# Form **990**

Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax** 

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

2011

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

Open to Public Inspection

A	For th	e 2011 calendar year, or tax year beginning and	ending		
В	Check if applicab	C Name of organization		D Employer identifi	cation number
	Addre				4.5.505
	Name chang	e   Doing Business As		94-3	166095
	Initial return	Trompor dita survei (************************************	Room/suite	E Telephone numbe	
	Termi ated	~ 721 NW 9th Avenue, Suite 300		(503	
	Amen	City or town, state or country, and ZIP + 4		G Gross receipts \$	9,121,582.
	Applie	Portland, OR 97209-3446		H(a) Is this a group re	eturn
	pendi	F Name and address of principal officer: Guido R. Rahr III	· · · · · · ·	for affiliates?	Yes X No
		same as C above		H(b) Are all affiliates inc	cluded? Yes No
$\overline{}$	Tay-ay	empt status: X 501(c)(3)	or 527	1 ' '	list. (see instructions)
		te: > www.wildsalmoncenter.org		H(c) Group exemption	
		organization: X Corporation Trust Association Other	ı Year		A State of legal domicile: WA
	art I		2 .04	01 101 manon: ===================================	
	1	Briefly describe the organization's mission or most significant activities: To ic	dentif	v. understa	nd and
Activities & Governance	'	protect the best wild salmon ecosystems	of the	Pacific Ri	m.
nar		Check this box if the organization discontinued its operations or dispose			
Ver	1			3	14
ĝ	3	Number of independent voting members of the governing body (Part VI, line 1a)			13
<u>من</u>	4	Total number of individuals employed in calendar year 2011 (Part V, line 2a)			38
ij	5				13
ξ	0	Total number of volunteers (estimate if necessary)  Total unrelated business revenue from Part VIII, column (C), line 12			0.
ď					0.
	- 0	Net unrelated business taxable income from Form 990-T, line 34		Prior Year	Current Year
ne ne		Contributions and events (Dort VIII line 1h)		5,035,074.	9,048,212.
	8	Contributions and grants (Part VIII, line 1h)		80,351.	59,987.
Revenue	9	Program service revenue (Part VIII, line 2g)		20,088.	
æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-15,248.	
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2007	5,120,265.	
_	12_	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,355,307.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	29/59	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	140.00100	2,438,965.	• • •
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	
ë	16a	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  559, 2	~~~ <del> </del>	Maria Maria de las de Santos	Autoritation (Company)
ă	_ b			1,427,559.	1,334,947.
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,221,831.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-1,101,566.	
	19	Revenue less expenses. Subtract line 18 from line 12		eginning of Current Year	
Net Assets or			B6	4,563,627.	End of Year 8, 210, 242.
SSe	20	Total assets (Part X, line 16)	······	308,216.	
et A	21	Total liabilities (Part X, line 26)		4,255,411.	7,991,082.
<u> </u>	22	Net assets or fund balances. Subtract line 21 from line 20		4,233,411.	1,331,002.
		alties of perjury, I declare that I have examined this return, including accompanying schedule	a and atatam	ante and to the heet of m	w knowledge and helief it is
					ly knowledge and belief, it is
true	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wi	nich preparei	rilas ally kilowieuge.	7/5-/19
		Signature of officer		Date	119/12
Sig	-	Guido R. Rahr III, President and CEO			
He	re	Type or print name and title			
_				Date Check	II PTIN
_		Print/Type preparer's name  Preparer's signature		if I	
Pai		Sang Ahn		self-emplo	
	parer	Firm's name McDonald Jacobs, P.C.		Firm's EIN	93-0900579
Us	e Only	Firm's address 520 SW Yamhill, Ste 500			:00 007 0E01
		Portland, OR 97204		Phone no. 5	03 227-0581
Ma	v the l	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	To identify, understand, and protect the best wild salmon ecosystems
	of the Pacific Rim, by devising and implementing practical strategies,
	based on the best science, to protect forever these extraordinary
	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?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
7	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
 4а	others, the total expenses, and revenue, if any, for each program service reported. (Code:) (Expenses \$ 2,175,822 \cdot including grants of \$ 1,099,543 \cdot ) (Revenue \$)
44	1) Western Pacific Program
	1) Western Factific Frogram
	Wild Column Combon Would Wildlife Don't and Don't's Don't company formed
	Wild Salmon Center, World Wildlife Fund, and Pacific Environment formed
	a three-way partnership and five-year strategy to conduct conservation
	activities on Russia's Kamchatka Peninsula. The partnership is
	coordinated by WSC and will focus on: expanding the protected area
	network, engaging mining and oil and gas development companies in
	implementing best practices, advocating for sustainable fisheries, and
	adapting the Sakhalin Salmon Council model to Kamchatka.
	(Continued on Schedule O)
4b	(Code:) (Expenses \$
	2) North America Program
	Completed the science based report, "Bristol Bay's Wild Salmon
	Ecosystems and the Pebble Mine: Key Considerations for a Large-Scale
	Mine Proposal." The report describes the ecological, economic, and
	cultural concerns raised by the development of the Pebble copper, gold,
	and molybdenum deposit in the headwaters of the Bristol Bay basin,
	which is home to North America's most abundant wild salmon fishery and
	the world's largest sockeye salmon run.
	(Continued on Schedule O)
4c	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	3) The State of the Salmon
	The State of the Salmon (SoS) convened a small international workshop
	with researchers from Alaska, Russia, and Japan on evaluating the
	extent and impacts of hatchery strays, with particular emphasis on pink
	and chum salmon. The expected result is an active international
	collaboration to develop a predictive model and risk assessment tool
	that can help managers assess and reduce impacts of hatchery straying
	on wild salmon.
	(Continued on Schedule O)
	TOTOLITAGE OF BOTTOMALO OF
	Other program services (Describe in Schedule O.)
40	(Expenses \$ 634,926 • including grants of \$ 50,819 •) (Revenue \$ 11,748 •)
40	Total program service expenses ► 4,374,165.
<del>-10</del>	Form <b>990</b> (2011)

# Form 990 (2011) Wild Salmon Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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/	A
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			37
	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			Х
A	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		- 22
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	ا ا	v	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	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	- 11	
	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, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		Х
19	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20</b> b		

# Form 990 (2011) 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 any government or organization in the			
	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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		Х
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			v
	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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I			Х
32	If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			Х
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Λ
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	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	000		
~	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			37
	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?		, l	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2011)

