Other	_			
	assets other than inventory 305,433.	_			
	Less: cost or other basis				
	and sales expenses	_			
С	Gain or (loss) 0 •	-			
	Net gain or (loss)	0.			
	Gross income from fundraising events (not including \$ 23,568. of				
eve	contributions reported on line 1c). See				
л Н	Part IV, line 18 a 15,702.				
d <u>t</u> ř	Less: direct expenses <b>b</b> 37,727.				
0 c	Net income or (loss) from fundraising events	-22,025.			-22,025.
9 a	Gross income from gaming activities. See				
	Part IV, line 19 a				
b	Less: direct expenses b				
c	Net income or (loss) from gaming activities				
10 a	Gross sales of inventory, less returns				
	and allowances a				
b	Less: cost of goods sold b				
c	Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	Miscellaneous Income 900099	6,777.	6,777.		
b					
С					
	All other revenue				
e	Total. Add lines 11a-11d	6,777.	07 100	^	1 0 0 7
<b>12</b> 032009	Total revenue. See instructions.	5,120,265.	87,128.	0	-1,937.

032009

### Wild Salmon Center

	Section 501(c)( All other organizations must com	3) and 501(c)(4) organiza olete column (A) but are			).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	569,057.	569,057.		
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.	1 706 050	1 706 250		
	See Part IV, lines 15 and 16	1,786,250.	1,786,250.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	366,330.	220 252	24 244	100 700
	trustees, and key employees	300,330.	229,353.	34,244.	102,733.
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$ ) and				
-	persons described in section 4958(c)(3)(B)	1,636,113.	1,231,519.	169,849.	234,745.
7	Other salaries and wages Pension plan contributions (include section 401(k)	т, озо, ттэ.	т, 4JI, JIJ.	109,049.	434,/43.
8	and section 403(b) employer contributions	82,303.	59,239.	6,951.	16,113.
•		205,668.	134,299.	18,839.	52,530.
9 10	Other employee benefits	148,551.	109,475.	15,710.	23,366.
10	Payroll taxes Fees for services (non-employees):	140,551.	105,475.	15,710.	25,500.
11					
a b	Management	2,766.		2,766.	
	Legal Accounting	16,430.		16,430.	
d		10,1000		10,1000	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	462,787.	452,917.	1,000.	8,870.
9 12	Advertising and promotion	29,873.	23,132.	682.	6,059.
13	Office expenses	96,896.	56,340.	29,135.	11,421.
14	Information technology	,	,		,
15	Royalties				
16	Occupancy	146,721.	97,189.	35,036.	14,496.
17	Travel	460,081.	389,567.	26,819.	43,695.
18	Payments of travel or entertainment expenses				<u> </u>
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	9,609.	8,854.	50.	705.
20	Interest	2,697.		2,697.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	79,856.	46,984.	30,221.	2,651.
23	Insurance	17,074.	7,980.	9,094.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	Translation & interp.	54,586.	52,563.	2,023.	
a b	Miscellaneous expense	43,101.	1,446.	27,852.	13,803.
c	Dues and subscriptions	5,082.	3,499.	302.	1,281.
d	Contract personnel	0.			,
e	Recruitment expense	0.			
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	6,221,831.	5,259,663.	429,700.	532,468.
26	Joint costs. Check here ► if following SOP				
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising				
	solicitation				<b>Fauna 000</b> (0010)

Wild	Salmon	Center
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					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			886,989.	1	918,889.
	2	Savings and temporary cash investments			2,940,367.		2,447,743.
	3	Pledges and grants receivable, net			1,315,362.		796,983.
	4	Accounts receivable, net			3,905.		2,812.
	5	Receivables from current and former officers, di			-		
	-	employees, and highest compensated employe					
		of Schedule L				5	
	6	Receivables from other disqualified persons (as				-	
		4958(f)(1)), persons described in section 4958(c					
		employers and sponsoring organizations of sect		ŭ			
		employees' beneficiary organizations (see instru				6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
◄	9	Prepaid expenses and deferred charges			54,200.		262,450.
		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	556,245.			
	Ь	Less: accumulated depreciation		446,758.	156,172.	10c	109,487.
	11	Investments - publicly traded securities			/	11	
	12	Investments - other securities. See Part IV, line			309,375.		25,263.
	13	Investments - program-related. See Part IV, line				13	,
	14	Intangible assets		r		14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equ		l l l l l l l l l l l l l l l l l l l	5,666,370.		4,563,627.
	17	Accounts payable and accrued expenses			232,572.		276,330.
	18	Grants payable		T T		18	
	19	Deferred revenue			2,743.	19	
	20	Tax-exempt bond liabilities				20	
s	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Payables to current and former officers, director		1			
abi		highest compensated employees, and disqualifi					
		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela			68,398.	23	31,886.
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities. Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			303,713.	26	308,216.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
es		lines 27 through 29, and lines 33 and 34.					
anc	27	Unrestricted net assets			1,791,552.	27	1,718,118.
3al	28	Temporarily restricted net assets			3,571,105.	28	2,537,293.
Ιpι	29	Permanently restricted net assets				29	
Ъ		Organizations that do not follow SFAS 117, c	heck h	ere 🕨 🛄 and 🛛			
o,		complete lines 30 through 34.					
iets	30	Capital stock or trust principal, or current funds				30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ec		r		31	
let ,	32	Retained earnings, endowment, accumulated in		r		32	
Z	33	Total net assets or fund balances			5,362,657.		4,255,411.
	34	Total liabilities and net assets/fund balances			5,666,370.	34	4,563,627.

Form 990 (	2010)
Part X	Balance Sheet

Form	990 (2010) Wild Salmon Center	94-31	66095	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,120		
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,223		
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,101	-	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,362		
5	Other changes in net assets or fund balances (explain in Schedule O)	5			80.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	4,25	5,4	11.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		<b>2</b> b	Х	
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle 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 requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		<b>3</b> b		

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

032021 12-21-10

## **Public Charity Status and Public Support**

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

Internal Revenue Service Attach to Form 990 or For				orm 990-E	Z. 🕨 See	separate	instructio	ons.		Inspe	ection		
Name of the organization								E	mployer	identificati	on nu	mber	
Wild Salmon Center									94-3166095				
Pa	art I	Reason	for Public Char	<b>ity Status</b> (All organiz	zations mu	st complet	te this parl	t.) See ins <sup>.</sup>	tructions.				
The	organ	ization is not a	private foundation	because it is: (For lines <sup>.</sup>	1 through <sup>-</sup>	11, check	only one b	ox.)					
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,						ıe,						
		city, and state:											
5		An organizati	on operated for the	benefit of a college or u	niversity ov	wned or op	perated by	a governi	mental un	it describ	ed in		
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6		A federal, sta	te, or local governm	ent or governmental uni	t described	d in <b>sectio</b>	on 170(b)(1	I)(A)(v).					
7	X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	e general	public desc	ribed i	n
			b)(1)(A)(vi). (Comple										
8		A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9		-	-	eives: (1) more than 33						•	-		
			-	nctions - subject to certa			-				-		
		income and u	inrelated business ta	axable income (less sec	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	anization	after June 3	80, 197	'5.
			509(a)(2). (Complete										
10		•	•	perated exclusively to te					•				
11		•	•	perated exclusively for the						•	• •		or
				ations described in secti		,	. , .	2). See <b>se</b> o	tion 509(	( <b>a)(3).</b> Ch	eck the box	that	
				organization and compl						. [	1		
		a 🖂 Type I		•••	с 🗀 Тур		-	-		d 📖	Type III - (		
е			· •	t the organization is not		•		•			-		
			•	han one or more publicly		•				9(a)(1) or	section 505	9(a)(2).	
f				ten determination from t									
_				nis box									
g		-		organization accepted ar			-					Yes	No
			•	irectly controls, either al	-		-					res	No
				upported organization?									
				n described in (i) above? person described in (i) o									
h				about the supported or							[ 1 19(11)		L
		FIONDE LIE IC	bilowing information	about the supported of	yanizationi	(5).							
(1) Maria		ne of supported (ii) EIN (iii) Type of (iv) Is the organization (v) Did you notify the						(vi)  s	s the	the (vii) Amount of			
(L		anization	organization			l'annaniantian in ant Iorganiz		organizati (i) organiz	on in col.		port		
or gamzation				(described on lines 1-9 above or IRC section	governing	document?	(i) of your	support?	U.S	5.?	Sup		
			(see instructions))	Yes	No	Yes	No	Yes	No				

