Form

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.

OAMS No. 1545-0047 2021 Open to Public

Yes No From 990 (2021)

► Go to www.irs.gov/Form990 for Instructions and the latest information. Inspection For the 2021 calendar year, or tax year beginning , and ending Check if applicable: C Name of organization D Employer Identification number Arlelress change Downeast Salmon Federation Oolog business as Name change Number and wheet (or P.O. box if mail is not delivered to street address) 01-0532938 Room/sulfe trafficial protocon P.O. Box 201 207-483-4336 Final returni City or town, state or province, country, and ZIP or foreign postal code Columbia Falls ME 04623 Assumiled volum Name and address of principal officer: 2,191,063 G Gross receipts\$ Application pending Tora Johnson H(n) is this a group roturn for subordinates PO Box 201 H(b) Are all subordinates inclusive? Columbia Falls ME 04623 If "No," attach a list. See instructions X 501(c)(3) 501(c) () ◀ (Insert no.) 4947(a)(1) or www.mainesalmonrivers.org Website: Form of organization: X Corporation Trust Association Other H(c) Group exemption number Part I Year of formation: 1982 Summary M State of legal dendelle: MIE 1 Briefly describe the organization's mission or most significant activities: To conserve wild Atlantic salmon and its habitat, restore a viable sports 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 not assets. 3 Number of voting members of the governing body (Part VI, line 1a) Activities & 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 13 6 Total number of volunteers (estimate if necessary) 19 5 To Total unrelated business revenue from Part VIII, column (C), line 12 35 6 b Net unrelated business taxable income from Form 990-T, Part I, line 11

Prior Year 8 Contributions and grants (Part VIII, line 1h) Revenue Corrent Year 9 Program service revenue (Part VIII, line 2g) 1,398,254 1,900,223 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 66,267 48,444 12 Total revenue -- add fines 8 through 11 (must equal Part VIII, column (A), line 12) 7,607 11,062 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 1,472,128 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16aProfessional fundraising fees (Part IX, column (A), line 11e) 656,697 746,298 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 125,742 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 568,240 409,929 19 Revenue less expenses. Subtract line 18 from line 12 1,224,937 1,156,227 247,191 803,500 20 Total assets (Part X, line 16) Beginning of Current Year End of Year 21 Total flabilities (Part X, line 26)
22 Net assets or fund balances, Subtract line 21 from line 20 4,757,090 5,533,442 49,222 36,166 Part II 707,868 Linder penalties of perjury, I declare that I have examined this return, including accompanying achedules and statements, and to the best of my knowledge and belief, if his true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here Dwayne Shaw Type or print name and little Executive Director Print/Type preparer's name Propurer's algnature Paid Mark W Chellis Date Mark W Chellis preparer Edwards, Faust & Smith Firm's name 07/07/22 salf-employed P00435439 Use Only 15 Columbia St Ste 201 Firm's EN 01-0463272 Bangor, ME May the IRS discuss this return with the preparer shown above? See instructions 207-947-4575 For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2021) Downeast Sa		**-***2938	Do
Part III Statement of Progr	am Service Accomplishments		Fa
Check if Schedule O	contains a response or note to an	y line in this Part III	
1 Hittelly describe the organization's n	leeinn'		The state of the s
minimum y certification of the contraction of the c	lantic salmon and it other important riv s in eastern Maine.	s habitat, restore a ver, scenic, recreation	iable sports al and
2 Did the organization undertake any	significant program services during the yea	ar which were not listed on the	
prior Form 990 or 990-EZ?			[] . (SP)
If "Yes," describe these new service	s on Schedule O.		Yes X
	ng, or make significant changes in how it c	andusta any pragram	
services?			[]
If "Yes," describe these changes on	Schedule O	***************************************	Yes X
4 Describe the organization's program expenses. Section 501(c)(3) and 501	service accomplishments for each of its th	nree largest program services, as measured by the amount of grants and allocations to others	y 3,
4a (Code:) (Expenses \$	781,273 including grants of	(\$) (Revenue \$ iblic awareness towards	
salmon and its habi	ion, education and put tat.		

