

Form **990**

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

OMB No. 1545-0047

2010

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization DOWNEAST SALMON FEDERATION Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 201 City or town, state or country, and ZIP + 4 COLUMBIA FALLS, ME 04623 F Name and address of principal officer: ALAN KANE 572 GOULDSBORO POINT ROAD, GOULDSBORO, ME 0	D Employer identification number 01-0532938 E Telephone number (207) 483-4336 G Gross receipts \$ 185,028. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.MAINESALMONRIVERS.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1982 M State of legal domicile: ME

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO CONSERVE AND PROTECT ATLANTIC SALMON, ITS HABITAT AND TO ENGAGE IN SUCH ACTIVITIES AS WILL FURTHER 2 Check this box <input type="checkbox"/> 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) 3 13 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 13 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 3 6 Total number of volunteers (estimate if necessary) 6 75 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b 0.																									
Revenue		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Prior Year</th> <th style="text-align: center;">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td style="text-align: right;">278,949.</td> <td style="text-align: right;">177,805.</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td style="text-align: right;">0.</td> <td style="text-align: right;">0.</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td style="text-align: right;">855.</td> <td style="text-align: right;">692.</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td style="text-align: right;">1,488.</td> <td style="text-align: right;">1,099.</td> </tr> <tr> <td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td style="text-align: right;">281,292.</td> <td style="text-align: right;">179,596.</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	278,949.	177,805.	9 Program service revenue (Part VIII, line 2g)	0.	0.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	855.	692.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,488.	1,099.	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281,292.	179,596.						
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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.

Sign Here	Signature of officer ALAN KANE, PRESIDENT Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name VICKI J VINCENT Preparer's signature Date Check <input type="checkbox"/> if self-employed PTIN	
	Firm's name ▶ HAVERLOCK, ESTEY & CURRAN LLC Firm's address ▶ 8 COMMERCE COURT HAMPDEN, ME 04444-1538	Firm's EIN ▶ Phone no. 207-945-5695

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part 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 CONSERVE AND PROTECT ATLANTIC SALMON, ITS HABITAT AND TO ENGAGE IN SUCH ACTIVITIES AS WILL FURTHER THE PURPOSE OF CONSERVING IMPORTANT RIVER AND/OR SCENIC RESOURCES IN EASTERN MAINE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. 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 others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 105,304. including grants of \$) (Revenue \$) TO CONSERVE AND PROTECT ATLANTIC SALMON, ITS HABITAT AND TO ENGAGE IN SUCH ACTIVITIES AS WILL FURTHER THE PURPOSE OF CONSERVING IMPORTANT RIVER AND/OR SCENIC RESOURCES IN EASTERN MAINE.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 105,304.

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>	X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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 assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>		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, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O response

Main table with columns for question number, description, sub-questions (1a-14b), Yes, and No. Includes questions about Form 1096, Form W-2G, Form W-3, foreign accounts, and tax shelter transactions.

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GERRY ZEGERS TREASURER	2.00	X		X			0.	0.	0.	
JOE ROBBINS DIRECTOR	1.00	X					0.	0.	0.	
DON SPRANGERS VICE PRESIDENT	2.00	X		X			0.	0.	0.	
ALAN KANE PRESIDENT	2.00	X		X			0.	0.	0.	
SHEILA TATANGELO POLICY CHAIRWOMAN	2.00	X		X			0.	0.	0.	
RAY CARBONE SECRETARY	2.00	X		X			0.	0.	0.	
WILLIAM OTTO DIRECTOR	1.00	X					0.	0.	0.	
MIKE LOOK DIRECTOR	1.00	X					0.	0.	0.	
MIKE SHAPIRO DIRECTOR	1.00	X					0.	0.	0.	
RICK CAMPBELL DIRECTOR	1.00	X					0.	0.	0.	
YVONNE DAVIS DIRECTOR	1.00	X					0.	0.	0.	
TOM HITCHINS DIRECTOR	1.00	X					0.	0.	0.	
GREG GILKA DIRECTOR	1.00	X					0.	0.	0.	
DWAYNE SHAW EXECUTIVE DIRECTOR	40.00			X			40,791.	0.	0.	