# Form 990 (2011) Wild Salmon Center | Part 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
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 31		163	NO
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C		4.	Х	
0-	(gambling) winnings to prize winners?	1c	21	
Za	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 38			
		1	Х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	21	
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		Х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3a 3b		- 25
	•	30		
48	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)?	40		х
h		4a		
D	If "Yes," enter the name of the foreign country:			
<b>5</b> 0	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Ea		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
b	, , , , , , , , , , , , , , , , , , , ,	-		- 25
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	60		х
h	any contributions that were not tax deductible?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		- 25
D		6h		
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
	tame a survivar and the	7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	76		
C		7c		х
٨		70		
e	If "Yes," indicate the number of Forms 8282 filed during the year	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <del>f</del>		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	
8	Sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Did the supporting $N/A$	/ !!	,	_
	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?  N/A	9a		
	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 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 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? N/A	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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		F	000	(0011)

Form 990 (2011) **Part VI** Gov

	Check if Schedule O contains a response to any question in this Part VI		<u></u>		X
Sec	ction 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	14	<u> </u>		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent 1b	13	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any oth	er			
	officer, director, trustee, or key employee?		2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct super				
	of officers, directors, or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х
6	Did the organization have members or stockholders?		6		Х
7a					
-	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or				
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
	The governing body?	-	8a	Х	
b			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the				
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.				
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliating				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing		11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe				
	in Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independ	lent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	Х	
	Other officers or key employees of the organization		15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				
	taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participa				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				
	exempt status with respect to such arrangements?		16b		
Sec	ction C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ►AR, AZ, CO, DC, FL, GA, MA	MD, MN	I, NC	,NJ	, NM
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501	(c)(3)s only)	availab	ole	
	for public inspection. Indicate how you made these available. Check all that apply.				
	X Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest	est policy, ar	nd finar	ncial	
	statements available to the public during the tax year.				
20	State the name, physical address, and telephone number of the person who possesses the books and records of	the organiza	ition:	<b>_</b> _	
	Anna V. Gabbis - (503) 222-1804				

94-3166095

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of				
	week (describe hours for related organizations in Schedule O)	stee or director	Institutional trustee	Officer Officer	Key employee	Highest compensated employee	ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Michael Sutton	1 00	х						0.	0.	0
Board Chair (2) Stone Gossard	1.00							0.	0.	0.
Director	1.00	x						0.	0.	0.
(3) Leah Hair	1.00	^						0.	0.	· ·
Director	1.00	Х						0.	0.	0.
(4) Jim Lichatowich	1.00							0.	0.	
Director	1.00	x						0.	0.	0.
(5) Sydney McNiff Johnson	1.00							•	•	
Director	1.00	x						0.	0.	0.
(6) Dmitry Pavlov										
Director	1.00	х						11,500.	0.	0.
(7) James W. Ratzlaff								,	_	
Director	1.00	Х						0.	0.	0.
(8) Peter Seligmann										
Director	1.00	Х						0.	0.	0.
(9) Peter Soverel										
Director	1.00	Х						0.	0.	0.
(10) Jack Stanford										
Director	1.00	Х						0.	0.	0.
(11) John E. McCosker										
Director	1.00	Х						0.	0.	0.
(12) Oleg Alekseev								_	_	_
Director	1.00	Х						0.	0.	0.
(13) Frank Cassidy Jr.										
Director	1.00	Х						0.	0.	0.
(14) Dan Plummer	1 00	l								
Director	1.00	Х						0.	0.	0.
(15) William Swindells	1 00	,,								0
Director	1.00	Х				_	_	0.	0.	0.
(16) Brooks Walker	1 00	٦,							_	^
Director	1.00	Х					-	0.	0.	0.
(17) Guido R. Rahr III President & CEO	40.00			х				155,500.	0.	23,688.
TIODIACHE & CHO	1 -20.00			77		<u> </u>	<u> </u>	1 133,300.	ı	43,000

Page 8

Dort VIII			_									•	ago -
Part VII Section A. Officers, Directors, Tru		nplo	oyee			High	est		ees (continued)				
(A)	(B) (C) Average Position			(D)	(E)	• •		(F)					
Name and title	Average		not c	heck	more	than		Reportable	Reportable			stimate	
	hours per					is bot or/trus		compensation	compensati		ar	nount	of
	week (describe	$\vdash$	T				Ι,	from	from relate			other	
	hours for	or director				L		the organization	organizatior (W-2/1099-MI			pensa om th	
	related	e or d	tee			sated		(W-2/1099-MISC)	(***-2/1099-1011	30)		anizat	
	organizations	trustee	ll trus		ee Ge	mper		(** 27 1000 141100)			_ ~	d relat	
	in Schedule	dual	Institutional trustee	_	employee	st co	. l					anizati	
	O)	Individual	Instit	Officer	Key er	Highest compensated employee	Former						
(18) Jeffrey Baumgartner													
Exec. VP; Board Sec/Treas	40.00			Х				117,731.		0.	1	8,4	64.
(19) Greg Block													
VP Conservation Finance and External	32.00			Х				94,845.		0.	2	5,7	10.
(20) Richard Lincoln													
State of the Salmon Director	40.00					X		109,050.		0.	2	0,3	56.
-								, , , , , ,					
-													
-													
-													
Al. Oak tatal	1					┶		488,626.		0.	Ω	8,2	1 Q
1b Sub-total								0.		0.	-	0,2	0.
c Total from continuation sheets to Part V								488,626.		0.	Ω	8,2	•
d Total (add lines 1b and 1c)								· · · · · · · · · · · · · · · · · · ·			_ 0	0,2	10.
2 Total number of individuals (including but r	ot limited to tr	iose	liste	ed al	DOV	e) wi	no r	eceived more than \$100	,000 of reportar	ole			,
compensation from the organization												Yes	No
<b>6</b> Billi i i i i i i i i i i i i i i i i i												163	140
3 Did the organization list any <b>former</b> officer,													v
line 1a? If "Yes," complete Schedule J for s											3		Х
4 For any individual listed on line 1a, is the su									the organization	1	_	37	
and related organizations greater than \$15											4	X	
5 Did any person listed on line 1a receive or a	•				-			_					37
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	uch	pers	son					5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co	-	-								mpens	ation	from	
the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	/ithir	n the organization's tax	year.				
(A)				_				(B)		_ ا	((		
Name and business	address	N	INC	5				Description of s	ervices		compe	nsatio	n
							_						
							_						
										L			
2 Total number of independent contractors (	includina but r	ot li	mite	d to	tho	se li	ster	d above) who received m	nore than				
\$100,000 of compensation from the organi	•					0		,					
												~~~	