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b (Code:) (Expenses \$ N/A (Code:) (Expenses \$ N/A Other program services (Describe on So	including grants of \$ hedule O.)	\$) (Revenue \$	
4b (Code:) (Expenses \$ N/A	including grants of \$	\$) (Revenue \$	}

	Checklist of Required Schedules		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		75	
1		1	$\frac{x}{x}$	
	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<u> </u>	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			x
3	condidates for public office? If "Yes," complete Schedule C. Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		3111	x
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	1 _		x
J	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	_	1-2
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
Ü	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			x
	"Ves." complete Schedule D. Part I	6	-	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		x	
1,53	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	-	+
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	11 1112		x
v	complete Schedule D. Part III	8	-	12.
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			x
	daht pecotiation services? If "Yes." complete Schedule D. Part IV	. 9	-	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	100		x
10	or in quasi endowments? If "Yes." complete Schedule D. Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
11	VII VIII IV or V as applicable	100000		
а	Did the exceptration report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		x	
a	complete Schedule D. Part VI	. 118	1	
b	complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line (2, that is 5) of more			x
u	of its total access reported in Part X line 100 mile Yes accessed to College D. Person 100 miles	. 11k	4	_ A
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% of more	444		x
~	of its total assets reported in Part X. line 16? If "Yes," complete Schedule D, Part VIII	. 110	-	- 41
d	and the state of t	110		x
			-	X
е	Did the organization report an amount for other liabilities in Part X, Ilne 25? If "Yes," complete Schedule D, Part X	116	-	
f	Did the organization's separate or consolidated financial statements for the tax year include a localidate that addresses	111	dui.	x
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Fall A	. 110	-	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	140	X	
	Schedule D. Parts XI and XII	. 12	1 0	_
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	and the same		77
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	. 121	-	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?	. 148	1	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		100	1 10
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	. 14	1	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	gallett g	1	
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	. 15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	Loren I	111	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	. 16	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundralsing 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	-	$ \times$
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-	1	~~
	If "Yes," complete Schedule G, Part III	. 19	-	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	. 20		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		-	
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

201	Checklist of Required Schedules (continued)			-	a
22	Did the assessment was the ST 000 /			Yes	T
dada	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on				-
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	. L	22		
	organization's current and former officers, directors, trustees, key employees, and highest compensated				Γ
	employees? If "Yes," complete Schedule J				
24a		. -	23	-	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b				
	uwough 24d and complete Schedule K. If "No," go to line 25a				
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	.	4a	-	-
C	and the organization maintain an escrow account other than a refunding escrow at any time during the year	- 2	4b	-	-
	to defease any tax-exempt bonds?	24	4c	1 1	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24			(Second
25a	396ton 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess henefit		100		*****
la.	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25	5a		7
K)	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	mu dyr			-
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	8 P	17		
26	If "Yes," complete Schedule L, Part I	25	b		.2
PH 1,5	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	27			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	20	5		2
121.5	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee	1			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these				
	persons? If "Yes." complete Schoolule 1. Port III	27			X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule I	27			200
	reart IV, instructions for applicable filling thresholds conditions, and exceptions.				
a	A current or former officer, director, trusterally elliployed realizer for the former officer director, trusterally elliployed realizer for the former of th	possesses	XX416620	100000 10000	86
	"Yes," complete Schedule L., Part IV	288	1		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	281	- Linement		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? /f	10000			T) CHANGE
29	"Yes," complete Schedule L, Part IV	280		1 3	X
30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X		
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M				
31 1	Did the organization liquidate terminate or discolve and assess as a 150 to 150	30		1.2	
32 [Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		2	2
0	complete Schedule N, Part II	nukr	100	1	
3 [Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		1 2	-
43	Solicitis 301.7701-2 and 301.7701-37 If "Yes." complete Schodule P. Port I		iny	1	200
int A	vas the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule D. Port II, III.	33	-	X	
67	TV, SITULT CITY, IIIO 7	0.0	biq	78.94	
5a D	of Statistical liave a controlled entity within the meaning of earthor #42/61/40/0	34		X	
		35a		-	(MATERIAL STATE OF THE PARTY OF
-	And charge entiry within the meaning of section 512(b)(13)? If "Ver " consists School to 12 Part V "	35b	den		
	"" (V/V) or garried one the und organization make any transfers to an everything of about the	204	-	1	HOME
14	reted organization (If "Yes," comblete Schedule R. Part V. tipe 2	36		X	
538	d the organization conduct more than 5% of its activities through an entity that is not a related organization				
DI	nd that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X	
19	d the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and P Note: All Form 990 filers are required to complete Schedule O.		libe I		
Part	Statements Regarding Other IRS Filings and Tax Compliance	38	X		
PROFILE OF STREET	Check if Schedule O contains a response or note to any line in this Part V				
		****	*****		mag
a En	ter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No	23
777	William Website County Website Strate of the				2000
A. 10. 14	a the organization comply with backup withholding rules for reportable navments to vandors and				1 A S
163	portable gaming (gambling) winnings to prize winners?	10	X		\$
A		Fore	THE OWNER WHEN	1 /000	45

If "Yes," complete Form 6069,

Form 990 (2021) Downeast Salmon Federation **-***2938 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions, Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No Ta Enter the number of voting members of the governing body at the end of the tax year 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. Enter the number of voting members included on line 1a, above, who are independent 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? X 2 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders?