OMB No. 1545-0047

Z

Π

Open to Public Inspection

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

### Schedule A (Form 990 or 990-EZ) 2010 Wild Salmon Center Part II Support Schedule for Organizations Described in

94-3166095	Page <b>2</b>
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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	7716091.	4104618.	9092068.	6551913.	5035074.	32499764.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	7716091.	4104618.	9092068.	6551913.	5035074.	32499764.
	The portion of total contributions						
Ũ	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)						16994200.
6							15505564.
	Public support. Subtract line 5 from line 4.						1000004.
	ndar year (or fiscal year beginning in)	(a) 2006	(h) 2007	(a) 2008	(4) 2000	(a) 2010	(f) Total
		(a)2006 7716091.	(b) 2007 4104618.	(c) 2008 9092068.	(d)2009 6551913.	(e) 2010	(f) Total 32499764.
	Amounts from line 4	//100510	1101010.	5052000.	0551515.	50550740	52455704.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	71,216.	133,062.	44,107.	25,415.	20,088.	293,888.
_	and income from similar sources	/1,210.	133,002.	44,10/.	25,415.	20,000.	293,000.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on					ļ	
10	Other income. Do not include gain						
	or loss from the sale of capital	c 200	7 007	0.27	0 700	15 040	0 600
	assets (Explain in Part IV.)	6,308.	7,827.	937.	2,798.	-15,248.	2,622.
	Total support. Add lines 7 through 10						32796274.
	Gross receipts from related activities,		,			12	261,913.
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
0	organization, check this box and stop	here					<b>&gt;</b>
	ction C. Computation of Publ						47 00
	Public support percentage for 2010 (I		-			14	47.28 %
	Public support percentage from 2009					15	48.22 %
16a	33 1/3% support test - 2010. If the o	•				•	
	stop here. The organization qualifies						
b	33 1/3% support test - 2009. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	<b>t - 2010.</b> If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10%.	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tł	nis box and <b>stop h</b>	ere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶∟
b	10% -facts-and-circumstances tes	<b>t - 2009.</b> If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	neck this box and	<b>stop here.</b> Explain	i in Part IV how the	е
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	and see instruction	ıs ►

Schedule A (Form 990 or 990-EZ) 2010

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

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

Se	ction A. Public Support	,,, _,, _	,					
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2	2010	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions,							
	merchandise sold or services per-							
	formed, or facilities furnished in any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and							
	3 received from disgualified persons							
I	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							
	Public support (Subtract line 7c from line 6.)							
	ction B. Total Support							
	endar year (or fiscal year beginning in) 🕨	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2	2010	(f) Total
	Amounts from line 6	(0) 2000	(6) 2007	(6) 2000	( <b>u</b> ) 2000		.010	(i) iotai
	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar sources							
	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired offer June 20 1075							
	· · · · · · · · · · · · · · · · · · ·							
11	Add lines 10a and 10b							
••	activities not included in line 10b,							
	whether or not the business is							
40	regularly carried on Other income. Do not include gain							
12	or loss from the sale of capital							
	assets (Explain in Part IV.)							
	Total support (Add lines 9, 10c, 11, and 12.)							
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(	3) organiz	ation,
_								
	ction C. Computation of Publ					1		
	Public support percentage for 2010 (					15		%
16	Public support percentage from 2009					16		%
	ction D. Computation of Inve		-			1		
17	Investment income percentage for 20					17		%
18	Investment income percentage from					18		%
19;	a 33 1/3% support tests - 2010. If the	-					and line 1	7 is not
	more than 33 1/3%, check this box a							▶∟
ł	o 33 1/3% support tests - 2009. If the	•						
	line 18 is not more than 33 1/3%, che							
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	;	<b>&gt;</b>

032023 12-21-10

### Schedule of Contributors

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

OMB No. 1545-0047

2010

Employer identification number

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

Name of the organization

Wild Salmon Cent	er
------------------	----

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

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

### **General Rule**

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

#### **Special Rules**

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

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

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

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

(a)

No.

6

Name of organization		Em	ployer identification number		
Wild Salmor		94-3166095			
Part I Contri	butors (see instructions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) s Type of contributior		
<u>    1                                </u>		\$1,982,459	Person X     Payroll     Noncash     (Complete Part II if there is a noncash contributi		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) s Type of contribution		
		\$ <u>1,000,000</u>	Person X     Payroll      Noncash      (Complete Part II if the is a noncash contribut		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) s Type of contributio		
<u>    3                                </u>		\$250,000	Person X     Payroll      Noncash      (Complete Part II if the is a noncash contribut		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) s Type of contributio		
<u>4</u>		\$225,000	Person X     Payroll      Noncash      (Complete Part II if the is a noncash contribut		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) s Type of contributio		
<u> </u>			Person X Payroll		

(b)

Name, address, and ZIP + 4

17

(Complete Part II if there is a noncash contribution.)

(d)

Type of contribution

(Complete Part II if there is a noncash contribution.)

Noncash

Person Payroll

Noncash

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

150,000.

150,000.

(c)

Aggregate contributions

\$

\$

X

Name of organization

Page of of Part II

Employer identification number

94-3166095

### Wild Salmon Center

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom 'art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

: 111	almon Center Exclusively religious, charitable, etc., i	ndividual contributions to section	94-3166095 on 501(c)(7), (8), or (10) organizations aggregating
	more than \$1,000 for the year. Complet	te columns (a) through (e) and the	e following line entry. For organizations completing
	Part III, enter the total of <i>exclusively</i> religi <b>\$1,000 or less</b> for the year. (Enter this interval in the second secon	ous, charitable, etc., contributions	s of
lo.	\$1,000 of less for the year. (Enter this in		φ.
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
tl			
-			
_   -			
-			
			-
		(e) Transfer of gif	t
			<b>-</b>
-	Transferee's name, address, a		Relationship of transferor to transferee
-			
-			
-			
) No.		I	
om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
artl			
-			
_			
-			
		/ · · · · · · · · · · · · · · · · · · ·	
		(e) Transfer of gif	τ
			<b>-</b>
	Transferee's name, address, a		Relationship of transferor to transferee
-			
-			
-			
a) No.		1	
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
-			
-			
		(e) Transfer of gif	t
			•
	Transferee's name, address, a	Ind ZIP + 4	Relationship of transferor to transferee
-		[	
-			
-			
a) No. from			
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
-			
-			
		(e) Transfer of gif	t
			-
	Transferee's name, address, a	Ind ZIP + 4	Relationship of transferor to transferee
I –			
		I	
-			
-			

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       OMB No. 1545-00         Department of the Treasury Internal Revenue Service       Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.       Attach to Form 990 or Form 990-EZ.       Open to Pub Inspection         If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then       Section 501(c)(3) organizations: 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 B. Do not complete Part I-C.       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 I-B.       Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-B. 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-B.         • Section 501(c)(4), (5), or (6) organizations: Complete Part III.	(Earm 000 ar 000 EZ)					
Internal Revenue Service         See separate instructions.         Inspection           If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then         • Section 501(c)(3) organizations: 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-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), or Form 990-EZ, Part V, line 35a (Proxy Tax), then	(Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527					
If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: 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), or Form 990-EZ, Part V, line 35a (Proxy Tax), then						
<ul> <li>Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.</li> <li>Section 527 organizations: Complete Part I-A only.</li> <li>If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then</li> <li>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.</li> <li>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.</li> <li>If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then</li> </ul>	If the organization ans					
<ul> <li>Section 527 organizations: Complete Part I-A only.</li> <li>If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then</li> <li>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.</li> <li>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.</li> <li>If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then</li> </ul>	<ul> <li>Section 501(c)(3) or</li> </ul>					
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), or Form 990-EZ, Part V, line 35a (Proxy Tax), then						
<ul> <li>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.</li> <li>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.</li> <li>If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then</li> </ul>	0					
• 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), or Form 990-EZ, Part V, line 35a (Proxy Tax), then						
If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then						
	-					
Name of organization Employer identification numbers of the first of t						
Wild Salmon Center 94-3166095	5					
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.	Part I-A Compl					
1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.	1 Provide a descripti					
2 Political expenditures						
3 Volunteer hours						
Part I-B Complete if the organization is exempt under section 501(c)(3).						
1 Enter the amount of any excise tax incurred by the organization under section 4955	1 Enter the amount c					
2 Enter the amount of any excise tax incurred by organization managers under section 4955						
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?						
4a Was a correction made?						
b If "Yes," describe in Part IV.           Part I-C         Complete if the organization is exempt under section 501(c), except section 501(c)(3).						
<ul> <li>Enter the amount directly expended by the filing organization for section 527 exempt function activities </li> <li>Enter the amount of the filing expended by the filing organization for section 527 exempt function activities</li> </ul>						
<ul> <li>2 Enter the amount of the filing organization's funds contributed to other organizations for section 527</li> <li>exempt function activities</li> </ul>						
exempt function activities  \$						
line 17b ► \$ 4 Did the filing organization file Form 1120-POL for this year? Yes □						
<ul> <li>5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization</li> </ul>						
made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political						
contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or						
political action committee (PAC). If additional space is needed, provide information in Part IV.	political action com					
(a) Name(b) Address(c) EIN(d) Amount paid from filing organization's funds. If none, enter -0(e) Amount of political contributions receive promptly and dire delivered to a sepa political organizat If none, enter -0.	( <b>a)</b> Nama					
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ						