Pa	rt VII	II   Statement of Rever	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts		Federated campaigns						
٦٥		Membership dues			-			
r Ağ		Fundraising events			-			
<u>a</u>		Related organizations		366,214.	-			
Sin		Government grants (contribut		300,214.	-			
ig E	т	All other contributions, gifts, gran		681,998.				
		similar amounts not included abo		2,809.				
S E	•	Noncash contributions included in lines			9,048,212.			
9.0	<u>n</u>	Total. Add lines 1a-1f						
	0 -	Salmon conserva	ation	Business Code 90009	59,987.	59,987.		
ķ	2 a			700077	33,307.	33,307.		
Ser	b							
K E	C							
gra	d							
Program Service Revenue	e							
_		All other program service reve			59,987.			
$\dashv$	<u>9</u> 3	Total. Add lines 2a-2f			33,307.			
	3	other similar amounts)		•	9,097.			9,097.
	4	Income from investment of ta			3,0370			3,0370
	5	Royalties	•	-				
	3	noyanies	(i) Real	(ii) Personal				
	6 2	Gross rents	· · · ·	(ii) i ersoriai	-			
	b				-			
	c							
		Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(ii) Other				
	<i>,</i> .	assets other than inventory	(i) Cecarities	(ii) Guilei	-			
	b	Less: cost or other basis						
		and sales expenses						
	c	Gain or (loss)			-			
		Net gain or (loss)		<b>&gt;</b>				
4		Gross income from fundraisin						
ng	0 4	including \$						
eve		contributions reported on line						
Ř		Part IV, line 18	•					
Other Revenue	b	Less: direct expenses			-			
0		Net income or (loss) from fund		<b>&gt;</b>				
		Gross income from gaming a	-					
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gan		<b></b>				
		Gross sales of inventory, less	-					
		and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sale		<b>&gt;</b>				
1		Miscellaneous Revenu		Business Code				
	11 a	Miscellaneous 1	Income	900099	4,286.			4,286.
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d			4,286.			
	12	Total revenue. See instructions.			9,121,582.	59,987.	0.	13,383.

### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

comp	plete columns (B), (C), and (D).				
	Check if Schedule O contains a respon				<u></u>
	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	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	121,623.	121,623.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	1,150,362.	1,150,362.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	445 400	244 642	40 440	60 040
	trustees, and key employees	447,438.	341,648.	42,442.	63,348.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 000 505	1 200 071	181 556	056 050
7	Other salaries and wages	1,808,585.	1,380,971.	171,556.	256,058.
8	Pension plan accruals and contributions (include	00 200	60 010	0 574	10 707
	section 401(k) and section 403(b) employer contributions)	90,390.	69,019. 202,977.	8,574. 25,341.	12,797. 37,823.
9	Other employee benefits	164,414.	124,528.	17,605.	22,281.
10	Payroll taxes	104,414.	124,526.	17,605.	22,201.
11	Fees for services (non-employees):				
	Management	6,943.	4,600.	2,343.	
	Legal	17,155.	4,000.	17,155.	
	Accounting	1,167.	1,167.	17,133.	
a	Lobbying Professional fundamining convices. See Part IV. Jing 17	1,107.	1,107.		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	319,318.	287,504.	4,295.	27,519.
g 10	Other	29,650.	17,247.	638.	11,765.
12 13	Advertising and promotion	82,881.	51,068.	23,792.	8,021.
14	Office expenses Information technology	02,001.	31,000.	25,1521	0,021.
15					
16	Royalties	127,618.	92,040.	19,369.	16,209.
17	Occupancy Travel	511,480.	442,923.	35,303.	33,254.
18	Payments of travel or entertainment expenses	022,2000		00,000	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	40,554.	38,444.		2,110.
20	Interest	727.	•	727.	<u> </u>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	63,266.	25,891.	36,908.	467.
23	Insurance	14,476.	4,145.	10,331.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Miscellaneous expense	59,844.	10,536.	33,791.	15,517.
b	Bad Debt	50,000.			50,000.
С	Dues and subscriptions	9,868.	7,472.	275.	2,121.
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	5,383,900.	4,374,165.	450,445.	559,290.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
10001	0 01-23-12				Form <b>990</b> (2011)

Pa	rt X	Balance Sheet				
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		918,889.	1	811,551.
	2	Savings and temporary cash investments		2,447,743.	2	3,011,299.
	3	Pledges and grants receivable, net	796,983.	3	4,181,016.	
	4	Accounts receivable, net	2,812.	4	2,156.	
	5	Receivables from current and former officers, director				
		employees, and highest compensated employees. C	· · · · · · · · · · · · · · · · · · ·			
					5	
	6	of Schedule L  Receivables from other disqualified persons (as defined by the second sec			Ť	
	"	4958(f)(1)), persons described in section 4958(c)(3)(B				
		employers and sponsoring organizations of section s	-			
		employees' beneficiary organizations (see instruction	-		6	
şţ	7				7	
Assets	l .	Notes and loans receivable, net			8	
⋖	8	Inventories for sale or use		262,450.	9	145,245.
	9	Prepaid expenses and deferred charges	 T	202,430	9	143,243
	lua	Land, buildings, and equipment: cost or other	a 553,724.			
	۱ .	basis. Complete Part VI of Schedule D 10		109,487.	100	58,975.
		Less: accumulated depreciation 10		100,407	11	30,373.
	11	Investments - publicly traded securities	25,263.	_		
	12	Investments - other securities. See Part IV, line 11		25,205.	12	
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		4,563,627.	15	8,210,242.
	16	Total assets. Add lines 1 through 15 (must equal lin		276,330.	16 17	219,160.
	17	Accounts payable and accrued expenses	270,330•	_	219,100.	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
Liabilities	21	Escrow or custodial account liability. Complete Part			21	
ij	22	Payables to current and former officers, directors, tr				
Lia		highest compensated employees, and disqualified p	•			
		of Schedule L		31,886.	22	
	23	Secured mortgages and notes payable to unrelated		31,000.	23	
	24	Unsecured notes and loans payable to unrelated thi			24	
	25	Other liabilities (including federal income tax, payabl				
		parties, and other liabilities not included on lines 17-				
	00	Schedule D		308,216.	25	219,160.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here	Y	300,210.	26	219,100.
			and complete			
Š		lines 27 through 29, and lines 33 and 34.		1,718,118.		1,846,544.
<u>la</u> n	27	Unrestricted net assets		2,537,293.	27	6,144,538.
Ва	28	Temporarily restricted net assets		2,331,233.	28	0,144,550.
Net Assets or Fund Balances	29				29	
Ę		Organizations that do not follow SFAS 117, check	there  and			
S		complete lines 30 through 34.			00	
set	30	Capital stock or trust principal, or current funds			30	
As	31	Paid-in or capital surplus, or land, building, or equipr			31	
Net	32	Retained earnings, endowment, accumulated incom		4,255,411.	32	7,991,082.
_	33	Total net assets or fund balances			33	
	34	Total liabilities and net assets/fund balances		4,563,627.	34	8,210,242.