Did the organization have members, stockholders, or other persons who had the power to elect or appoint 6 one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 76 stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 X Ba The governing body? Each committee with authority to act on behalf of the governing body? 8b X b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, sweete If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 1112 Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (i) Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c X Did the organization have a written whistleblower policy? X 13 Did the organization have a written document retention and destruction policy? X 14 14 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? The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 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) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and

Dwayne Shaw

financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records 🕨

PO Box 201

= 000 (00	NAN Downeast	Salmon	Federation	**.	***2938	Employees, and
Part VII	Compensation o	f Officers,	Directors, Trustees,	Key Employees,	Highest Compensated	
NAMES OF STREET	Independent Cor	ntractors		to any line in this F		

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

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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

		2		(C			pensated any current officer		(5)
(A) Name and title	(B) Average hours per week	box	cer an	Positi neck n as per d a di	ion nore tha son is b rector/tr	oth an ustee)	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/	(F) Estimated amount of other compensation from the organization and
	(list any hours for related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Former Highest compensated	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	related organizations
(1)Dwayne Shaw	40.90		III	C	A B	-	77,073		3,55
Executive Director (2) Ray Carbone	0.00				9		UUP	7	
Director	1.00	x					0	0	
(3) Serena Evans	1.00								
Director	0.00	x		1 9			0	.0	
(4)Murray Gray	1.00								
Director	0.00	x					0	0	The state of the s
(5) Joseph Horn	1.00						manufacture of the		
Freasurer	0.00	X		X			W 114 11 11 11 10 10 10 10 10 10 10 10 10 10	0	
(6) Tora Johnson	1.00							Maker Mall Compacts of	
President	0.00	x		x			0	0	
(7) Alan Kane	1.00			e Th		1			
Director	0.00	x					0	0	
(8) George Leinbaugh	1.00			WL					
Vice President	0.00	x		x			0	0	
(9) Michael Look	1.00								
Director	0.00	x					0	0	
10)William Otto	1.00								
Secretary	0.00	x		x			0	0	
11)Joseph Robbins	1 00							E	
Director	1.00	x					0	0	

Pa	ŧVI	Stateme	nt of	Revenue	ine a re	senone	e or note	to any line in this	Part VIII		
		Check if	Sche	dule O conta	IIIS a re	Sopone		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tex under sections 512-514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts		Federated camps Membership due Fundraising even Related organiza Government grants (cor All other contributions, g and similar amounts no Noncash contributions I lines 1a-1f Total. Add lines	s hts htions htributions jifts, gran i included ncluded i	s) its, i above		1,	257,631 542,590 52,779 ► Business Code	1,900,221	function revenue	business revenue	from tax under sections 512-514
Program	d e f	All other program	n servi	ce revenue			, >				
	3 4 5	Investment incorporate income from investment income from investment investment in the investment income from investment income from investment income from investment income from investment income i	me (in ounts) estme	cluding dividend nt of tax-exemp	s, intere	st, and	>	8,566			8,56
	6a b		6a 6b 6c	(i) Real		IE	ersonal	t Cc	ру	nterment trees	1000
		Net rental incom Gross amount from sales of assets other than inventory		(i) Securities			Other	-			
ther Revenue	C	Less: cost or other basis and sales exps. Gain or (loss) Net gain or (loss	7b 7c	39	878			39,878	39,878		
Othe	8a	Gross income from (not including \$ of contributions rep 1c). See Part IV, lin	fundra orted o	ising events n line	8a						
	с 9а	Less: direct expe Net income or (lo Gross income fro activities. See Pr	oss) fro om gar art IV,	om fundralsing om ming line 19	9a		>	12.00		and the second second	
	c 10a	Less: direct expe Net income or (lo Gross sales of in returns and allow	oss) fro iventoi vances	om gaming activ ry, less	10a		>				
sno	c	Net income or (lo	oss) fro	om sales of inve			Business Code	33 230			11,31
Miscellaneous Revenue	11a b c	Loss on eas	emen	ts				11,312 1,000 -1,250			1,00
2	d e	All other revenue Total. Add lines	11a_1	 1d				11,062			
	12	Total revenue.	See ins	structions		*******	<u>-</u>	1,959,727	39,878		19,62

Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6/8b, 9b, and 10b of Part VIII.	b, 7b, (A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			gericial expellees	expenses
2 Grants and other assistance to domestic	***			
individuals. See Part IV, line 22				
3 Grants and other assistance to foreign	* 1 *			
organizations, foreign governments, and		25776		
foreign individuals. See Part IV, lines 15 and 16				
4 Denents paid to or for members				
5 Compensation of current officers, directors				
trustees, and key employees	77,075	30,247	27 472	Malpet et Ro-
 Compensation not included above to disqualified 		77441	31,413	15,41
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
/ Other salaries and wages	563,265	354,485	131,601	P) P) 17 P)
 Pension plan accruals and contributions (include 			a o at 7 o o at	77,179
section 401(k) and 403(b) employer contributions)	19,218	10,953	5,487	2,778
9 Other employee benefits	34,154	25,838	6,163	2,153
10 Payron taxes	52,586	31,895	13,011	7,680
" " " " " " " " " " " " " " " " " " "	The second of th		The state of the s	
a Management	· ·		. Laurantina	
b Legal	34,304	34,244		60
d Lobbying	Plant			
d Lobbying e Professional fundraising services. See Part IV, In				TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER
f Investment management fees	M M W H Un			
g Other. (If line 11g amount exceeds 10% of line 25, column		DI NE		
(A) amount, list line 11g expenses on Schodule O.)		- I was to be a second	(notine or floor)	discriminal is
12 Advertising and promotion	1,295	H PY O		
ro Omce expenses	9 760	170	1,125	
14 Information technology	37200	473	6,762	1,925
15 Royalties				personal description of the second se
ro cocupancy				
17 Travel 18 Payments of travel or entertainment expenses	22,402	20,351	N COP	
18 Payments of travel or entertainment expenses	6	KA W / 60 kJ kL	1,895	156
of dity rederal, state, or local public officials			the state of the s	
19 Conferences, conventions, and meetings	891	891		Sales - Annual - Adding - Addings
20 Interest		Lamping to the second		The second secon
21 Payments to affiliates				Commented Assessment of the Commenter of
Depression, depletion, and amortization	53,079	46,843	6,236	
23 Insurance	24,798	18,957	5,841	
who expenses net covered			J/011	
above (List miscellaneous expenses on line 24e. If				
fine 24e amount exceeds 10% of line 25, column	Park to the second of			
(A) amount, list line 24e expenses on Schedule O.) a Professional Services	0/2 :			
b Material and summites	86,433	78,633	7,800	
b Material and supplies c Dues and subscriptions	63,034	59,445	3,589	The state of the s
d Taxes	42,399	17,856	7,197	17,346
e All other expenses	19,238 52,896	19,238		
25 Total functional expenses, Add lines 1 through 24e	1,156,227	30,754	21,092	1,050
Joint costs, Complete this line only if the	41201641	781,273	249,212	125,742
organization reported in column (B) joint costs from a combined educational campaign and fundralsing solicitation. Check here			Arres	
1000Wind SOP 98-2 /ACC 069 720	12.0.021.2		more from the first of the second	
VA	manufacture of the second of t			

