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 private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2020
Open to Public Inspection

Form **990** (2020)

For the 2020 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if applicable: Downeast Salmon Federation Address change **-***2938 Doing business as Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 207-483-4336 P.O. Box 201 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated Columbia Falls ME 04623 1,565,055 G Gross receipts \$ Amended return Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending Tora Johnson PO Box 201 H(b) Are all subordinates included? If "No," attach a list. See instructions Columbia Falls ME 04623 X 501(c)(3) 501(c) (4947(a)(1) or Tax-exempt status:) (insert no.) 527 www.mainesalmonrivers.org H(c) Group exemption number Year of formation: 1982 X Corporation M State of legal domicile: Trust Form of organization: Association Part I Summary 1 Briefly describe the organization's mission or most significant activities: To conserve wild Atlantic salmon and its habitat, restore a viable sports Activities & Governance fishery and protect other important river, scenic, recreational and ecological resources in eastern Maine. 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 13 4 5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 17 5 6 Total number of volunteers (estimate if necessary) 50 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h) 1,136,676 1,398,254 Revenue 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -117,62566,267 36,191 7,607 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,055,242 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 472,128 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 600,173 656,697 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 148,764 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 542,245 568,240 1,142,418 1,224,937 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) -87,176 247,191 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 4,532,724 4,757,090 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 49,222 79,235 453,489 707,868 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Dwayne Shaw **Executive Director** Here Type or print name and title Print/Type preparer's name Preparer's signature if Check Paid Mark W Chellis Mark W Chellis 04/29/21 self-employed **Preparer** Edwards, Faust & Smith -***3272 Firm's EIN ▶ Firm's name **Use Only** 15 Columbia St Ste 201 207-947-4575 Bangor, ME 04401-6355 Firm's address May the IRS discuss this return with the preparer shown above? See instructions Yes No

	Check if Schedule O c	ontains a response or note to any	line in this Part III		
1 Briefly des	scribe the organization's mis serve wild Atl		s habitat, rest	ore a viab	le sports
		in oastorn Maino	i, scenic, iec.		
2 Did the or	ganization undertake any sid	nificant program services during the yea	r which were not listed on the		
					Yes X No
If "Yes," d	escribe these new services	on Schedule O.			
3 Did the org		, or make significant changes in how it co			Yes X No
	escribe these changes on S	chedule O.			[] Tes [21] NO
	=	ervice accomplishments for each of its th	ree largest program services,	as measured by	
		c)(4) organizations are required to report	the amount of grants and alloc	cations to others,	
the total e	xpenses, and revenue, if any	y, for each program service reported.			
4a (Code:) (Expenses \$	791,466 including grants of	\$) (Revenue \$. <u></u>)
Provid	ing conservati	on, education and puat.	iblic awareness	towards A	tlantic
Sarmon					
• • • • • • • • • • • • • • • • • • • •					
4b (Code:) (Expenses \$	including grants of	f \$) (Revenue \$)
IN / A					
					,
• • • • • • • • • • • • • • • • • • • •					
*					
4c (Code:) (Expenses \$	including grants of	f \$) (Revenue \$)
N/A					
• • • • • • • • • • • • • • • • • • • •					
* * * * * * * * * * * * * * * * * * * *					
					,
•					
·	·····	·····			· · · · · · · · · · · · · · · · · · ·
4d Other prog	gram services (Describe on				
(Expenses		including grants of \$) (Revenue \$)
	ram service expenses	791,466			
DAA					Form 990 (2020)

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	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	,		v
4	candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		X
4		4		x
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		
J	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	Ť		
-	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	44-	v	
L	complete Schedule D, Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	110		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	ا		v
4-	foreign investments valued at \$100,000 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 other assistance to or	1=		x
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		
10	and the second of the second o	16		x
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 See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			_
-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X_
20a	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?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			,,
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 20032 If "Yes," apparer lines 34b.			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	245		
	to defease any tay-evemnt honds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	27		x
28	persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part	27		A
20	IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
_	"Vas " complete Schedule I - Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
22	complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		
5 4		34		x
35a	or IV, and Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		3.7	
D	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Chook in Concodic C contains a response of note to any line in this rait v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 13		. 55	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	

-*2938

Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 17 Statements, filed for the calendar year ending with or within the year covered by this return X If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X 3a If "Yes." has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 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)? X If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). X Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? С 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a X organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or b gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods X and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7с If "Yes," indicate the number of Forms 8282 filed during the year X Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е X 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which h the organization is licensed to issue qualified health plans 13b 13c Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14a 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 X excess parachute payment(s) during the year? 15 If "Yes," see instructions and file Form 4720, Schedule N. X 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Columbia Falls