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI				X	
1 2 3 4 5 6	Total revenue (must equal Part VIII, column (A), line 12)  Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	1 2 3 4 5 6	9,12 5,38 3,73 4,25	3,9 7,6 5,4 2,0	82. 00. 82. 11.	
Pa	rt XIII 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			162	NO	
22	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
za b	Were the organization's financial statements audited by an independent accountant?			Х	X	
C		e audit,		х		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	d on a				
	separate basis, consolidated basis, or both:  Separate basis  Separate basis  Separate 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 Sir	•				
	Act and OMB Circular A-133?		3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	200		
			Form	990 (	(2011)	

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

Ope

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number

94-3166095

Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name. 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes Nο the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization in col. organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 governing document? (i) of your support? U.S.? above or IRC section (see instructions)) Yes No Yes Yes No

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

Schedule A (Form 990 or 990-EZ) 2011

Total

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4104618.	9092068.	6551913.	5035074.	9045212.	33828885.
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	4104618.	9092068.	6551913.	5035074.	9045212.	33828885.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						17872770.
6	Public support. Subtract line 5 from line 4.						15956115.
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
	Amounts from line 4	4104618.	9092068.	(c) 2009 6551913.	(d) 2010 5035074.	9045212.	33828885.
8	Gross income from interest,						
Ü	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	133,062.	44,107.	25,415.	20,088.	9,097.	231,769.
۵	Net income from unrelated business	13370021	11/10/1	23 / 113 (	20,0001	3 7 0 3 7 0	23277034
9	activities, whether or not the						
	·						
10	business is regularly carried on Other income. Do not include gain						
10	-						
	or loss from the sale of capital assets (Explain in Part IV.)	7,827.	937.	2 798	-15,248.	4,286.	600.
44	Total support. Add lines 7 through 10	7,027.	2311	2,750	13,240.	4,200	34061254.
		-t- ( in-tt-				12	246,449.
	Gross receipts from related activities, First five years. If the Form 990 is for	•	,				240,447.
13							▶□
Sec	organization, check this box and <b>stor</b> ction C. Computation of Publ	ic Support Pe	rcentage				
				valuman (f))		14	46.85 %
	Public support percentage for 2011 (I		•	* * * * * * * * * * * * * * * * * * * *		15	45 00
	Public support percentage from 2010 33 1/3% support test - 2011. If the o						
104		-					
	stop here. The organization qualifies 33 1/3% support test - 2010. If the o						
L		-					
47-	and <b>stop here.</b> The organization qual						
1/a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac		•	•	•	ū	. $\square$
	meets the "facts-and-circumstances"	_			•		
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the				-		
	organization meets the "facts-and-circ						
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						

### 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	ciow, picase com	piete i art ii.j				
_	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	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							
7	ization's benefit and either paid to						
	or expended on its behalf						
_							
Э	The value of services or facilities						
	furnished by a governmental unit to						
•	the organization without charge						
	Total. Add lines 1 through 5						
/ 8	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons						
ı.	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		1	1	1		
	endar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6						
108	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV.)						
13	<b>Total support</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
	check this box and stop here						<b>&gt;</b>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2011 (I	ine 8, column (f) c	livided by line 13,	column (f))		15	%
	Public support percentage from 2010					16	%
Se	ction D. Computation of Inves	stment Incom	e Percentage				
	Investment income percentage for 20					17	%
18	Investment income percentage from 2	<b>2010</b> Schedule A,	Part III, line 17			18	%
19a	a 33 1/3% support tests - 2011. If the	organization did	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	e organization qua	lifies as a publicly	supported organiz	ation	▶□
k	33 1/3% support tests - 2010. If the	organization did	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and <b>s</b>	<b>top here.</b> The orga	anization qualifies	as a publicly supp	orted organization	▶□
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	<b>&gt;</b>

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

OMB No. 1545-0047

**Employer identification number** 

2011

Wild Salmon Center 94-3166095 Organization type (check one): Filers of Section: X 501(c)( 3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For 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**

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, total 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 total 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

**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 Part I, 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).

religious, charitable, etc., contributions of \$5,000 or more during the year.

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) (2011)

Name of organization

Employer identification number

# Wild Salmon Center

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1		\$300,000.	Person X Payroll Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2		\$ <u>4,733,876</u> .	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3		\$ 201,978.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4		\$889,290.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5		\$ 221,430.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6		\$ 650,000.	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.)		

Name of organization Employer identification number

# Wild Salmon Center

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 295,269.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)

Employer identification number

# Wild Salmon Center

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (2011)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Name of organization Employer identification number

wild	Salmon	Center
WILL	Datilon	CETTCET

Part III	Exclusively religious, charitable, etc., indiv	vidual contributions to section 501(	c)(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter		
	the total of exclusively religious, charitable, etc	c., contributions of <b>\$1,000 or less</b> fo	r the year. (Enter this information once) > \$		
	Use duplicate copies of Part III if additional		Little and midmadon choos.)		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Tarti					
-		(e) Transfer of gi	<u> </u>		
	Towards were and delivery and	-1.7ID 4	Deletionship of the order to the order		
-	Transferee's name, address, ar	IQ ZIP + 4	Relationship of transferor to transferee		
			•		
(a) No.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gi	ft		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
(a) No					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(e) Transfer of gi	fer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	(2) 1 3.10000 01 9.11	(6) 000 01 9.11	(a) Description of non-grittonica		
		(e) Transfer of gi	rt .		
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		

#### **SCHEDULE C**

(Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 See separate instructions.