Part VIII Statement of Revenue

			(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	1 a	Federated campaigns					
	b	Membership dues	5,880.				
	c	Fundraising events					
	d	Related organizations					
	e	Government grants (contributions)					
	f	All other contributions, gifts, grants, and similar amounts not included above	171,925.				
	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f	177,805.				
	Program Service Revenue	Business Code					
2 a							
b							
c							
d							
e							
g		Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	692.			692.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	(i) Real					
		(ii) Personal					
		Gross Rents					
		Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	(i) Securities					
		(ii) Other					
		Gross amount from sales of assets other than inventory					
		Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		6,531.				
	Less: direct expenses		5,432.				
	Net income or (loss) from fundraising events		1,099.			1,099.	
9 a	Gross income from gaming activities. See Part IV, line 19						
	Less: direct expenses						
	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances						
	Less: cost of goods sold						
	Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
	All other revenue						
	Total. Add lines 11a-11d						
12	Total revenue. See instructions.		179,596.	0.	0.	1,791.	

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).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	250.	250.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	40,792.	10,198.	20,396.	10,198.
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	66,848.	36,539.	20,282.	10,027.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,229.	1,402.	1,220.	607.
9 Other employee benefits				
10 Payroll taxes	8,235.	3,575.	2,343.	2,317.
11 Fees for services (non-employees):				
a Management				
b Legal	918.		918.	
c Accounting	1,200.		1,200.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	117.	117.		
12 Advertising and promotion				
13 Office expenses	8,847.	712.	8,135.	
14 Information technology				
15 Royalties				
16 Occupancy	2,821.	2,471.	350.	
17 Travel	2,231.	1,908.	323.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	17,494.	14,583.	2,911.	
23 Insurance	23,168.	20,792.	2,376.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a MISCELLANEOUS	18,394.	11,839.	4,628.	1,927.
b UTILITIES	5,925.	570.	5,355.	
c EQUIPMENT	1,030.	248.	782.	
d DUES & FEES	759.	75.	684.	
e BANK SERVICE CHARGES	164.	25.	139.	
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	202,422.	105,304.	72,042.	25,076.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year		
Assets	1 Cash - non-interest-bearing	372,622.	1	281,629.		
	2 Savings and temporary cash investments		2			
	3 Pledges and grants receivable, net		3			
	4 Accounts receivable, net		4			
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5			
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6			
	7 Notes and loans receivable, net		7			
	8 Inventories for sale or use		8			
	9 Prepaid expenses and deferred charges		9			
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,887,713.				
	b Less: accumulated depreciation	10b 87,012.	1,732,594.	10c	1,800,701.	
	11 Investments - publicly traded securities		11			
	12 Investments - other securities. See Part IV, line 11		12			
	13 Investments - program-related. See Part IV, line 11		13			
	14 Intangible assets		14			
	15 Other assets. See Part IV, line 11		15			
16 Total assets. Add lines 1 through 15 (must equal line 34)		2,105,216.	16	2,082,330.		
Liabilities	17 Accounts payable and accrued expenses		17			
	18 Grants payable		18			
	19 Deferred revenue		19			
	20 Tax-exempt bond liabilities		20			
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21			
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22			
	23 Secured mortgages and notes payable to unrelated third parties		23			
	24 Unsecured notes and loans payable to unrelated third parties		24			
25 Other liabilities. Complete Part X of Schedule D		60.	25	0.		
26 Total liabilities. Add lines 17 through 25		60.	26	0.		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27 Unrestricted net assets	1,135,570.	27	1,173,889.		
	28 Temporarily restricted net assets	149,467.	28	88,322.		
	29 Permanently restricted net assets	820,119.	29	820,119.		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.					
	30 Capital stock or trust principal, or current funds		30			
	31 Paid-in or capital surplus, or land, building, or equipment fund		31			
	32 Retained earnings, endowment, accumulated income, or other funds		32			
33 Total net assets or fund balances	2,105,156.	33	2,082,330.			
34 Total liabilities and net assets/fund balances	2,105,216.	34	2,082,330.			