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Se		ructio	
	Check if Schedule O contains a response or note to any line in this Part VI			_X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 13			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, 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	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	<u> </u>		
~	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:	T		
а	The governing hady?	8a	х	
_	Each committee with authority to act on behalf of the governing body?	8b		Х
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	00		
9	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
500	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co			- 22
360	tion b. Folicies (This Section b requests information about policies not required by the internal Nevenue Co	u c .)	Vaa	No
40-	Did the executivation have lead shorters broughed as officiated?	40-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Λ	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	106	Х	
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Λ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40	v	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	l	3.7	
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	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		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶			
D۲	wayne Shaw PO Box 201			

DAA Form **990** (2020)

ME 04623

207-483-4336

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for	(C) Position (do not check more than box, unless person is bot officer and a director/trus					an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 271000 MIDO)	(W 27 look mice)	related organizations
(1) Dwayne Shaw	40.00									
Executive Director	0.00	1		Х				74,974	0	4,538
(2) Ray Carbone	0.00							,		5,700
•	1.00									
Director	0.00	X						0	0	0
(3) Joseph Horn										
	1.00									
Treasurer	0.00	X		X				0	0	0
(4) Tora Johnson										
	1.00									
President	0.00	X		X				0	0	0
(5) Alan Kane										
	1.00								_	_
Director	0.00	X						0	0	0
(6) Morris Lambdin	1 00									
<u> </u>	1.00								•	
Director	0.00	X						0	0	0
(7) George Leinbaugh										
Wise Descident	1.00	X		х				o	0	0
Vice President (8) Michael Look	0.00			Λ		\vdash		0	0	0
(8) MICHAEL LOOK	1.00									
Director	0.00	X						o	0	0
(9) William Otto	0.00	A						0	<u> </u>	
(9) WIIIIAM OCCO	1.00									
Secretary	0.00	X		х				0	0	0
(10) Joseph Robbins	3.33	† 				1 1				
	1.00									
Director	0.00	X						0	0	0
(11) Dennis Smith		1				1 1				
	1.00									
Director	0.00	X						0	0	0

(A) Name and title	(B) Average hours per week (list any	bo:	x, unle	ss pe	ition more rson i	than o s both r/truste	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(12) Donald Sprane	1.00									
Director (13) Stephen Wagne	0.00	X						0	0	0
<u> </u>	1.00									
Director (14) Gerry Zegers	0.00	X						0	0	0
Director	1.00	х						0	0	0
1b Subtotal							•	74,974		4,538
 c Total from continuation she d Total (add lines 1b and 1c) 	ets to Part VII, S	ecti	on A	\			>	74,974		4,538
2 Total number of individuals (ir reportable compensation from				thos	e list	ted a	bov	e) who received more than	\$100,000 of	
										Yes No
3 Did the organization list any for employee on line 1a? If "Yes,	" complete Sched	dule	J for	suci	h ina	lividu	al .			3 X
4 For any individual listed on lin organization and related organization.										
individual										4 X
for services rendered to the o	rganization? <i>If "</i> Y									5 X
Section B. Independent Contractor Complete this table for your fire compensation from the organ	ve highest comp									ear.
	(A) I business address								(B) tion of services	(C) Compensation
		_	_	_		_				
2 Total number of independent received more than \$100,000								se listed above) who	0	

Form 990 (2020) **Downeast Salmon Federation** Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded Total revenue from tax under sections 512-514 function revenue business revenue 1a Federated campaigns 1a **b** Membership dues 1b **c** Fundraising events 1c **d** Related organizations 1d e Government grants (contributions) 269,699 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 1,128,555 1g \$ 81,130 g Noncash contributions included in lines 1a-1f 1,398,254 h Total. Add lines 1a-1f. **Business Code** f All other program service revenue g Total. Add lines 2a-2f. \triangleright Investment income (including dividends, interest, and 4,292 4,292 other similar amounts) Income from investment of tax-exempt bond proceeds (i) Real (ii) Personal 6a Gross rents 6b **b** Less: rental expenses c Rental inc. or (loss) d Net rental income or (loss) 7a Gross amount from (i) Securities (ii) Other sales of assets 154,902 7a other than inventory **b** Less: cost or other Other Revenue 92,927 7b basis and sales exps. 61,975 c Gain or (loss) 7с 61,975 61,975 d Net gain or (loss) **8a** Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities **10a** Gross sales of inventory, less returns and allowances 10a $\textbf{b} \ \ \text{Less: cost of goods sold} \ \dots \dots$ 10b c Net income or (loss) from sales of inventory **Business Code** 5,307 5,307 11a Miscellaneous 2,300 2,300 All other revenue

7,607

61,975

1,472,128

11,899

0

Total. Add lines 11a-11d .