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

Schedule C (Form 990 or 990-EZ) 2010

	(election under section 50	1(h)).						
A	Check 🕨 🛄 if the filing organization below	ngs to an affiliated group.						
в	Check							
	Limits on Lol (The term "expenditures" ا	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals					
1	a Total lobbying expenditures to influence pu	olic opinion (grass roots lobbying)						
I	Total lobbying expenditures to influence a lo	gislative body (direct lobbying)	33,900.					
	Total lobbying expenditures (add lines 1a a	nd 1b)	33,900.					
			5,655,463.					
	• Total exempt purpose expenditures (add lin	es 1c and 1d)	5,689,363.					
	f_Lobbying nontaxable amount. Enter the am	ount from the following table in both columns.	434,468.					
	If the amount on line 1e, column (a) or (b) is:							
	Not over \$500,000 20% of the amount on line 1e.							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.						
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.						
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.						
	Over \$17,000,000	\$1,000,000.						
1	g Grassroots nontaxable amount (enter 25%	of line 1f)	108,617.					
	<ul> <li>Subtract line 1g from line 1a. If zero or less,</li> </ul>	enter -0-	0.					
	i Subtract line 1f from line 1c. If zero or less,	enter -0-	0.					
	j If there is an amount other than zero on eith	er line 1h or line 1i, did the organization file Form 4720	-					
	reporting section 4911 tax for this year?		L	Yes No				
	<b>.</b>	4-Year Averaging Period Under Section 501(h)						
		at made a section EO1/b) cleation do not have to com						

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> Total			
2a Lobbying nontaxable amount	446,655.	534,144.	495,555.	434,468.	1,910,822.			
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					2,866,233.			
c Total lobbying expenditures	1,500.		33,061.	33,900.	68,461.			
d Grassroots nontaxable amount	111,664.	133,536.	123,889.	108,617.	477,706.			
e Grassroots ceiling amount (150% of line 2d, column (e))					716,559.			
f Grassroots lobbying expenditures								

Schedule C (Form 990 or 990-EZ) 2010

## Schedule C (Form 990 or 990-EZ) 2010 Wild Salmon Center 94-316609 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)).

		(;	(a)		)
		Yes	No	Amo	unt
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
g					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3					
Pai	t III-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."	rt III-A, li	ne 3 is a	nswered	
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Com	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; ar	d Part II-B,	line 1i. Also	, complete	this part

for any additional information.

### (Form 990)

### **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.

Department of the Treasury Internal Revenue Service

	OMB No. 1545-0047
	2010
	Open to Public Inspection
Employer	identification numb
9	4-3166095

Nam	e of the organization Wild Salmon Center		Em	ployer identification $94 - 31660$	
Pa		er Similar Fund	s or Accou	unts. Complete if th	ne
	organization answered "Yes" to Form 990, Part IV, line 6.				
	(a) Donor ad	vised funds	<b>(b)</b> Fur	nds and other accou	nts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writing that the asset	s held in donor advi	sed funds		
-	are the organization's property, subject to the organization's exclusive legal contr			Yes	
6	Did the organization inform all grantees, donors, and donor advisors in writing tha				
•	for charitable purposes and not for the benefit of the donor or donor advisor, or for	-	-		
	impermissible private benefit?		•	🗌 Yes	
Pa					
1	Purpose(s) of conservation easements held by the organization (check all that ap		,		
-		Preservation of an hi	storically imp	ortant land area	
		Preservation of a cer			
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation cor	ntribution in the form	of a conserv	ation easement on t	he last
_	day of the tax year.				
				Held at the End of the	e Tax Year
а	Total number of conservation easements		2a		
	Total acreage restricted by conservation easements				
	Number of conservation easements included in (c) acquired after 8/17/06, and no				
	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, released, extinguished			n during the tax	
	year ►	,	5		
4	Number of states where property subject to conservation easement is located				
5	Does the organization have a written policy regarding the periodic monitoring, ins				
		. , , ,		Yes	🗌 No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conse				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation				
8	Does each conservation easement reported on line 2(d) above satisfy the require				-
	and section 170(h)(4)(B)(ii)?			Yes	🗌 No
9	In Part XIV, describe how the organization reports conservation easements in its			and balance sheet, a	and
	include, if applicable, the text of the footnote to the organization's financial staten	-			
	conservation easements.		-	-	
Pa	rt III Organizations Maintaining Collections of Art, Historical	Treasures, or C	ther Simi	lar Assets.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.				
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report	t in its revenue state	ment and bal	ance sheet works of	art,
	historical treasures, or other similar assets held for public exhibition, education, o	r research in furthera	ance of public	c 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 (ASC 958), to report in i	ts revenue statemer	t and balanc	e sheet works of art,	historical
	treasures, or other similar assets held for public exhibition, education, or research	n in furtherance of pu	Iblic service,	provide the following	g amounts
	relating to these items:				
	(i) Revenues included in Form 990, Part VIII, line 1		►	\$	
	(ii) Assets included in Form 990, Part X		•	\$	
2	If the organization received or held works of art, historical treasures, or other simil			de	
	the following amounts required to be reported under SFAS 116 (ASC 958) relating				
а			►	\$	
b	Assets included in Form 990, Part X		•		

-	Schedule D (Form 990) 2010         Wild Salmon Center         94-3166095         Page 2							
Pai	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)							
3 a	Using the organization's acquisition, access (check all that apply):	ion, and other record		e following that a		ficant use of its	collection	n items
b	Scholarly research	e						
с	Preservation for future generations							
4	Provide a description of the organization's c	ollections and explai	n how they further	the organizatior	n's exempt	purpose in Pa	rt XIV.	
5	During the year, did the organization solicit of	or receive donations	of art, historical tre	asures, or other	similar as	sets		
	to be sold to raise funds rather than to be m	aintained as part of	the organization's o	collection?			Yes	No
Pai	t IV Escrow and Custodial Arran	igements. Comple	ete if the organizati	on answered "Y	es" to For	m 990, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.						
1a	Is the organization an agent, trustee, custod	lian or other intermed	liary for contributio	ons or other asse	ets not incl	luded	_	
	on Form 990, Part X?					L	Yes	└── No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:					
							Amount	t
с	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
	Did the organization include an amount on F		21?			L	Yes	└── No
	If "Yes," explain the arrangement in Part XIV							
Pai	<b>t V</b> Endowment Funds. Complete			· · · · · · · · · · · · · · · · · · ·	· · · ·	<del>.</del>		<u> </u>
		(a) Current year	<b>(b)</b> Prior year	(c) I wo years	back (d)	Three years back	(e) ⊦our	years back
<b>1</b> a	Beginning of year balance							
b	Contributions							
	Net investment earnings, gains, and losses							
	Grants or scholarships						-	
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year							
a	Board designated or quasi-endowment		_%					
	Permanent endowment	%						
		<u>%</u>	ation that are hald					
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are neid	and administere	ed for the c	organization	г	Yes No
	by:							Yes No
	(i) unrelated organizations						. 3a(i)	
h	(ii) related organizations If "Yes" to 3a(ii), are the related organization						. 3a(ii) 3b	
4	Describe in Part XIV the intended uses of the						<u> </u>	
	t VI Land, Buildings, and Equipn							
1 41	Description of investment	(a) Cost or o	1	t or other	(c) Accu	mulatod	(d) Bool	
	Description of investment	basis (investr		s (other)	deprec			Value
1a	Land		,	. ,	,			
	Buildings							
	Leasehold improvements			50,232.	3.	4,856.	1	5,376.
	Equipment			03,840.		5,815.		8,025.
	Other			02,173.		6,087.		6,086.
	. Add lines 1a through 1e. (Column (d) must e							9,487.