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	179,596.
2	Total expenses (must equal Part IX, column (A), line 25)	2	202,422.
3	Revenue less expenses. Subtract line 2 from line 1	3	<22,826.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,105,156.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,082,330.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
2b	Were the organization's financial statements audited by an independent accountant?		X
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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 Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form 990 (2010)



SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization DOWNEAST SALMON FEDERATION	Employer identification number 01-0532938
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

- 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).**
 - 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
 - 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
 - 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
 - 5 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).**
 - 7 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.)
 - 9 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.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
 - e 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).
 - f 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
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, 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?	11g(iii)	
 - h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	275,580.	413,094.	301,080.	286,949.	163,020.	1439723.
2 Tax revenues levied for the organization'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	275,580.	413,094.	301,080.	286,949.	163,020.	1439723.
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)						467,084.
6 Public support. Subtract line 5 from line 4.						972,639.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	275,580.	413,094.	301,080.	286,949.	163,020.	1439723.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,372.	2,124.	1,137.	855.	692.	6,180.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	880.	7,532.	6,175.	1,488.	1,857.	17,932.
11 Total support. Add lines 7 through 10						1463835.
12 Gross receipts from related activities, etc. (see instructions)					12	33,872.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	66.44 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	67.07 %
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c 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 Total support (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15		%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16		%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17		%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18		%

19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2010

Name of the organization

DOWNEAST SALMON FEDERATION

Employer identification number

01-0532938

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For 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, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

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

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

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

Name of organization DOWNEAST SALMON FEDERATION	Employer identification number 01-0532938
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	BAILEY FOUNDATION 164 SOUTH MACON DR LITTLETON, NC 27850	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	MAINE COMMUNITY FOUNDATION, TUNK FUND 245 MAIN STREET ELLSWORTH, ME 04605	\$ 6,280.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	STATE OF MAINE - DEPT OF MARINE RESOURCES PO BOX 8, 194 MCKOWN POINT ROAD W. BOOTHBAY HARBOR, ME 04575	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	J. A. WOOLLAM FOUNDATION 645 M STREET, SUITE 13 LINCOLN, NE 68508	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	MAINE COAST HERITAGE TRUST 1 BOWDOIN MILL ISLAND, SUITE 201 TOPSHAM, ME 04086	\$ 22,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	T. ROWE PRICE PROGRAM FOR CHARITABLE GIVING PO BOX 17115 BALTIMORE, MD 21297	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization DOWNEAST SALMON FEDERATION	Employer identification number 01-0532938
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	MAINE FOREST SERVICE 22 STATE HOUSE STATION AUGUSTA, ME 04333	\$ 8,225.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	NATIONAL FISH & WILDLIFE FEDERATION 1133 FIFTEENTH STREET NW, SUITE 1100 WASHINGTON , DC 20005	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization DOWNEAST SALMON FEDERATION	Employer identification number 01-0532938
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Part II Noncash Property (see instructions)

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

Name of organization DOWNEAST SALMON FEDERATION	Employer identification number 01-0532938
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and 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
(e) Transfer of gift			
Transferee's name, address, and 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
(e) Transfer of gift			
Transferee's name, address, and 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
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

DOWNEAST SALMON FEDERATION

Employer identification number

01-0532938

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a 10
b Total acreage restricted by conservation easements	2b 664.50
c Number of conservation easements on a certified historic structure included in (a)	2c 0
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d 2

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 0

4 Number of states where property subject to conservation easement is located ▶ 1

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 0

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 0.

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(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	

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	1,380,704.			1,380,704.
b Buildings		438,642.	48,438.	390,204.
c Leasehold improvements				
d Equipment		68,367.	38,574.	29,793.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,800,701.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely-held equity interests, and Other (A-I).

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation. Rows numbered 1 through 10.

Part IX Other Assets. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows numbered 1 through 10.

Part X Other Liabilities. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Amount. Row 1 includes Federal income taxes, followed by rows 2 through 11.