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 35c (Proxy Tax), then

• ;	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.				
Nam	ne of organization			E	mploy	er identification number
		lmon Center				94-3166095
Pa	art I-A Complete if the org	ganization is exempt unde	r section 501(c)	or is a section 52	27 org	ganization.
2	Provide a description of the organiz Political expenditures Volunteer hours	·			<b>▶</b> \$_ 	
Pa	rt I-B Complete if the org	ganization is exempt unde	r section 501(c)(	3).		
1	Enter the amount of any excise tax	incurred by the organization unde	r section 4955		▶\$_	
2	Enter the amount of any excise tax	incurred by organization manager	s under section 4955		<b>&gt;</b> \$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	r this year?			Yes No
4a	Was a correction made?					Yes No
b	If "Yes," describe in Part IV.					
Pa	rt I-C Complete if the org	ganization is exempt unde	r section 501(c),	except section 5	501(c)	(3).
1	Enter the amount directly expended	d by the filing organization for sect	ion 527 exempt functi	on activities	▶\$_	
	Enter the amount of the filing organ					
	exempt function activities				▶\$_	
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here and	d on Form 1120-POL,			
	line 17b				<b>&gt;</b> \$_	
4	Did the filing organization file Form	1120-POL for this year?				Yes No
	Enter the names, addresses and er					
	made payments. For each organiza	ation listed, enter the amount paid	from the filing organiza	ation's funds. Also ent	ter the	amount of political
	contributions received that were pr			•	parate	segregated fund or a
	political action committee (PAC). If	additional space is needed, provid	e information in Part I	V.		
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization funds. If none, enter	's c	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011	MIIO PAIMON	Center	- 504/-\/0\	74-3	100093 Page 2
Part II-A Complete if the org	-	mpt under sectio	n 501(c)(3) and fil	ed Form 5768	
(election under sec					
		liated group (and list ir	Part IV each affiliated	group member's nam	e, address, EIN,
. —	re of excess lobbying	• •	. data a a a a a b .		
Limi	ts on Lobbying Expe	nd "limited control" pro nditures unts paid or incurred.		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion (	grass roots lobbying)			
<b>b</b> Total lobbying expenditures to infl				1,944.	
c Total lobbying expenditures (add I	1,944.				
<b>d</b> Other exempt purpose expenditur				5,381,957.	
e Total exempt purpose expenditure				5,383,901.	
f Lobbying nontaxable amount. Ent				419,195.	
If the amount on line 1e, column (a) of		bying nontaxable am		,	
Not over \$500,000	_ ` / _	the amount on line 1e.			
Over \$500,000 but not over \$1,00		00 plus 15% of the exc	ess over \$500.000.		
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc	· ·		
Over \$1,500,000 but not over \$17		00 plus 5% of the exce	, ,		
Over \$17,000,000	\$1,000,0	•	. , ,		
	+ -,,				
g Grassroots nontaxable amount (er	nter 25% of line 1f)			104,799.	
h Subtract line 1g from line 1a. If zero or less, enter -0-				0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than ze		line 1i. did the organiza	ation file Form 4720		
reporting section 4911 tax for this					Yes No
·	•	eraging Period Under			
(Some organiz		ection 501(h) election		plete all of the five	
cc	olumns below. See th	e instructions for line	s 2a through 2f on pa	age 4.)	
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	( <b>d)</b> 2011	(e) Total
2a Lobbying nontaxable amount	534,144.	495,555.	434,468.	419,195.	1,883,362.
<b>b</b> Lobbying ceiling amount					0 005 045
(150% of line 2a, column(e))					2,825,043.
c Total lobbying expenditures		33,061.	33,900.	1,944.	68,905.
d Grassroots nontaxable amount	133,536.	123,889.	108,617.	104,799.	470,841.
e Grassroots ceiling amount (150% of line 2d, column (e))					706,262.
	I	i		I	I

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description

(b)

(a)

# Schedule C (Form 990 or 990-EZ) 2011 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)).

of the	e lobbying activity.	Yes	No	Amo	ount
a b c d e f g h i j 2a b	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?  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?  Direct contact with legislators, their staffs, government officials, or a legislative body?  Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?  Total. Add lines 1c through 1i  Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  If "Yes," enter the amount of any tax incurred under section 4912  If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	)(5), or se	ection	
	501(c)(6).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	163	140
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
1	t III-B Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	"No" OF	R (b) Part		e 3, is
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		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex- does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
_	expenditure next year?				
5 Par	Taxable amount of lobbying and political expenditures (see instructions)  t IV Supplemental Information		5		
Comp	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P part for any additional information.	art II-A; and	Part II-B, lii	ne 1. Also, o	complete

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

Par	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6	i.	
		(a) Donor advised funds	(b) Funds and other accounts
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 wri	ting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's ex		
6	Did the organization inform all grantees, donors, and donor adv		
	for charitable purposes and not for the benefit of the donor or c		
Par	t II Conservation Easements. Complete if the organ	nization answered "Yes" to Form 990, I	
1	Purpose(s) of conservation easements held by the organization	(check all that apply).	
	Preservation of land for public use (e.g., recreation or edu	ucation) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	T		
С	Number of conservation easements on a certified historic struc-	ture included in (a)	2c
d	Number of conservation easements included in (c) acquired after	er 8/17/06, and not on a historic struct	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, relea	sed, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation easer	ment is located >	
5	Does the organization have a written policy regarding the period	dic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it he	olds?	Yes
6	Staff and volunteer hours devoted to monitoring, inspecting, an	nd enforcing conservation easements of	during the year
7	Amount of expenses incurred in monitoring, inspecting, and en	forcing conservation easements during	g the year 🕨 \$
8	Does each conservation easement reported on line 2(d) above s		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	n's financial statements that describes	the organization's accounting for
Da	conservation easements.	Net Historical Transcripto or C	Othor Circilor Assets
Pai	t III Organizations Maintaining Collections of A		other Similar Assets.
	Complete if the organization answered "Yes" to Form 99		
та	If the organization elected, as permitted under SFAS 116 (ASC		
	historical treasures, or other similar assets held for public exhib	· ·	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describe		A constitution of the least of the second of
D	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, educ	cation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items:		<b>•</b> •
	(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 treasu		ai gain, provide
_	the following amounts required to be reported under SFAS 116		<b>▶</b> ¢
a	Revenues included in Form 990, Part VIII, line 1		
D	Assets included in Form 990, Part X		• • <u> </u>

by: (i) unrelated organizations

3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b

Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment	<b>nt.</b> See Form 990, Part X	, line 10.				
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value		
1a Land						
<b>b</b> Buildings						
c Leasehold improvements		50,232.	49,885.	347.		
d Equipment		198,701.	181,397.	17,304.		
e Other		304,791.	263,467.	41,324.		
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)						

Schedule D (Form 990) 2011

Yes

No

Part VII Investments - Other Securities. Se	e Form 990, Part X, line	12.	y
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-year	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G) (H)			
(I)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related. Se	ee Form 990. Part X. line	13.	
(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-year	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶  Part IX Other Assets. See Form 990, Part X, line	<b>4</b> E		
	Description		(b) Book value
(1)	Boomption		(b) Book value
(1) (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B) line			🕨
Part X Other Liabilities. See Form 990, Part X,	line 25.	#15 · · ·	
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
(10)			
(11)			
	25.)		
Total. (Column (b) must equal Form 990, Part X, col (B) line Fin 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to Fin 48 (ASC 740).	the organization's financial stat	ements that reports the organization's liability for u	incertain tax positions under