Sehedule D (Form 0

### Wild Salmon Center

(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valu st or end-of-year ma	
1) Financial derivatives				
) Closely-held equity interests				
) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I) tal. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.		ine 10		
	See Form 990, Part X, I		(c) Method of value	ation:
(a) Description of investment type	(b) Book value	Co	st or end-of-year ma	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
tal. (Col (b) must equal Form 990, Part X, col (B) line 13.)	1-			
Part IX Other Assets. See Form 990, Part X, lin				
	) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	15)		<b>`</b>	
tal. (Column (b) must equal Form 990, Part X, col (B) li         Part X       Other Liabilities. See Form 990, Part >			▶	
(a) Description of liability	k, line 25.	(b) Amount		
(1) Federal income taxes				
(2)				
(3)				
(4) (E)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11) (11)				
tal. (Column (b) must equal Form 990, Part X, col (B) lin FiN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote FIN 48 (ASC 740). 2023 202-10	to the organization's financial	statements that reports the organ	ization's liability for uncerta	ain tax positions under
053			Sch	edule D (Form 990) 2

Sche	dule D	(Form 990) 2010 Wild Salmon Center				94-	3166095	Page <b>4</b>
Pa	rt XI	Reconciliation of Change in Net Assets from Form 990	to Audited	d Financ	ial State	men	ts	
1	Total	revenue (Form 990, Part VIII, column (A), line 12)			1		5,120	
2	Total	expenses (Form 990, Part IX, column (A), line 25)			2		6,221	
3	Exces	s or (deficit) for the year. Subtract line 2 from line 1			3		-1,101	
4	Net u	nrealized gains (losses) on investments			4		-1	,371.
5		ted services and use of facilities			5			
6		tment expenses			6			
7		period adjustments			7			
8		(Describe in Part XIV.)			8			,309.
9	Total	adjustments (net). Add lines 4 through 8			9			,680.
10	Exces	s or (deficit) for the year per audited financial statements. Combine lines 3	and 9		10		-1,107	<u>,246.</u>
Par	t XII	Reconciliation of Revenue per Audited Financial Staten	nents With	n Reven	ue per R	eturi		
1	Total	revenue, gains, and other support per audited financial statements				1	5,294	<u>,983.</u>
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net u	nrealized gains on investments			1,371.			
b		ted services and use of facilities		138	3,362.			
С		veries of prior year grants						
d	Other	(Describe in Part XIV.)	2d	31	7,727.			- 4 4
е		nes <b>2a</b> through <b>2d</b>				2e	174	,718.
3	Subtr	act line <b>2e</b> from line <b>1</b>				3	5,120	<u>,265.</u>
4		nts included on Form 990, Part VIII, line 12, but not on line <b>1</b> :						
а	Inves	tment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other	(Describe in Part XIV.)	4b					-
с		nes 4a and 4b				4c		0.
5		revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)				5	5,120	<u>,265.</u>
Pa		Reconciliation of Expenses per Audited Financial State				Retu		
1		expenses and losses per audited financial statements				1	6,399	,908.
2		nts included on line 1 but not on Form 990, Part IX, line 25:		4.07				
а		ted services and use of facilities		138	3,362.			
b	Prior	year adjustments	2b					
с	Other	losses						
d		(Describe in Part XIV.)			9,715.		1 - 0	
е		nes <b>2a</b> through <b>2d</b>				2e	178	,077.
3	Subtr	act line <b>2e</b> from line <b>1</b>				3	6,221	,831.
4	Amou	nts included on Form 990, Part IX, line 25, but not on line <b>1</b> :						
а	Inves	tment expenses not included on Form 990, Part VIII, line 7b						
b		(Describe in Part XIV.)	4b					~
С		nes 4a and 4b				4c		0.
5		expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> )				5	6,221	,831.
		Supplemental Information						
Com	plete tl	nis part to provide the descriptions required for Part II, lines 3, 5, and 9; Par	t III, lines 1a a	and 4; Par	t IV, lines 1	b and	2b; Part V, line	4; Part

X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part	XI,	Line	8	-	Other	Adjustments:
------	-----	------	---	---	-------	--------------

Expenses	of	North	Pacific	Salmon	Trust	(NPST)	reported	on
						( /- / / / / / / / / / / / / / / / /		

NPST's Form 990

Net	assets	of	North	Pacific	Salmon	Trust,	reported	on
-----	--------	----	-------	---------	--------	--------	----------	----

NPST's Form 990

### Total to Schedule D, Part XI, Line 8

-1,988.

-2,321.

-4,309.

Schedule D (Form 990) 2010 Wild Salmon Center Part XIV Supplemental Information (continued)	94-3166095 Page 5
Part XII, Line 2d - Other Adjustments:	
Fundraising event expenses net with revenue for Form 990	37,727.
Part XIII, Line 2d - Other Adjustments:	
Expenses of North Pacific Salmon Trust (NPST), reported on	
NPST's Form 990	1,988.
Fundraising event expenses net with revenue for Form 990	37,727.
Total to Schedule D, Part XIII, Line 2d	39,715.

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.

Attach to Form 990. See separate instructions.

	organizat	

1

2

3

#### Open to Public Department of the Treasury Inspection Internal Revenue Service Employer identification number Name of the organization Wild Salmon Center 94-3166095 General Information on Activities Outside the United States. Complete if the organization answered "Yes" Part I to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the X Yes grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (e) If activity listed in (d) (a) Region (c) Number of (d) Activities conducted in region (f) Total expenditures émployees, offices (by type) (e.g., fundraising, program is a program service, agents, and for and in the region services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in region in region in region Grants for building Grants to recipients in the network of salmon Russia and newly Russian Far East and sanctuaries in Russian independent states Kamchatka region. Far East and Kamchatka, 0 1,786,250. 3 a Sub-total 0 1,786,250. ٥ b Total from continuation 0 0 sheets to Part I c Totals (add lines 3a 0 and 3b) 1,786,250.

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

Schedule F (Form 990) 2010

Ο.

OMB No 1545-0047

1

(a) Name of organization

Russia and the Protected Area Newly Independent Creation; Creation of States Watershed Councils 146,250.Wire transfer Ο. Russia and the Newly Independent Protected Area States 61,639.Wire transfer Ο. Support Russia and the Newly Independent Education and States Dutreach 35,000.Wire transfer Ο. Russia and the Newly Independent Protected Area States Monitoring 33,000.Wire transfer 0. Russia and the Newly Independent Protected Area States 28,467.Wire transfer 0. Support Russia and the Newly Independent Protected Area States Support 15,000.Wire transfer 0. 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Part II can be duplicated if additional space is needed.

(c) Region

Newly Independent Education and

Newly Independent Protected Area

Russia and the

Russia and the

States

States

(b) IRS code section

and EIN (if applicable)

Wild Salmon Center Schedule F (Form 990) 2010

3 Enter total number of other organizations or entities . Schedule F (Form 990) 2010 See Part IV for Column (d) descriptions 29

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

(e) Amount

of cash grant

recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

(d) Purpose of

grant

Salmon Park Creation,

Outreach, Monitoring,

Creation and Support

Conservation,

(g) Amount of

non-cash

assistance

0.

Ο.

(h) Description

of non-cash

assistance

Page 2

8

(i) Method of

valuation (book, FMV,

appraisal, other)

### 94-3166095

(f) Manner of

cash disbursement

1002802.Wire transfer

445,281.Wire transfer

Schedule	e F (Form 990)	Wild	Salmon Cente	er		94-31	66095		Page <b>2</b>
Part II	Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Nam	ne of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Russia and the Newly Independent States	Protected Area Creation	8,656.	Wire transfer	0.		