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV.)	8
9	Total adjustments (net). Add lines 4 through 8	9
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	2a
b	Donated services and use of facilities	2b
c	Recoveries of prior year grants	2c
d	Other (Describe in Part XIV.)	2d
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIV.)	4b
c	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per 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:	
a	Donated services and use of facilities	2a
b	Prior year adjustments	2b
c	Other losses	2c
d	Other (Describe in Part XIV.)	2d
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIV.)	4b
c	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART II, LINE 9 – THE ORGANIZATION CAPITALIZES THE CONSERVATION EASEMENTS

IT ACQUIRES, AND REPORTS THEM ON THE BALANCE SHEET WITH OTHER LAND IT

HOLDS.

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

2010

Open to Public
Inspection

Name of the organization

DOWNEAST SALMON FEDERATION

Employer identification number

01-0532938

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE PURPOSE OF CONSERVING IMPORTANT RIVER AND/OR SCENIC RESOURCES IN
EASTERN MAINE.

FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE DIRECTOR AND
BOOKKEEPER REVIEW THE 990 BEFORE SIGNING IT. THE REMAINING BOARD MEMBERS
REVIEW IT AFTER IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: WHEN APPLICABLE, THE BOARD OR
STAFF MEMBER MAKES A STATEMENT THAT A POSSIBLE CONFLICT OF INTEREST MAY BE
RELEVANT AND EXCUSES HIM OR HERSELF FROM ANY VOTES OR FORMAL DISCUSSIONS.

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF
INTEREST POLICY AND FORM 990 ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	BUILDINGS							
108	EMARC - BUILDING							
	12/10/98	SL	40.00	16	116,441.		20,377.	2,911.
401	EMARC - ROOF							
	06/14/06	SL	40.00	16	10,000.		896.	250.
402	EMARC - STONE FOUNDATION							
	07/12/06	SL	40.00	16	22,000.		1,925.	550.
403	EMARC - CHIMNEY							
	09/07/06	SL	40.00	16	2,850.		237.	71.
404	EMARC - SIDING & WINDOWS							
	09/20/07	SL	40.00	16	70,073.		3,942.	1,752.
405	EMARC - SOLAR INSTALLATION							
	10/05/07	SL	40.00	16	68,427.		3,850.	1,711.
406	EMARC - WATER INTAKE							
	10/15/07	SL	40.00	16	67,943.		3,823.	1,699.
407	EMARC - BUILDING							
	06/30/07	SL	40.00	16	18,411.		1,150.	460.
411	HATCHERY RENOVATIONS							
	05/27/09	SL	10.00	16	15,424.		900.	1,542.
416	EMARC - BUILDING IMPROVEMENTS							
	08/31/10	SL	40.00	16	47,073.			392.
	* 990 PAGE 10 TOTAL BUILDINGS							
					438,642.	0.	37,100.	11,338.
	MACHINERY & EQUIPMENT							
301	COMPUTER							
	01/31/00	SL	5.00	16	3,182.		3,182.	0.
302	PACER PUMP							
	03/13/00	SL	5.00	16	499.		499.	0.
303	DIGITAL CAMERA							
	06/13/01	SL	5.00	16	367.		367.	0.
304	DELL COMPUTER							
	01/04/02	SL	5.00	16	1,924.		1,924.	0.
305	GATEWAY COMPUTER							
	08/02/02	SL	5.00	16	2,758.		2,758.	0.
306	3 PANEL DISPLAY AND SHOWBOARD HEADER							
	10/18/02	SL	5.00	16	571.		571.	0.
307	MICROPROJECTOR							
	06/13/02	SL	5.00	16	996.		996.	0.
308	DATA COLLECTION LAB EQUIPMENT							
	05/28/03	SL	5.00	16	4,169.		4,169.	0.
309	DELL FAX & PRINTER							
	08/05/04	SL	5.00	16	1,550.		1,550.	0.
310	DELL COMPUTER							
	03/14/05	SL	5.00	16	3,499.		3,383.	116.
311	HATCHERY GENERATOR							
	02/15/06	SL	10.00	16	12,539.		4,911.	1,254.
312	PORTABLE HATCHERY							
	03/12/07	SL	10.00	16	10,200.		2,890.	1,020.
409	RESEARCH HATCHERY EQUIPMENT							
	05/01/07	SL	5.00	16	12,419.		4,968.	2,484.
410	WIND TURBINE (INSTALLMENT 1 OF 2)							
	07/22/09	SL	10.00	16	6,000.		250.	600.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
412	NEW COMPUTER (JACOB'S)							
	022210	SL	5.00	16	1,694.			282.
413	WIND TURBINE (INSTALLMENT 2 OF 2)							
	042810	SL	10.00	16	6,000.			400.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT							
					68,367.	0.	32,418.	6,156.
	LAND							
102	SACO FALLS							
	123102	L			52,886.			0.
105	EMARC - SEPTIC DESIGN							
	112103	L			19,540.			0.
106	DRLT - LAWRENCE							
	102804	L			117,845.			0.
107	EMARC PROPERTY - LAND							
	121098	L			7,280.			0.
109	GREENE LAND							
	102302	L			5,000.			0.
110	KNAPP LAND							
	110503	L			83,000.			0.
111	HATCH LAND							
	042601	L			24,000.			0.
112	DRISKO LAND							
	061604	L			113,094.			0.
113	GIFFORD LAND							
	121504	L			27,884.			0.
114	GRANT APPRAISAL							
	012004	L			100.			0.
115	HIRO LAND - GIFTED							
	040804	L			276,750.			0.
116	PIERI BLUEBERRY LAND							
	121504	L			42,116.			0.
117	PIERI WIGWAM LAND							
	031904	L			53,649.			0.
118	GREAT FALLS LAND							
	120705	L			167,382.			0.
119	PLAINS LOT							
	050505	L			23,450.			0.
120	HALL LAND							
	060606	L			33,989.			0.
121	LACK LAND							
	071006	L			8,419.			0.
122	SWEDEBERG LAND							
	012407	L			12,400.			0.
123	PATTERSON LAND DEPOSIT							
	122107	L			2,018.			0.
124	KNAPP II LAND							
	082407	L			75,000.			0.
408	PATTERSON LAND							
	051308	L			65,077.			0.
414	BOAR'S NEST, 8 ACRES, CHERRYFIELD, ME							
	012710	L			8,000.			0.
415	REDMOND'S CREEK, 8 ACRES, HARRINGTON, ME							
	071410	L			22,834.			0.