2. FIN 4 132053 01-23-12

	Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements								
1	Total revenue (Form 990, Part VIII, column (A), line 12)								
2	Total expenses (Form 990, Part IX, column (A), line 25)								
3	Excess or (deficit) for the year. Subtract line 2 from line 1								
4	Net unrealized gains (losses) on investments								
5	Donated services and use of facilities								
6									
7	Investment expenses								
8	Prior period adjustments Other (Describe in Part XIV.)		1 1						
9	, , , , , , , , , , , , , , , , , , , ,								
10	Total adjustments (net). Add lines 4 through 8								
	rt XII Reconciliation of Revenue per Audited Financial Stateme			Return					
1			iovenue per i	1					
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			-					
2		ا مو ا							
a				-					
b	Donated services and use of facilities			-					
С.	Recoveries of prior year grants			-					
d	,								
е	• • • • • • • • • • • • • • • • • • • •			2e					
3	Subtract line 2e from line 1			3					
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1							
а	, , , ,			_					
b	/	4b							
С				4c					
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5					
Ра	rt XIII Reconciliation of Expenses per Audited Financial Statem			r Return					
1	Total expenses and losses per audited financial statements			1					
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1							
а									
b	Prior year adjustments	2b							
С	Other losses	2c							
d	Other (Describe in Part XIV.)	2d							
е	• • • • • • • • • • • • • • • • • • • •			2e					
3	Subtract line 2e from line 1			3					
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:								
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a							
b	Other (Describe in Part XIV.)	4b							
С	Add lines 4a and 4b			4c					
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5					
Pa	rt XIV Supplemental Information								
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	II, lines 1a an	d 4; Part IV, lines	1b and 2b; Pa	rt V, line 4; Part				
X, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	olete this part	to provide any ac	dditional inforn	nation.				
		· · · · · · · · · · · · · · · · · · ·	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>				

### 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.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

**Employer identification number** 

Wi	ld Salmon Cen	ter				94-316609	95
			ctivities Ou	tside the United States. Compl	ete if the organ		
	to Form 990, Par			·	J		
1	For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gr	ants and other	assistance,	
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assi	stance? X	Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	organization's	procedures for monitoring the use of it	s grants and of	ther assistance out	side the
3	Activities per Region. (TI	he following Part	I, line 3 table ca	an be duplicated if additional space is	needed.)		
	(a) Region	<b>(b)</b> Number of offices in the region		(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activis a prog describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
					Grants for	building	
				Grants to recipients in the	network of	salmon	
Rus	sia and newly			Russian Far East and	sanctuaries	in Russian	
ind	ependent states	0	0	Kamchatka region.	Far East an	d Kamchatka.	1,150,362.
3 a	Sub-total	0	0				1,150,362.
	Total from continuation sheets to Part I	0	0				0.
c	Totals (add lines 3a	0	0				1 150 362.

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

Schedule F (Form 990) 2011

Part II Grants and Other	er Assistance to Or	ganizations or Entities	Outside the United States. C	complete if the o	rganization answered	d "Yes" to Form 9	90, Part IV, line 15, fo	r any
recipient who rec	ceived more than \$5,	,000. Check this box if n	o one recipient received more	than \$5,000				▶ ∐
Part II can be du	plicated if additional	space is needed.						
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Salmon Park Creation,					
		Russia and the	Conservation,					
		newly Independent	Education and					
		States	Outreach, Monitoring,	476,533.	Wire Transfer	0.		
		Russia and the newly Independent States	Protected Area Creation and Support	311,615.	Wire Transfer	0.		
				,				
		Russia and the	Protected Area					
		newly Independent	Creation; Creation of					
		States	Watershed Councils	100,000.	Wire Transfer	0.		
		Russia and the		100 261	Wine Manafes			
		States	Support	108,361.	Wire Transfer	0.		
		Russia and the newly Independent States	Outreach	30,000.	Wire Transfer	0.		
			To help improve the					
		Russia and the	sustainability of					
		newly Independent States	fisheries.	30 000	Wire Transfer	0.		
			risheries.	30,000.	Wile Hallster	0.		
		Russia and the newly Independent States	Protected Area Support	11,533.	Wire Transfer	0.		
		Russia and the						
		newly Independent States		15 000	Wire Transfer	0.		
2 Cudan datal monetari at		l .	Support		Wire Transfer	-		
			recognized as charities by the n 501(c)(3) equivalency letter	Toreign country	, recognized as tax-e	xempt by		8
3 Enter total number of	-	•	ii 50 i(c)(s) equivalency letter			····· 【 -		2
Chile total number of	other organizations	or entitles					Sched	lule F (Form 990) 2011

Part	Scriedule i (i dilli 990)		Durmon conce	•			00033		raye z
1 (b) IRS code section (c) Region (d) Purpose of grant (e) Amount of cash grant (f) Manner of cash disbursement (g) Amount of non-cash assistance (i) Method of valuation (book, FM) appraisal, other)  Russia and the newly Independent States  Russia and the newly Independent Education and	Part II Continuation of	of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
newly Independent Protected Area States Creation 30,000.Wire Transfer 0.  Russia and the newly Independent Education and							non-cash	of non-cash	(i) Method of valuation (book, FMV, appraisal, other)
States Creation 30,000.Wire Transfer 0.  Russia and the newly Independent Education and			Russia and the						
States Creation 30,000.Wire Transfer 0.  Russia and the newly Independent Education and			newly Independent	Protected Area					
newly Independent Education and					30,000.	Wire Transfer	0.		
States Dutreach 8,258, Wire Transfer 0.			1						
			States	Outreach	8,258.	Wire Transfer	0.		