31

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.

(d) Amount of

cash grant

Ο.

(e) Manner of

cash disbursement

(c) Number of

recipients

3

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance

Support for Protected Area

Creation

#### Wild Salmon Center Schedule F (Form 990) 2010

(b) Region

Russia and newly

independent

states

(g) Description of

non-cash assistance

Fly Rods, 2 Mokai

8,155.Manufacturing Boats

**(h)** Method of valuation (book, FMV, appraisal, other)

FMV

### 94-3166095

(f) Amount of

non-cash

assistance

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)</i>	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form</i> 5471, <i>Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form</i> 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form</i> 5713, <i>International Boycott Report (see Instructions for Form</i> 5713)	Yes	X No

Schedule F (Form 990) 2010

(Form 990 or 990-EZ)

Department of the Treasury	
Internal Revenue Service	

### Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047
2010
Open To Public Inspection

•						Employer identification number 94-3166095		
Part I Fundraising Activities required to complete this part	Complete if the organization answ t.	ered "	/es" to	o Form 990, Part IV,	ine 1	7. Form 990-EZ	filers are not	
<ol> <li>Indicate whether the organization rais         <ul> <li>Mail solicitations</li> <li>Internet and email solicitations</li> <li>Phone solicitations</li> <li>In-person solicitations</li> </ul> </li> <li>2 a Did the organization have a written or key employees listed in Form 990, P</li> <li>If "Yes," list the ten highest paid ind compensated at least \$5,000 by the</li> </ol>	e Solicita f Solicita g Special or oral agreement with any individua Part VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra l (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru- fundraising services?	stees	Yes		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity		Did aiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)		(vi) Amount paid to (or retained by) organization	
		Yes	No					
Total								
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrik	oution	s or has been notified	d it is	exempt from re	egistration	

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

Schedule G (Form 990 or 990-EZ) 2010

### Schedule G (Form 990 or 990-EZ) 2010 Wild Salmon Center

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			WSC Spring Dinner Event		None	(add col. (a) through
e			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	39,270.			39,270
	2	Less: Charitable contributions	23,568.			23,568
_	3	Gross income (line 1 minus line 2)	15,702.			15,702
	4	Cash prizes				
ses	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	4,000.			4,000
Direct	7	Food and beverages	30,978.			30,978
	8	Entertainment	2,020.			2,020,
	9	Other direct expenses	729.			
	10	Direct expense summary. Add lines 4 throug			🕨	( 37,727
Pai	<u>11</u> rt		nn (d), and line 10	990. Part IV. line 19. or r	reported more than	-22,025
		\$15,000 on Form 990-EZ, line 6a.		, , , ,		
Ð			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(-,	bingo/progressive bingo	(0) 0	col. (a) through col. (c)
He	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 throug	gh 5 in column (d)		►	(
	8	Net gaming income summary. Combine line	1, column d, and line 7			
~	E not	rest =	atao goming optivition:			
а	ls t	ter the state(s) in which the organization oper he organization licensed to operate gaming a	ctivities in each of these s	states?		Yes No
U		No," explain:				
l0a	We	ere any of the organization's gaming licenses	revoked, suspended or te	rminated during the tax	year?	Yes No
		Yes," explain:				

032082 01-13-11

Schedule G (Form 990 or 990-EZ) 2010

Sch	edule G (Form 990 or 990-EZ) 2010 Wild Salmon Center 94-3	166	095	Page <b>3</b>
11	Does the organization operate gaming activities with nonmembers?		Yes	└── No
	to administer charitable gaming?		Yes	
13	Indicate the percentage of gaming activity operated in:			
a	The organization's facility	13a		%
	An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		-	
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
k	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount			
	of gaming revenue retained by the third party ▶\$			
c	If "Yes," enter name and address of the third party:			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided			
	Director/officer			
17	Mandatory distributions:			
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	🗀	Yes	└── No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year <b>s</b>		、 .	<u> </u>
Pa	<b>Int IV</b> Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information			
	······································			

SCHEDULE I									OMB No. 15	545-0047
(Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States						<b>20</b> <sup>-</sup>	10		
Department of the Treasury		Comp	olete if the organizatio	on answered "Yes	" to Form 990, Pa	rt IV, line 21 or 22.			Open to	Public
Internal Revenue Service				Attach to For	m 990.				Inspec	tion
Name of the organizat	ion Wild Salm	on Center	<u>_</u>					Employer	identification 94-316	
Part I General I	nformation on Grants a		-							
1 Does the organiz	zation maintain records	to substantiate th	e amount of the grants	or assistance, the	grantees' eligibilit	ty for the grants or ass	sistance, and the seled	ction		
criteria used to a	award the grants or assi	stance?							X Yes	🗌 No
2 Describe in Part	IV the organization's pr	ocedures for mon	itoring the use of grant	funds in the Unite	d States.					
Part II Grants an	nd Other Assistance to	Governments an	d Organizations in the	e United States. C	complete if the org	anization answered	es" to Form 990, Par	t IV, line 21	, for any	
recipient t	hat received more than	\$5,000. Check thi	is box if no one recipier	nt received more th	nan \$5,000. Part I		additional space is ne	eded		
.,	ddress of organization vernment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance		Purpose of gr or assistance	
	vation Innovation									
423 Washington St		01 01 01 00 405		16 050					able Fisher	ries
San Francisco, CA	A 94111	91-2166435	501(c)(3)	16,050.	0.			Program		
California Trout, 870 Market St., S										
San Francisco, CA	A 94102	23-7097680	501(c)(3)	26,639.	0.			North An	merica Prog	gram
Trout Unlimited A 419 Sixth Street, Juneau, AK 99801	-	38-1612715	501(c)(3)	26,639.	0.			North An	nerica Prog	gram
Quinault Indian M PO Box 189										
Taholah, WA 98587	7	91-0760952	501(c)(3)	9,729.	0.			North Ar	merica Pro <u>c</u>	gram
Oregon Natural De 33 NW Irving Aver	esert Association nue									
Bend, OR 97701		94-3098621	501(c)(3)	20,000.	0.			North Ar	nerica Prog	gram
The Nature Conser 821 SE 14th Avenu Portland, OR 9721	le	53-0242652	501(c)(3)	470,000.	0.			North An	nerica Pro <u>c</u>	gram
· · · · · · · · · · · · · · · · · · ·	per of section 501(c)(3) a			,			I			6.
	per of other organization							<b>•</b>		0.

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

Schedule I (Form 990) (2010)

Wild Salmon Center

Page 2

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(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.

Schedule I, Part I, Line 2: Grantees are required to report on the progress

of activities performed and deliverables attained in order to receive grant

payments. The Organization reserves the right to examine the books and

records of the receiving organization.

	HEDULE J rm 990)	<b>Compensation Information</b> For certain Officers, Directors, Trustees, Key Employees, and Highest		OMB No.	1545-00	47
		Compensated Employees Complete if the organization answered "Yes" to Form 990,		20	IU	,
Depa	rtment of the Treasury	Part IV, line 23.		Open to		
_	al Revenue Service	Attach to Form 990. See separate instructions.		Inspection rer identification number		
Nan	ne of the organizatior					mber
De	rt I Question	Wild Salmon Center s Regarding Compensation	94-	316609	2	
Pa		s Regarding Compensation			N N	<u> </u>
4-		a ta ba a (a a) 16 tha ann an iadh ann an iadh a lann a 6 tha 6 tha sin a ta an 6 an a mar ann 11 tha bir 🗖 🗖	000		Yes	No
а		ate box(es) if the organization provided any of the following to or for a person listed in Fo	rm 990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	, i i i i i i i i i i i i i i i i i i i				
	Travel for com					
		ation and gross-up payments				
		spending account Personal services (e.g., maid, chauffer	r, chet)			
h	If any of the bayes	on line to are checked, did the cranization follow a written policy recording payment or				
b	,	on line 1a are checked, did the organization follow a written policy regarding payment or provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all officers,				<u> </u>
-	•	EO/Executive Director, regarding the items checked in line 1a?	-	2		
	ind the O					
3	Indicate which if an	ny, of the following the organization uses to establish the compensation of the organizati	on's			
•		ector. Check all that apply.	5110			
	X Compensation					
		compensation consultant I Compensation survey or study				
	X Form 990 of ot		n committee			
4	During the year, did	any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					
а	•	e payment or change-of-control payment from the organization or a related organization	,	4a		Х
		ceive payment from, a supplemental nonqualified retirement plan?				Х
		ceive payment from, an equity-based compensation arrangement?				X
		hes 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.				
5	For persons listed in	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compens	ation			
	contingent on the re	evenues of:				
а	The organization?			5a		X
		ation?				X
	If "Yes" to line 5a o	r 5b, describe in Part III.				
6	For persons listed in	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compens	ation			
	contingent on the n	et earnings of:				
а	The organization?			6a		X
		ation?				X
		r 6b, describe in Part III.				
7	For persons listed in	n Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payme	ents			
	not described in line	es 5 and 6? If "Yes," describe in Part III		7		X
8	Were any amounts	reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject t	o the			
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III $\ldots$		8		X
9		d the organization also follow the rebuttable presumption procedure described in				
		1 53.4958-6(c)?		9		
LHA	For Paperwork Re	eduction Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forn	n 990)	2010