Depreciation and Amortization 990
 (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

DOWNEAST SALMON FEDERATION

FORM 990 PAGE 10

01-0532938

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	500,000.
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)
		(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	17,494.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	17,494.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use.....								25
26 Property used more than 50% in a qualified business use:								
	:	:	%					
	:	:	%					
	:	:	%					
27 Property used 50% or less in a qualified business use:								
	:	:	%			S/L -		
	:	:	%			S/L -		
	:	:	%			S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								28
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2010 tax year:					
	:	:			
	:	:			
43 Amortization of costs that began before your 2010 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Type or print File by the extended due date for filing your return. See instructions.	Name of exempt organization DOWNEAST SALMON FEDERATION	Employer identification number 01-0532938
	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 201	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. COLUMBIA FALLS, ME 04623	

Enter the Return code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

DWAYNE SHAW

• The books are in the care of **PO BOX 201 - COLUMBIA FALLS, ME 04623**

Telephone No. **207-483-4336** FAX No.

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2011**.

5 For calendar year **2010**, or other tax year beginning _____, and ending _____.

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return

Change in accounting period

7 State in detail why you need the extension _____

ADDITIONAL TIME IS REQUESTED TO GATHER THE INFORMATION TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature _____ Title **CPA** Date _____

2010 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - DOWNEAST SALMON FEDERATION