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. Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (h) Method of (a) Type of grant or assistance (b) Region valuation (book, FMV, appraisal, other) recipients cash grant cash disbursement non-cash non-cash assistance assistance Russia and newly Support for Protected Area independent Creation states 3 11,368.Wire Transfer 0. russia and newly independent 9,350.Checks 0 Ecotrail development support states 2

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

Schedule F (Form 990) 2011

## Part V | Supplemental Information

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

Schedule F, Part I, Line 2: On a regular basis, usually quarterly,
grantees are required to provide a grant report to the Organization to
ensure that progress on deliverables is occuring. The Organization
requires that satisfactory progress on deliverables and the achievement
of outcomes is necessary for the next payment to be remitted to the
grantee.
Part II, Column (d):
Region: Russia and the newly Independent States
(d) Purpose of Grant: Salmon Park Creation, Conservation, Education and
Outreach, Monitoring, Creation of Watershed Councils, Sustainable
Fisheries

#### SCHEDULE I (Form 990)

Department of the Treasury

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

➤ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization Employer identification number Wild Salmon Center 94-3166095 General Information on Grants and Assistance Part I 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection XYes criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ...... (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book. if applicable cash grant non-cash assistance or assistance or aovernment non-cash FMV, appraisal, assistance other) Ouinault Indian Nation PO Box 189 0 Taholah, WA 98587 91-0760952 501(c)(3) 10,271. North America Program Oregon Chapter, Sierra Club 1821 SE Ankeny Street Portland, OR 97214 94-6069890 501(c)(3) 0 14,250 North America Program The Regents of The University of California - PO Box 989062 - West Sacramento, CA 95798 94-6036494 501(c)(3) 35,000 0 Conservation Science Tillamook Estuaries Partnership PO Box 493 Garibaldi, OR 97118 02-0584357 501(c)(3) 25,000, 0 North America Program The Nature Conservancy of Oregon 821 SE 14th Avenue Portland, OR 97214 53-0242652 0 501(c)(3) 10,000. North America Program 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011)

Schedule   (Form 990) (2011) Wild Salmon Cer	nter				94-3166095	Page 2
Part III Grants and Other Assistance to Individuals in the Un Part III can be duplicated if additional space is needed.	i <b>ted States.</b> Con	nplete if the organiza	ation answered "Yes	to Form 990, Part IV, line 22.		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assis	tance
Part IV Supplemental Information. Complete this part to provi	de the informatio	ı ın required in Part I,	line 2, and any other	r additional information.		
Schedule I, Part I, Line 2: Grante	es are r	equired to	report on	the progress		
of activities performed and delive	erables a	ttained in	order to	receive grant		
payments. The Organization reserve	s the ri	ght to exa	mine the b	ooks and		
records of the receiving organizat	ion.					

Schedule I (Form 990) (2011)

### SCHEDULE J (Form 990)

# **Compensation Information**

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

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

Wild Salmon Center

Employer identification number 94-3166095

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			1
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant    X   Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
				1
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			1
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			37
	The organization?	5a		X
b	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III.			1
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			v
	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" to line 6a or 6b, describe in Part III.			
7		_		v
_	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			7.7
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		i

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

Schedule J (Form 990) 2011

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

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

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	<b>(D)</b> Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
(i	148,000.	7,500.	0.	10,500.	13,188.	179,188.	0.
1 Guido R. Rahr III (i	0.	0.	0.	0.	0.	0.	
(i							
2 (i							
3 (i							
4 (i							
(i							
(i							
6 (i							
_7 (i							
(i							
_8 (i	i)						
(i							
9 (i							
10 (i							
11 (i							
(i							
12 (i							
(6							
13 (i							
14 (i							
(i							
	i)						
(i							
16 (i	i)						

## SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011
Open to Public Inspection

Name of the organization

Wild Salmon Center

Employer identification number 94-3166095

Form 990, Part III, Line 4a, Program Service Accomplishments: (Continued from Page 2) Highlights of 2011 in the Western Pacific Program include: Sakhalin Environment Watch (SEW) and Sakhalin Government have put forward a proposal to allocate state funds to support and expand the regional protected areas system of Sakhalin from 2012-2018. Approva1 of the appropriation will allow the release of \$20 million in new government funds over seven years for supporting existing protected areas and creating at least two new protected areas for taimen conservation. The Khabarovsk Ministry of Natural Resources approved a packet of proposals for including priority salmon watersheds in the Regional Program on Creation and Development of Protected Areas for 2011-2020. Effective enforcement efforts on the Kol River Refuge on Kamchatka resulted in fewer poaching violations and more salmon in the Kol River system than in neighboring salmon rivers. Cooperation and in-kind support from the Vityaz Avto fishing company, Gazprom, and Kamchatka State Technical University helped WSC and the refuge implement more

The Public Watershed (salmon) Council Network in the Russian Far East
expanded beyond Sakhalin to include Kamchatka and Khabarovsk. Two new
councils, in Khabarovsk Region and Kamchatka, began functioning in

effective enforcement measures.

Employer identification number 94-3166095

2011, adding to the five active councils on Sakhalin. Each of the councils are developing conservation action plans for their rivers with input from international experts, with the goal of reducing poaching and influencing regional policy. The councils are successfully sharing experiences through exchanges and social networks. In October, council members from all three regions visited the US and met with watershed council organizers in Oregon.

WSC advised the US Department of State, the US Embassy in Moscow, and the Russian Ministry of Natural Resources on the scope of work for the US-Russian Bilateral Presidential Commission's Environmental Working Group (EWG). At the suggestion of WSC, Deputy Assistant Secretary for Environment and Sustainable Development Dan Reifsnyder, who coordinates the work of the EWG on the US side, visited Kamchatka in July, and took part in the 16th annual Russian-American Pacific Partnership (RAPP) meeting. During his visit, Mr. Reifsnyder's delegation applauded the work of WSC, and announced to the press that "Kamchatka has the only salmon conservancy area [the Kol River Refuge] in the world and we would like to create a similar one in our country following Russian example."

WSC's Russian Far East activities were included in the 2011-2012

work-plan of the U.S.-Russia Agreement on Cooperation in the Field of

Protection of the Environment and Natural Resources (Area V), helping

to guarantee political support in Russia for our work.

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

(Continued from Page 2) The U.S. Senate reintroduced the Pacific Salmon

Greatest Permanent Value (GPV) rule and directed the Board of Forestry

to establish permanent conservation areas in the Tillamook and Clatsop
State Forests.

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

(Continued from Page 2) The SoS-hosted the conference Salmon in a

Changing Climate, which highlighted the importance of maintaining

diversity, productivity, and resilience of wild salmon populations in

the face of climate-mediated environmental change.

SoS organized an international workshop on taimen in conjunction with
the Annual Meeting of the Society for Conservation Biology. The
workshop drew taimen experts and applied conservationists from Asia,
Europe and North America to focus attention on threatened taimen and
contribute toward a global IUCN freshwater biodiversity assessment.

A total of 25 scientific papers authored or edited by SoS staff were published in 2011 or will in published in 2012. Twenty-three papers, representing the proceedings of the May 2010 SoS conference Ecological Interactions between Wild & Hatchery Salmon, will be included in a special issue of the journal Environmental Biology of Fishes, for which Pete Rand, SoS Senior Conservation Biologist, is serving as guest editor. In addition, two papers on Sakhalin taimen by Pete Rand and US, Russian, and Japanese scientific colleagues were published in peer reviewed journals.