Schedule J (Form 990) 2010

Wild Salmon Center

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies 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.

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	<b>(C)</b> Retirement and		<b>(E)</b> Total of columns	<b>(F)</b> Compensation	
<b>(A)</b> Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	Nontaxable benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ	
(i)	147,625.	0.	0.	10,500.	13,063.	171,188.	0.	
<u>1 Guido R. Rahr III</u>	0.	0.	0.	0.	0.	0.	0.	
(i)								
(ii)								
(i)								
<u>3</u> (ii)								
4 (i) (ii)								
4 (ii) (i)								
5(ii)								
(i)								
6								
(i)								
<u>7</u> (ii)								
(i)								
<u>8</u> (ii)								
9 (ii) (i)								
10(ii)								
(i)								
11 (ii)								
(i)								
<u>12</u> (ii)								
(i)								
<u>13</u> (ii)								
(i)								
<u>14 (ii)</u>								
(i) 15								
(ii)(								
16 (i)								

SCHEDULE O	Supplemental Information to Form 990 or 990	-EZ	OMB No. 1545-0047						
(Form 990 or 990-EZ)	Complete to provide information for responses to specific questions on		2010						
Department of the Treasury Internal Revenue Service	Form 990 or 990-EZ or to provide any additional information.  Attach to Form 990 or 990-EZ.		Open to Public Inspection						
Name of the organization	Wild Salmon Center		identification number 166095						
Form 990, Pa:	rt III, Line 4a, Program Service Accomplishme	nts:							
(Continued from Page 2) Highlights of 2010 in the Western Pacific									
Program incl	ıde:								
-Khabarovsk	celebrates a 38,000-hectare reserve on the Ko	ppi Ri	ver.						
-The Public	Salmon Council Network of Sakhalin Island now	has a	total						
of six active	e salmon councils.								
-Partnering	organization Sakhalin Salmon Initiative (SSI)	had 6	4						
council membe	ers participating in trainings and workshops.								
-3,979 people	e were involved in eco-education in Sakhalin	region	public						
awareness pro	ograms in 2010.								
-The Ust-Bola	sheretsky region has the first official publi	<u>c salm</u>	on						
council on the	ne Kamchatka Peninsula.								
-WSC engaged	with Gasprom on a number of issues that incl	ude ad	vising						
on impacts of	f seismic testing on salmon migrations on the	West							
Kamchatka Sh	elf, to assessing damages of the gas pipeline	on th	e Kol						
Salmon Refuge	9.								
Khabarovsk									
A 38,000 hec	tare reserve was established on the Koppi Riv	er in	October						
2010, culmina	ating 10 years of research and advocacy in th	is wat	ershed.						
The Khabarov	sk Wildlife Foundation (KWF) has met with var	ious							
representati	ves from the government, agencies, and the lo	cal co	mmunity						
regarding the	e formation of a local public salmon council.	The C	ouncil						
will provide	a platform for public participation to addre	ss							
environmenta	l and conservation issues, restoration projec	ts, an	d						
anti-poaching	g activities.								

Schedule O (Form 990 or 990-EZ) (2010)	Page <b>2</b>
Name of the organization	Employer identification number
Wild Salmon Center	94-3166095

On the Nimelen River basin, a science-based justification for creation of a Federal Fishery Protected Zone (FFPZ) has been submitted. Upon completion by VNIRO, it will be sent to the Federal Fishery Agency to await the decree for its creation.

Sakhalin

The Public Salmon Council Network continues to provide training opportunities for its Councils, organized in six districts of Sakhalin, helping to strengthen cooperation with local law enforcement in community-based anti-poaching efforts and communicate best practices with other regions in the Far East. A website was created, www.sakhwatersheds.org, where councils can post results of work.

WSC and our partner, Sakhalin Salmon Initiative (SSI), held several trainings on best practices in watershed management, community outreach, strategic planning, and fundraising for council members in 2010. A total of 64 council members participated in the 2010 trainings, and workshop materials were sent to each council as well as posted on SSI's and WSC's websites. Community groups carried out more than 360 raids throughout the region and also picked up litter on spawning rivers and did outreach on the effects of poaching.

SSI is successfully implementing a project on environmental education and outreach to the young generation. A total of 3,979 people were involved in eco-education and Sakhalin region public awareness programs in 2010. The Education programs, "Salmon Watch" and "Droplet" are carried out in 40 primary and secondary education schools in the 0124-11 Schedule O (Form 990 or 990-EZ) (2010) 42

Schedule O (Form 990 or 990-EZ) (2010)	Page <b>2</b>				
Name of the organization Wild Salmon Center	Employer identification number $94 - 3166095$				
Sakhalin region. The "Live, Salmon!" festival attracted 300 students					
and guests - children of different age groups - from seven districts of					
Sakhalin. SSI hosted an International Salmon Forum for 24 Sakhalin and					
U.S. youth on Sakhalin Island.					

Creation of the country's first Salmon Park in the Aniva Region has progressed significantly. A site has been cleared and construction of the eco-education center and the education pavilion has begun. A trail along the Krasnodonka River is being cleared to allow students and the public to observe salmon spawning in their natural habitat, and plans have been made to build an outdoor research station on the bank of the Lutoga River. Using science, art, ecological tourism, and other programs, the park will educate the public on salmon and their habitat.

Kamchatka

With support from WSC and participation the of its Russian and international experts, the Federal Fishery Agency's All-Russian Scientific and Research Institute on Fisheries Management and Oceanography (VNIRO) and the Russian Academy of Sciences developed criteria for designation of salmon Federal Fishery Protected Zones (FFPZs) and approved a list of priority salmon rivers in the RFE, including the Opala on Kamchatka. The process has begun for creating a protected buffer zone to the Kronotsky Strict Nature Reserve, encompassing the entire Zhupanova River basin (over 2.4 m acres).

After participating in a March 2010 seminar in Sakhalin,

representatives from the Ust-Bolsheretsky region in Kamchatka

officially created the Peninsula's first public salmon council in <sup>032212</sup> <sup>01-24-11</sup> Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010)	Page 2				
Name of the organization Wild Salmon Center	Employer identification number 94-3166095				
January 2011. The council already has 28 members represen	ting				
commercial fisheries, community organizations, local indigenous					
communities, educators, enforcement agencies, and regional government.					
The council will address specific threats facing salmon in southwest					
Kamchatka.					

Research partnerships have been established between the Kol Salmon Refuge and scientific institutions and universities on the Kamchatka, all-Russian, and international levels. International Kol Biostation has been successfully transferred to the Kamchatka State Technical University's Department of Aquatic Sciences. The university is managed by the Federal Fishery Agency, which has allocated funds to support student field research on the Kol.

Scientific monitoring, enforcement, and outreach programs, established for the Kol Salmon Refuge, resulted in significant decreases in poaching on the Kol and greater integration of the reserve into society.

Research carried out in August 2010 by Moscow State University and IPEE staff with co-funding from WSC showed that the abundance and diversity of salmonids was still very high, speaking to effective enforcement and successful escapement levels. In 2010, the Kol River Refuge reached at least 5,000 children and youths through a variety of educational programs.