Total revenue. See instructions .

	rt IX Statement of Functional Expe				
Sect	ion 501(c)(3) and 501(c)(4) organizations must com			olete column (A).	
	Check if Schedule O contains a respons	se or note to any line in thi	S Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	74,973	29,989	29,989	14,995
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	495,310	258,295	166,152	70,863
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	16,071 22,983	8,294 18,340	5,506 3,194	2,271 1,449
9	Other employee benefits		18,340	3,194	1,449
10	Payroll taxes	47,360	23,727	16,183	7,450
11	Fees for services (nonemployees):				
a	Management	76 007	76 007		
b	Legal	76,887	76,887		
C	Accounting				
d	Lobbying Professional fundraising convices. See Part IV, line 17				
e f	Professional fundraising services. See Part IV, line 17 Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)				
12		11,518	9,127	2,315	76
13	Office expenses	8,432	157	5,445	2,830
14	Information technology	3, 232		5 / 2 2 5	
15	Royalties				
16	Occupancy				
17	Travel	21,464	17,623	3,544	297
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	217		177	40
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	53,954	45,861	8,093	
23	Insurance	23,160	19,275	3,885	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	180,309	140 000	7 010	21 510
a	Professional Services	68,944	140,880	7,910	31,519
b	Donated Services Material and supplies	31,800	68,944 30,649	1,135	16
q	Dues and subscriptions	27,923	6,058	5,485	16,380
d	· · · · · · · · · · · · · · · · · · ·	63,632	37,360	25,694	578
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	1,224,937	791,466	284,707	148,764
26	Joint costs. Complete this line only if the	-,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	204,707	140,704
	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)				

P	art >						
		Check if Schedule O contains a response or r	note to any	line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,100,740	1	796,099
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net		95,446	3	240,411	
	4	A		•	4	·	
	5	Loans and other receivables from any current or for					
		trustee, key employee, creator or founder, substanti					
		controlled entity or family member of any of these p		5			
	6	Loans and other receivables from other disqualified		s defined			
S.		under section 4958(f)(1)), and persons described in	section 49	58(c)(3)(B)		6	
Assets	7	Notes and loans receivable, net				7	
Ÿ	8					8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	3,949,938			
	b	Less: accumulated depreciation		3,949,938	3,187,185	10c	3,504,931
	11	Investments—publicly traded securities			3,187,185 149,353	11	3,504,931 215,649
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	tertain with the contract of			14		
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equal lin	ne 33)		4,532,724	16	4,757,090
	17	Accounts payable and accrued expenses		19,235	17	49,222	
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part	l IV of Sche	dule D		21	
S	22	Loans and other payables to any current or former of					
Liabilities		trustee, key employee, creator or founder, substanti	ial contribu	tor, or 35%			
abi		controlled entity or family member of any of these p	ersons			22	
	23	Secured mortgages and notes payable to unrelated		23			
	24	Unsecured notes and loans payable to unrelated this	ird parties			24	
	25	Other liabilities (including federal income tax, payab					
		parties, and other liabilities not included on lines 17-	-24). Comp	lete Part X			
		of Schedule D			60,000	25	
	26	Total liabilities. Add lines 17 through 25			79,235	26	49,222
		Organizations that follow FASB ASC 958, check	here ▶ X				
ses		and complete lines 27, 28, 32, and 33.					
au	27	Net assets without donor restrictions			3,453,490	27	4,006,170
Ва	28			999,999	28	701,698	
pu		Organizations that do not follow FASB ASC 958,					
Ī		and complete lines 29 through 33.					
, o	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or equip	ment fund			30	
As	31	Retained earnings, endowment, accumulated incom	ne, or other	·funds		31	
Net Assets or Fund Balances	32				4,453,489	32	4,707,868
	33	Total liabilities and net assets/fund balances			4,532,724	33	4,757,090

Form **990** (2020)

Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,128
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>, 937</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			,191
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,		<u>, 489</u>
5	Net unrealized gains (losses) on investments	5		7	<u>,188</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	4,	<u>707</u>	<u>,868</u>
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> LL</u>
			_	Yes	s No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u>2</u>	а	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2	b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2	С	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		3	а	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3	b	