The Bonneville Power Administration, a major funder of salmon

restoration and monitoring in the Pacific Northwest, has formally

adopted monitoringmethods.org and is requiring all of their grantees to

use it. This is a significant advancement that will improve the

time.

Expenses \$ 634,926. including grants of \$ 50,819. Revenue \$ 11,748.

Employer identification number 94-3166095

Form 990, Part VI, Section A, line 1: The Executive committee is made up of the board chair, the founder, and the committee chairs for Audit/Finance, Nominating, Development, and Program Committees. It is chaired by the current board chair. Bylaws allow the committee to perform most, but not all of the Board functions. Most importantly, the committee is prohibited from altering or repealing the Bylaws and Articles of Incorporation; electing, appointing or removing any director, officer or committee member; adopting a plan of merger with another corporation; authorizing the voluntary dissolution of the organization.

Form 990, Part VI, Section B, line 11: The 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 annual financial 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 all Board Members for its review and 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 is made to file the return in a timely manner with the IRS. A copy of the completed, signed and filed Form 990 with schedules is included in the next Board of Directors Meeting packet for information.

Employer identification number 94-3166095

Form 990, Part VI, Section B, Line 12c: On an annual basis, Board members and all employees complete the conflict of interest questionnaire, which asks them to list each of the potential conflicts as described in the policy. The Executive Vice President and the Director of Finance review the forms and disclosures for all members of the Board and staff, respectively. For the Board members, the Executive Vice President makes a summary of the results and gives them to the Executive Committee for review. The Executive Committee of the Board makes a determination as to whether the perceived conflict is real or not. We have not had a real conflict in the last eight years, but if we did, the nature of the conflict would be reviewed by the Board, and appropriate actions would be taken (depending on the type of conflict) to eliminate the conflict (This could be as simple as the Board member recusing him/herself from a decision, to disposing or terminating the conflicting relatioship). For employees, the management committee would review the conflict and perform a similar function to resolve the conflict.

Form 990, Part VI, Section B, Line 15: Wild Salmon Center's process for determining compensation of the following persons included review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberations and decisions. The year this process was last undertaken for each of the management officials is stated below:

Chief Executive Officer - 2011, Executive Vice President -2011, VP

Conservation Finance and External Affairs - 2011.

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

Wild Salmon Center	94-3166095
statements are available to the public on the Organization	n's own website.
WSC's Articles of Incorporation, Bylaws, and Conflict of	Interest 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:	-200.
ES	-1,988.
CHANGE IN NORTH PACIFIC SALMON TRUST NET ASSETS	177.
Total to Form 990, Part XI, Line 5	-2,011.

## SCHEDULE R (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.

2011 Open to Public Inspection

Name of the organization

Wild Salmon Center

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

Employer identification number 94-3166095

(a)	(b)	(c)	(d)	(e)	)	(f)		
Name, address, and EIN	Primary activity	Legal domicile (state	or Total inco	ome End-of-yea	r assets	ts Direct controlling		
of disregarded entity		foreign country)				er	ntity	
	7							
	7							
	7							
	7							
	-							
	$\dashv$							
	-							
Identification of Polated Tay Evenus Overei	-stiens (Complete if the examination	anguared "Vas" to Form 000	0 Dort IV line 24 k	l l	or more	rolated tax aver	mnt	
Part II Identification of Related Tax-Exempt Organizations during the tax year.)	zations (Complete if the organization	answered fes to Form 990	u, Part IV, line 34 t	because it riad one	or more	related tax-exer	прі	
	(6)	(-)	(4)	(-)		(4)	1	1
(a)	(b)	(c)	(d)	(e)		(f)	Section	<b>g)</b> 512(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Exempt Code section	Public charity status (if section		ct controlling entity		rolled ity?
of related organization		foreign country)	Section	501(c)(3))		entity		
				301(0)(0))			Yes	No
North Pacific Salmon Trust - 20-5602442	Promote long-term salmon							
721 NW 9th Avenue, Suite 300	abundance, diversity, and			170(b)(1)	L			,,
Portland, OR 97209-3446	habitat protection.	Oregon	501(c)(3)	(A)(vi)	N/A		-	Х
	_							
	_							
	_							

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

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.)
	organizations treated as a partnership during the tax year.)

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	n)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income		l .	portion-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managi	or Percentage ownership
or related organization		(state or foreign	entity	excluded from tax under	liicome	assets	ate allocations?		20 of Schedule	partne	? Ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership

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

Yes No

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

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

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

							-		
b	Gift, grant, or capital contribution to related organization(s)				1b	Х			
С	Gift, grant, or capital contribution from related organization(s)				1c		X		
	Loans or loan guarantees to or for related organization(s)				1d		Х		
е	Loans or loan guarantees by related organization(s)				1e		X		
f	Sale of assets to related organization(s)				1f		Х		
g	Purchase of assets from related organization(s)				1g		X		
h Exchange of assets with related organization(s)									
i	Lease of facilities, equipment, or other assets to related organization(s)				1i		X		
j	Lease of facilities, equipment, or other assets from related organization(s)				1j		X		
k Performance of services or membership or fundraising solicitations for related organization(s)									
	Performance of services or membership or fundraising solicitations by related organization				11		Х		
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1m		X		
	Sharing of paid employees with related organization(s)				1n		X		
o	Reimbursement paid to related organization(s) for expenses				10		X		
р	Reimbursement paid by related organization(s) for expenses				1p		X		
-									
q	Other transfer of cash or property to related organization(s)				1q		Х		
r	Other transfer of cash or property from related organization(s)				1r		Х		
2	If the answer to any of the above is "Yes," see the instructions for information on who mus								
	(a) Name of other organization Tra	(b) ansaction ype (a-r)	(c) Amount involved	(d) Method of determining amount involved					
(1)									
(2)									
(3)									
(4)	<del></del>								
(5)									
(6)									
	63 01-23-12	48		Schedule F	) /Farm	- 000\	2011		

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.

(a)  Name, address, and EIN  of entity	<b>(b)</b> Primary activity	(c)	(e)	(f) Share of total income	(g) Share of end-of-year assets	(h Dispro tiona allocati Yes	por- ite ons?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General manage partne	(k) Percentage ing ownership
	-									
	-									
	-									
	-									
	-									
	-									

Schedule R	(Form 990) 2011	Wild	Salmon	Center	94-3166095	Page 5
Part VII	(Form 990) 2011  Supplemental Info	rmation				
	Complete this part to pro	ovide additio	nal informatio	on for responses to questions on Schedule R (see instr	uctions).	