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	BUILDINGS											
108	EMARC - BUILDING	121098	SL	40.00	16	116,441.			116,441.	20,377.		2,911.
401	EMARC - ROOF	061406	SL	40.00	16	10,000.			10,000.	896.		250.
402	EMARC - STONE FOUNDATION	071206	SL	40.00	16	22,000.			22,000.	1,925.		550.
403	EMARC - CHIMNEY	090706	SL	40.00	16	2,850.			2,850.	237.		71.
404	EMARC - SIDING & WINDOWS	092007	SL	40.00	16	70,073.			70,073.	3,942.		1,752.
405	EMARC - SOLAR INSTALLATION	100507	SL	40.00	16	68,427.			68,427.	3,850.		1,711.
406	EMARC - WATER INTAKE	101507	SL	40.00	16	67,943.			67,943.	3,823.		1,699.
407	EMARC - BUILDING HATCHERY	063007	SL	40.00	16	18,411.			18,411.	1,150.		460.
411	RENOVATIONS	052709	SL	10.00	16	15,424.			15,424.	900.		1,542.
416	EMARC - BUILDING IMPROVEMENTS	083110	SL	40.00	16	47,073.			47,073.			392.
	* 990 PAGE 10 TOTAL BUILDINGS					438,642.		0.	438,642.	37,100.	0.	11,338.
	MACHINERY & EQUIPMENT											
301	COMPUTER	013100	SL	5.00	16	3,182.			3,182.	3,182.		0.
302	PACER PUMP	031300	SL	5.00	16	499.			499.	499.		0.
303	DIGITAL CAMERA	061301	SL	5.00	16	367.			367.	367.		0.
304	DELL COMPUTER	010402	SL	5.00	16	1,924.			1,924.	1,924.		0.
305	GATEWAY COMPUTER	080202	SL	5.00	16	2,758.			2,758.	2,758.		0.

2010 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - DOWNEAST SALMON FEDERATION

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
306	3 PANEL DISPLAY AND SHOWBOARD HEADER	101802	SL	5.00	16	571.			571.	571.		0.
307	MICROPROJECTOR	061302	SL	5.00	16	996.			996.	996.		0.
308	DATA COLLECTION LAB EQUIPMENT	052803	SL	5.00	16	4,169.			4,169.	4,169.		0.
309	DELL FAX & PRINTER	080504	SL	5.00	16	1,550.			1,550.	1,550.		0.
310	DELL COMPUTER	031405	SL	5.00	16	3,499.			3,499.	3,383.		116.
311	HATCHERY GENERATOR	021506	SL	10.00	16	12,539.			12,539.	4,911.		1,254.
312	PORTABLE HATCHERY RESEARCH HATCHERY EQUIPMENT	031207	SL	10.00	16	10,200.			10,200.	2,890.		1,020.
409	WIND TURBINE	050107	SL	5.00	16	12,419.			12,419.	4,968.		2,484.
410	(INSTALLMENT 1 OF 2) NEW COMPUTER	2072209	SL	10.00	16	6,000.			6,000.	250.		600.
412	(JACOB'S) WIND TURBINE	022210	SL	5.00	16	1,694.			1,694.			282.
413	(INSTALLMENT 2 OF 2) * 990 PAGE 10 TOTAL MACHINERY & EQUIPM	2042810	SL	10.00	16	6,000.			6,000.			400.
						68,367.		0.	68,367.	32,418.	0.	6,156.
	LAND											
102	SACO FALLS	123102	L			52,886.			52,886.			0.
105	EMARC - SEPTIC DESIGN	112103	L			19,540.			19,540.			0.
106	DRLT - LAWRENCE	102804	L			117,845.			117,845.			0.
107	EMARC PROPERTY - LAND	121098	L			7,280.			7,280.			0.
109	GREENE LAND	102302	L			5,000.			5,000.			0.