In June 2010, the Wild Salmon Center and The Fly Shop organized an exchange for Russian sport fishers, hunters, and ecotourism outfitters <sup>032212</sup> <sup>01-24-11</sup> Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010)	Page <b>2</b>
Name of the organization Wild Salmon Center	Employer identification number 94-3166095
to visit Alaska. The purpose of the exchange was to intro	oduce
outfitters to concepts of private business stewardship, c	onservation
advocacy in salmon strongholds, and the sustainable treat	ment of
resources, including catch-and-release fly fishing.	

With partners, WSC supported an independent media channel

(www.fishkamchatka.ru) to distribute factual information on salmon

fisheries policy and science, including international best practices.

The forum fosters open dialogue and debate among fisheries

stakeholders.

Form 990, Part III, Line 4b, Program Service Accomplishments:

(Continued from Page 2) The stronghold approach is explicitly designed

as a complement to existing salmon conservation strategies, which focus

heavily on the restoration of degraded habitats and recovery of

threatened and endangered populations.

In 2010, WSC made significant progress on several of our highest priority strategies to secure the health of North America's wild salmon strongholds.

WSC was the primary funder in the acquisition of almost 70 acres of wetlands within Oregon's Tillamook Bay watershed. This project complements an effort WSC recently started with local groups to prioritize wetlands protection and restoration opportunities in the Tillamook Bay stronghold.

Schedule O (Form 990 or 990-EZ) (2010)	Page <b>2</b>			
Name of the organization Wild Salmon Center	Employer identification number $94 - 3166095$			
of critical "blueback" (sockeye) salmon habitat on the Ol	ympic			
Peninsula, and granted funds to the Upper Columbia Salmon	Recovery			
Board to initiate an innovative land exchange process wit	hin the			
Wenatchee River stronghold. The Hoh River Trust, founded	by WSC and			
Western Rivers Conservancy, reached a milestone in perman	ently			
protecting over 7,000 acres on the Hoh River. These effor	ts have			
yielded almost complete protection of the Hoh's main stem	, extending			
from the river's mouth at the Hoh Indian Reservation to i	ts protected			
headwaters within Olympic National Park.				
With the support of several partners in California, WSC completed a two				
year scientific assessment of the state's wild salmon pop	ulations and			

identified six California "salmon strongholds." The resulting map was

reviewed and approved by the North American Salmon Stronghold

Partnership. Similarly, WSC partnered with groups in British Columbia

(BC) on a population assessment that led to the designation of BC's

Harrison River as the province's first salmon stronghold under the

North American Salmon Stronghold Partnership.

In Alaska, WSC completed a draft report evaluating possible impacts of the proposed Pebble Mine in the Bristol Bay watershed. In California, WSC and its California partners completed a Google Earth-based assessment of threats to California's strongholds.

WSC also moved forward three key policy initiatives that advanced the stronghold approach in North America. WSC spearheaded a broad coalition that introduced legislation allowing the Oregon Board of Forestry to permanently protect critical habitats. On the coasts of Oregon and 032212 01-24-11 Schedule O (Form 990 or 990-EZ) (2010) 46

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization	Page 2 Employer identification number
Wild Salmon Center	94-3166095
Washington, they formally engaged the states to consider	establishment
of wild fish management zones. At the federal level, WSC	was successful
in including the Pacific Salmon Stronghold Conservation A	ct in a
natural resource omnibus bill ("America's Great Outdoors	Act"), a
package of roughly 100 conservation bills.	
Form 990, Part III, Line 4c, Program Service Accomplishme	nts:
(Continued from Page 2) The program further provides tech	nical
assistance and facilitates dialogue among fisheries manag	ers,
scientists, conservationists and other stakeholders to in	form and
strengthen salmon conservation and management practices	
internationally. Specific areas of interest in 2010 inclu	ded:
- limiting the impact of hatcheries on wild salmon;	
- improving public access to high-quality tools for salmo	n conservation
planning and management system evaluation, and promoting	their
larger-scale adoption;	
- strengthening the Marine Stewardship Council certificat	ion
(internationally recognized fisheries eco-label) process	to be more
robust and effective for driving improvements in salmon f	isheries; and
- facilitating dialogue between climate-salmon specialist	s, fisheries
managers and conservationists to share implications of cl	imate change
and discuss specific adaptive management strategies that	will be needed
to ensure salmon populations have the best chance to adap	t to future
climate change.	

Accomplishment highlights in 2010 included:

Schedule O (Form 990 or 990-EZ) (2010)	Page <b>2</b>
Name of the organization Wild Salmon Center	Employer identification number $94 - 3166095$
Interactions between Wild and Hatchery Salmon Technical w	ith over 300
participants in Portland, OR. This marked the first ever	international
convening on this topic. Interest in the topic of ecologi	cal risks to
wild salmon from hatchery operations has grown dramatical	ly over recent
decades, particularly in the U.S. Pacific Northwest where	hatchery
development has been intense as a result of significant h	abitat
degradation and loss. Attendees and presenters came from	across the
North Pacific, including delegations from Russia and Japa	n, to address
big themes including climate change, competitive interact	ions between
salmon stocks in the ocean, critical gaps in our knowledg	e, and
immediate needs for management actions to reduce risks fr	om hatcheries.
Steps were in full progress to publish the full proceedin	gs from the
conference in the form of a special issue of the journal,	Environmental
Biology of Fishes, during 2011.	
Technical work on a conservation planning toolkit was com	pleted. The

toolkit is structured around basic tasks that are necessary for

conserving salmon: 1) evaluating and assessing current population

health, 2) assessing watershed condition, threats, and limiting

factors, 3) modeling intrinsic patterns and processes of the watershed,

4) designing wild salmon conservation networks, 5) assessing fisheries

management, and 6) monitoring status, trends, and effectiveness. The

goal is to empower the scientific community to consider the many

objectives of salmon conservation in a transparent, flexible, and

credible manner. A web application to provide access to this

information was largely completed for launch in 2011.

Schedule O (Form 990 or 990-EZ) (2010)	Page <b>2</b>
Name of the organization Wild Salmon Center	Employer identification number $94 - 3166095$
Department of Fish and Wildlife to build and launch a web	visualization
tool to track the progress and performance of Oregon's ef	forts to
recover Oregon coastal coho salmon. The first version of	this tool was
completed and can be found at http://odfwrecoverytracker.	org/. SoS
progressed work with Department of Fisheries and Oceans C	anada and the
Alaska Department of Fish and Game toward obtaining simil	ar long term
goals of building transparent and publicly accessible inf	ormation
systems to account for the status of wild salmon populati	ons and
associated performance by fishery agencies to meet salmon	management
objectives.	
SoS provided technical services to the Marine Stewardship	Council (MSC)
	1.1. 0

in drafting improvements to MSC's fishery assessment methodology for Pacific salmon, designed to improve its robustness for fishery sustainability assessments. Similarly, SoS staff provided key consulting services to the United Nations Food and Agriculture Organization (FAO) in the development of ecolabelling guidelines for fish and fishery products for inland capture fisheries. Both efforts directly addressed minimum substantive requirements for ensuring that salmon hatcheries do not impact the sustainability of wild salmon populations as part of fishery sustainability assessments and ecolabelling.

Work began in late 2010 on planning an international workshop, to be hosted by SoS in November 2011, on Salmon in a Changing Climate: Practical management options for an era of environmental change. The workshop will be designed to explore implications of climate change to wild Pacific salmon and identify practical management strategies to 032212 01-24-11 Schedule O (Form 990 or 990-EZ) (2010) Name of the organization

Wild Salmon Center

mitigate undesirable impacts.

Form 990, Part III, Line 4d, Other Program Services:

4) Sustainable Fisheries Program

The overarching goal of the Sustainable Fisheries Program is to improve

the long-term sustainability of Asia's wild salmon fisheries, which

produce one half of the world's wild Pacific salmon. The project

employs market-based incentives as well as the Wild Salmon Center's

technical, scientific, and collaborative strengths to leverage salmon

fisheries' sustainability and related management reforms.