Form 990 (2021) Downeast Salmon Federation

orm (990 (*	(2021) Downeast Salmon Federact Balance Sheet					
Par	ŧΧ	Balance Sheet Check if Schedule O contains a response or note to	any lir	te in this Part X	(A)		(B)
		Onton I.			Beginning of year		End of year
					796,099	1	1,095,361
T	1 (Cash—non-interest-bearing				2	- 30 610
1	2 0	Saylogs and temporary cash investments	,		240,411	3	269,612
1	3 1	Pledges and grants receivable, net				4	
1		t and a section by not					
1	E 1	Loans and other receivables from any current or former of	omicer, o	director,			
		trustee key employee, creator or founder, substantial cor	ntributo	01, 01 30 78	\$555.00360340584044444444	5	
		controlled entity or family member of any of these person	ns				
		I amen and other receivables from other disqualified perso	ions (as	s defined		6	
S		under section 4958(f)(1)), and persons described in section	ilon 495	58(c)(3)(B)	A BUILDING TO A	7	
Assets	7	Notes and loans receivable, net				8	
A	8	Inventories for sale or use				9	
	9	Prepaid expenses and deferred charges	4	p			
	10a	Land, buildings, and equipment: cost or other	100	4 219.345	4		
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	498,086	3,504,931	10c	3,721,259
	b	Less: accumulated depreciation	100	130/00	215,649	11	447,210
	111	Investments—publicly traded securities			The second secon	12	
	12	Investments-other securities. See Part IV, line 11				13	
	13	Investments—program-related. See Part IV, line 11				14	
	14	Intangible assets				15	
	15	Other coots Coo Part IV line 11			4,757,090	0 16	
	16	Total assets. Add lines 1 through 15 (must equal line 33	3)	***************************************	49,222		36,166
	17	Accounts payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities				18	
-	18	Grants payable	W. W.	0.4		19	
	19	Deferred revenue			J V	20	
		Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV o	of Och	odula D		21	
	21	Escrow or custodial account liability. Complete Part IV of Loans and other payables to any current or former office	or dire	ector.			
ies	22	Loans and other payables to any current or former office trustee, key employee, creator or founder, substantial co	antribi	itor or 35%			
Liabilities		trustee, key employee, creator or tounder, substantial oc controlled entity or family member of any of these person	ang	(01, 01 00.0	and the same	22	
iat		controlled entity or family member of any of these person Secured mortgages and notes payable to unrelated third	d narti	AC		23	
	23	Unsecured notes and loans payable to unrelated third payable	artles	,		24	The state of the s
	24	Other liabilities (Including federal income tax, payables to	in rela	ted third			
	25	Other liabilities (including federal income tax, payables of parties, and other liabilities not included on lines 17-24).	Com	plate Part X			
	1					25	
	20	of Schedule D	•••••		49,222	2 26	36,166
_	26	Organizations that follow FASB ASC 958, check here					
S	1			4 =			
nce	27	and complete lines 27, 28, 32, and 33.			4,006,170	0 27	
ala	27	Net assets without donor restrictions Net assets with donor restrictions			701,698		
d B	20	Organizations that do not follow FASB ASC 958, che	ack he	ere 🕨 🗍			
m.	1	and complete lines 29 through 33.	.un	10 F			
or F	29	the second secon		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	NAME OF THE PROPERTY OF THE PR	29	
ets	30	Pald-in or capital surplus, or land, building, or equipmen	at fund			30	
15S	31	Retained earnings, endowment, accumulated income, o				31	H AAM AMC
Net Assets or Fund Balances	32	Total net assets or fund balances			4,707,868		A A A
Z	33	Total liabilities and net assets/fund balances	******		4,757,090	0 33	
-		7 4 3 4 7 1 3 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4					Form 990 (2021)

Form 990 (2021) Downeast Salmon Federation **-**2938 Part XI Reconciliation of Net Assets				Page
Check if Schedule O contains a response or note to any line in this Part XI Total revenue (must equal Part VIII, column (A), line 12)		. 1 30	3.000	Property wild become
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25)				F
2 Total expenses (must equal Part IX, column (A), line 12) 3 Revenue less expenses. Subtract line 2 from line 1	1	1	,959	,72
V INCOMPRISE TORON DATA CONTRACT CONTRA		1,	156	,22
That assets or fund halancee at heatening at	1 49 1		803	,50
		4,	707	,86
6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustment	5	ii qënivii	-14	,09
7 Investment expenses 8 Prior period adjustments 9 Other changes in an annual control of the changes in an an annual control of the changes in an an annual control of the changes in an	6			
9 Other changes in not account	7	arasana.		Vanamana valor
orienges til net assers of fund halanone farmini	8		-	
That assets of lung palances at end of year Comptent to	9		-	******
32, column (B)) Part XII Financial Statements and Reporting	10	E	107	nn
Check if Schedule O contains	10		497,	2/0
Check if Schedule O contains a response or note to any line in this Part XII				
1 Accounting method used to prepare the Fermi con	***********	*****	Yes	1
If the organization changed to method of a Cash X Accrual Other			res	No
If the organization changed its method of accounting from a prior year or checked "Other," explain on	uza prazagrajo	-		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	NAME OF THE PARTY	X
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:	Tybuding—dun			-
Solution and the state of the s				
Separate basis Consolidated basis Both consolidated and separate basis				
Were the organization's financial statements audited by an independent accountant?		2b	X	\$889ASS\$66
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:				
- January page, consolidated basis, or both:				
X Separate basis Consolidate basis Both consolidated and separate basis				
" " SO O III C 24 O 2D O COS DE OFCADIONION PANE ANAMANAMAN ALVE III - III		100000000000000000000000000000000000000	possession.	189650038
TO WARM TO VIOW, OF COMPRESSION OF ITS THE STREET BEING BOTH AND THE RESERVE A		20	x	
If the organization changed either its oversight process or selection process during the tax year, explain on				
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?		NAMES (0.00)		40000000
		3a		X
If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				to de
required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	nuu augaghiwu	3b	66	
	11111111111111	-	990 (announced by the same
Administration of the second s		FOR	1 990 (2	2021)
Take believe a made synce and believe at benefit of the contract of the contra				