2010 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - DOWNEAST SALMON FEDERATION

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
110	KNAPP LAND	110503	L			83,000.			83,000.			0.
111	HATCH LAND	042601	L			24,000.			24,000.			0.
112	DRISKO LAND	061604	L			113,094.			113,094.			0.
113	GIFFORD LAND	121504	L			27,884.			27,884.			0.
114	GRANT APPRAISAL	012004	L			100.			100.			0.
115	HIRO LAND - GIFTED	040804	L			276,750.			276,750.			0.
116	PIERI BLUEBERRY LAND	121504	L			42,116.			42,116.			0.
117	PIERI WIGWAM LAND	031904	L			53,649.			53,649.			0.
118	GREAT FALLS LAND	120705	L			167,382.			167,382.			0.
119	PLAINS LOT	050505	L			23,450.			23,450.			0.
120	HALL LAND	060606	L			33,989.			33,989.			0.
121	LACK LAND	071006	L			8,419.			8,419.			0.
122	SWEDEBERG LAND	012407	L			12,400.			12,400.			0.
123	PATTERSON LAND DEPOSIT	122107	L			2,018.			2,018.			0.
124	KNAPP II LAND	082407	L			75,000.			75,000.			0.
408	PATTERSON LAND	051308	L			65,077.			65,077.			0.
414	BOAR'S NEST, 8 ACRES, CHERRYFIELD,	012710	L			8,000.			8,000.			0.
415	REDMOND'S CREEK, 8 ACRES, HARRINGTON,	071410	L			22,834.			22,834.			0.

2010 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - DOWNEAST SALMON FEDERATION

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* 990 PAGE 10 TOTAL LAND					1241713.		0.	1241713.	0.	0.	0.
	OTHER											
201	DRLT - ROLLI EASEMENT	010303	L			11,250.			11,250.			0.
202	DRLT - HOWE EASEMENT	100103	L			42,141.			42,141.			0.
203	MOSER EASEMENT	122403	L			51,500.			51,500.			0.
204	NEWCOMER EASEMENT	081001	L			20,000.			20,000.			0.
206	GOLDWATER/MOSER SMITH EASEMENT -	102904	L			2,500.			2,500.			0.
207	GIFTED	111804	L			11,600.			11,600.			0.
	* 990 PAGE 10 TOTAL OTHER					138,991.		0.	138,991.	0.	0.	0.
	* 990 PAGE 10 TOTAL -					1887713.		0.	1887713.	69,518.	0.	17,494.
	* GRAND TOTAL 990 PAGE 10 DEPR					1887713.		0.	1887713.	69,518.	0.	17,494.

2011 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - DOWNEAST SALMON FEDERATION

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
BUILDINGS									
108	EMARC - BUILDING	121098	SL	40.00	116,441.		116,441.	23,288.	2,911.
401	EMARC - ROOF	061406	SL	40.00	10,000.		10,000.	1,146.	250.
402	EMARC - STONE FOUNDATION	071206	SL	40.00	22,000.		22,000.	2,475.	550.
403	EMARC - CHIMNEY	090706	SL	40.00	2,850.		2,850.	308.	71.
404	EMARC - SIDING & WINDOWS	092007	SL	40.00	70,073.		70,073.	5,694.	1,752.
405	EMARC - SOLAR INSTALLATION	100507	SL	40.00	68,427.		68,427.	5,561.	1,711.
406	EMARC - WATER INTAKE	101507	SL	40.00	67,943.		67,943.	5,522.	1,699.
407	EMARC - BUILDING	063007	SL	40.00	18,411.		18,411.	1,610.	460.
411	HATCHERY RENOVATIONS	052709	SL	10.00	15,424.		15,424.	2,442.	1,542.
416	EMARC - BUILDING IMPROVEMENTS	083110	SL	40.00	47,073.		47,073.	392.	1,177.
	* 990 PAGE 10 TOTAL BUILDINGS				438,642.		438,642.	48,438.	12,123.
MACHINERY & EQUIPMENT									
301	COMPUTER	013100	SL	5.00	3,182.		3,182.	3,182.	0.
302	PACER PUMP	031300	SL	5.00	499.		499.	499.	0.
303	DIGITAL CAMERA	061301	SL	5.00	367.		367.	367.	0.
304	DELL COMPUTER	010402	SL	5.00	1,924.		1,924.	1,924.	0.
305	GATEWAY COMPUTER	080202	SL	5.00	2,758.		2,758.	2,758.	0.
306	3 PANEL DISPLAY AND SHOWBOARD HEADER	101802	SL	5.00	571.		571.	571.	0.
307	MICROPROJECTOR	061302	SL	5.00	996.		996.	996.	0.
308	DATA COLLECTION LAB EQUIPMENT	052803	SL	5.00	4,169.		4,169.	4,169.	0.
309	DELL FAX & PRINTER	080504	SL	5.00	1,550.		1,550.	1,550.	0.
310	DELL COMPUTER	031405	SL	5.00	3,499.		3,499.	3,499.	0.
311	HATCHERY GENERATOR	021506	SL	10.00	12,539.		12,539.	6,165.	1,254.
312	PORTABLE HATCHERY	031207	SL	10.00	10,200.		10,200.	3,910.	1,020.
409	RESEARCH HATCHERY EQUIPMENT	050107	SL	5.00	12,419.		12,419.	7,452.	2,484.
410	WIND TURBINE (INSTALLMENT 1 OF 2)	072209	SL	10.00	6,000.		6,000.	850.	600.
412	NEW COMPUTER (JACOB'S)	022210	SL	5.00	1,694.		1,694.	282.	339.
413	WIND TURBINE (INSTALLMENT 2 OF 2)	042810	SL	10.00	6,000.		6,000.	400.	600.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT				68,367.		68,367.	38,574.	6,297.
LAND									
102	SACO FALLS	123102	L		52,886.		52,886.		0.
105	EMARC - SEPTIC DESIGN	112103	L		19,540.		19,540.		0.