In November 2010, the Marine Stewardship Council (MSC) announced that eleven Sakhalin Island fishing companies entered the full assessment phase of the MSC process (http://www.msc.org/track-a-fishery/ in-assessment/pacific/sakhalin-island-and-aniva-bay-pink-salmon). These companies hail from three regions on Sakhalin Island and annually harvest up to 21,000 metric tons of pink salmon. In addition, several fishery improvement projects were implemented this past summer including a bycatch monitoring project that will increase the likelihood that these fisheries meet the MSC standard.

The Northeast Hokkaido (Kitami region) chum fishery, a 60,000 metric ton fishery, with technical and scientific support from the WSC, just completed its first ever quantitative stock assessment of wild chum salmon (a prerequisite for setting wild salmon escapement goals). In February 2011, WSC staff organized a study tour for representatives of the Hokkaido chum fishery to learn more about wild salmon management 002212 01-24-11 Schedule O (Form 990 or 990-EZ) (2010) 50

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization Wild Salmon Center	Employer identification number $94 - 3166095$
systems in Alaska and their potential application	ı in Japan.
Expenses \$ 570,031. including grants of \$ 56,0	50. Revenue \$ 29,480.

Form 990, Part VI, Section A, Line 1a: The Executive Committee is made up of the committee chairs for Audit/Finance, Nominating and Development, the founder, and the past Board Chair. It is chaired by the current Board Chair. Bylaws allow the Executive Committee to perform most, but not all, of the Board functions.

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 possible after the completion of the audit, and forwards a draft of the return to the Director of Finance for review. After reviewing Form 990, the Director of Finance 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 President and 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.

Schedule O (Form 990 or 990-EZ) (2010)	Page <b>2</b>
Name of the organization Wild Salmon Center	Employer identification number 94-3166095
	94-9100099
Form 990, Part VI, Section B, Line 12c: On an annual basi	s, Board members
and all employees complete the conflict of interest quest	ionnaire, which
asks them to list each of the potential conflicts as desc	ribed in the
policy. The Executive Vice President and the Director of	Finance review the
forms and disclosures for all members of the Board and st	aff, respectively.
For the Board members, the Executive Vice President makes	a summary of the
results and gives them to the Executive Committee for rev	iew. The Executive
Committee of the Board makes a determination as to whethe	r the perceived
conflict is real or not. We have not had a real conflict	in the last seven
years, but if we did, the nature of the conflict would be	reviewed by the
Board, and appropriate actions would be taken (depending	on the type of
conflict) to eliminate the conflict. (This could be as si	mple as the Board
member recusing him/herself from a decision, to disposing	or terminating
the conflicting relatioship.) For employees, the manageme	nt committee would
review the conflict and perform a similar function to res	olve the conflict.

Form 990, Part VI, Section B, Line 15: Wild Salmon Center's process for determining compensation of top management officials and other officers includes review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberations and decisions. This process was last undertaken for the Chief Executive Officer in 2008.

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. Such salaries were reinstated on January 1, 2010.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990: AR,AZ,CO,DC,FL,GA,MA,MD,MN,NC,NJ,NM,NY,OH,OR,PA,TN,UT,VA,WA,WI

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization Wild Salmon Center	Employer identification number 94-3166095
Form 990, Part VI, Section C, Line 19: The Wild Salmon Ce	nter's financial
statements are available to the public on the Organizatio	n's own website.
WSC's Articles of Incorporation, Bylaws and Conflict of I	nterest Policy are
available upon request from the Director of Finance.	
Form 990, Part XI, line 5, Changes in Net Assets:	
Net unrealized losses on investments:	-1,371.
Expenses of North Pacific Salmon Trust (NPST) reported on	
NPST's Form 990	-1,988.
Net assets of North Pacific Salmon Trust, reported on	
NPST's Form 990	-2,321.
Total to Form 990, Part XI, Line 5	-5,680.

SCHEDUL	FR
COLIEDOE	

(Form 990) Department of the Treasury Internal Revenue Service

## **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2010 Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94 - 3166095

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

<b>(a)</b> Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> 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.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	<b>g)</b> 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
North Pacific Salmon Trust - 20-5602442	Promote long-term salmon						
721 NW 9th Avenue, Suite 300	abundance, diversity, and			170(b)(1)			
Portland, OR 97209-3446	habitat protection.	Oregon	501(c)(3)	(A)(vi)	N/A		X
	_						
	_						

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

Schedule R (Form 990) 2010

Part III 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.)

(a)	(b)	(c)	(d)		(e)	(f)	(g)	(1	h)		(i)	(		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Predomi (related	nant income , unrelated, rom tax under	Share of total income	Share of end-of-year		portion- cations?	amour	e V-UBI nt in box	mana	ging	ercentaç wnershi
C C		foreign country)		excluded f	rom tax under s 512-514)		assets		No	20 of S K-1 (Fo	chedule rm 1065)	Yes	No	
	-													
	-													
	_													
	-													
	_													
	-													
	-													
rt IV Identification of Related O organizations treated as a c	rganizations Taxable a	<b>as a Corp</b> ong the tax	year.)	mplete if t	-		1	art IV, I					more	
TIV Identification of Related O organizations treated as a c (a) Name, address, and of related organizati	orporation or trust durir	as a Corpo	oration or Trust (Co year.) (b) Primary activ		the organizat (c) Legal domicile (State or foreign country)	ion answered "Yes" (d) Direct controlling entity	to Form 990, Pa (e) Type of entity (C corp, S corp or trust)	s	(f)	) of total	e it had o (g Shai end-o ass	<b>g)</b> re of f-yea	Pe	related (h) ercenta wnersł
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corp ng the tax	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corp ing the tax	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corp ng the tax	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta
(a) Name, address, and	orporation or trust durir	as a Corp ng the tax	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta
(a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta
(a) Name, address, and	orporation or trust durir	as a Corp ag the tax	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta
(a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)		(C) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp	s	(f) hare c	) of total	(g Shai end-o	<b>g)</b> re of f-yea	Pe	(h) ercenta

# Schedule R (Form 990) 2010 Wild Salmon Center

Part V	Transactions With Related Organizations (Complete if the organization ans	wered "Yes" to Form	n 990, Part IV, line 34, 35,	35a, or 36.)			
Note.	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
	uring the tax year, did the organization engage in any of the following transaction	s with one or more r	elated organizations listed	in Parts II-IV?			
	eccipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		Х
<b>b</b> Gift, grant, or capital contribution to other organization(s)						X	
<b>c</b> G	ift, grant, or capital contribution from other organization(s)				1c		Х
d Lo	pans or loan guarantees to or for other organization(s)				1d		Х
e Lo	pans or loan guarantees by other organization(s)				1e		Х
f Sa	ale of assets to other organization(s)				1f		Х
g Pi	urchase of assets from other organization(s)				1g		Х
h Ex	change of assets				1h		Х
i Le	ease of facilities, equipment, or other assets to other organization(s)				1i		Х
j Le	ease of facilities, equipment, or other assets from other organization(s)				1j		Х
k Pe	erformance of services or membership or fundraising solicitations for other organ	ization(s)			1k		Х
I Performance of services or membership or fundraising solicitations by other organization(s)							X
m Sharing of facilities, equipment, mailing lists, or other assets							X
n S	naring of paid employees				1n		Х
	eimbursement paid to other organization for expenses				10		X
<b>p</b> R	eimbursement paid by other organization for expenses				1p		Х
							37
	ther transfer of cash or property to other organization(s)				1q		X
	ther transfer of cash or property from other organization(s)				1r		Х
<b>2</b> If	the answer to any of the above is "Yes," see the instructions for information on w	vho must complete t I	his line, including covered I	relationships and transaction thresholds.			
	(a) Name of other organization	<b>(b)</b> Transaction type (a-r)	<b>(c)</b> Amount involved	(d) Method of determining amount involved			
(1)							
<u></u>							
(2)							
(3)							
(4)							
<u>\''</u>							
(5)							

(6)

## Schedule R (Form 990) 2010 Wild Salmon Center

#### 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.

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign	(d) Are all partners section 501(c)(3) organizations?		<b>(e)</b> Share of end-of- year assets	(f) Dispropor- tionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	() Gene mana parti	<b>h)</b> eral or aging :ner?
		country)	Yes			Yes	No	(Form 1065)	Yes	

Schedule R (Form 990) 2010

Part VII	Supplemental	Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).