2011 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

DOWNEAST SALMON FEDERATION

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
106	DRLT - LAWRENCE	102804	L		117,845.		117,845.		0.
107	EMARC PROPERTY - LAND	121098	L		7,280.		7,280.		0.
109	GREENE LAND	102302	L		5,000.		5,000.		0.
110	KNAPP LAND	110503	L		83,000.		83,000.		0.
111	HATCH LAND	042601	L		24,000.		24,000.		0.
112	DRISKO LAND	061604	L		113,094.		113,094.		0.
113	GIFFORD LAND	121504	L		27,884.		27,884.		0.
114	GRANT APPRAISAL	012004	L		100.		100.		0.
115	HIRO LAND - GIFTED	040804	L		276,750.		276,750.		0.
116	PIERI BLUEBERRY LAND	121504	L		42,116.		42,116.		0.
117	PIERI WIGWAM LAND	031904	L		53,649.		53,649.		0.
118	GREAT FALLS LAND	120705	L		167,382.		167,382.		0.
119	PLAINS LOT	050505	L		23,450.		23,450.		0.
120	HALL LAND	060606	L		33,989.		33,989.		0.
121	LACK LAND	071006	L		8,419.		8,419.		0.
122	SWEDEBERG LAND	012407	L		12,400.		12,400.		0.
123	PATTERSON LAND DEPOSIT	122107	L		2,018.		2,018.		0.
124	KNAPP II LAND	082407	L		75,000.		75,000.		0.
408	PATTERSON LAND	051308	L		65,077.		65,077.		0.
414	BOAR'S NEST, 8 ACRES, CHERRYFIELD, ME	012710	L		8,000.		8,000.		0.
415	REDMOND'S CREEK, 8 ACRES, HARRINGTON, ME	071410	L		22,834.		22,834.		0.
	* 990 PAGE 10 TOTAL LAND				1241713.		1241713.	0.	0.
	OTHER								
201	DRLT - ROLLI EASEMENT	010303	L		11,250.		11,250.		0.
202	DRLT - HOWE EASEMENT	100103	L		42,141.		42,141.		0.
203	MOSER EASEMENT	122403	L		51,500.		51,500.		0.
204	NEWCOMER EASEMENT	081001	L		20,000.		20,000.		0.
206	GOLDWATER/MOSER	102904	L		2,500.		2,500.		0.
207	SMITH EASEMENT - GIFTED	111804	L		11,600.		11,600.		0.
	* 990 PAGE 10 TOTAL OTHER				138,991.		138,991.	0.	0.
	* 990 PAGE 10 TOTAL -				1887713.		1887713.	87,012.	18,420.
	* GRAND TOTAL 990 PAGE 10 DEPR				1887713.		1887713.	87,012.	18,420.