Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2018

Open to Public Inspection

Form 990 (2018)

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2018 calendar year, or tax year beginning and ending Check if C Name of organization D Employer identification number Address change DOWNEAST SALMON FEDERATION Name 01-0532938 Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated PO BOX 201 (207)483-4336 City or town, state or province, country, and ZIP or foreign postal code 1,396,097. G Gross receipts \$ Amended COLUMBIA FALLS, ME 04623 H(a) Is this a group return Applica-F Name and address of principal officer: GEORGE LIENBAUGH Yes X No for subordinates? pending PO BOX 176, ELLSWORTH, ME 04605-0176 H(b) Are all subordinates included? Yes I Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.MAINESALMONRIVERS.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Other > L Year of formation: 1982 M State of legal domicile: ME Part I Summary Briefly describe the organization's mission or most significant activities: TO CONSERVE AND PROTECT ATLANTIC Activities & Governance SALMON, ITS HABITAT AND TO ENGAGE IN SUCH ACTIVITIES AS WILL FURTHER oxed if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 13 4 14 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 850 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. 7a b Net unrelated business taxable income from Form 990-T, line 38 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 1,608,314. 1,299,615. Revenue Program service revenue (Part VIII, line 2g) 0. 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 6,024. 8,785. 24,987. 10,413. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,639,325. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,318,813. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 514,488 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 425,969. 588,667. 940,457. 1,170,464. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 698,868. 148,349. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 4,414,675. 4,605,836. 20 Total assets (Part X, line 16) 21 56,507. 90,753. Total liabilities (Part X. line 26) 4,358,168. Net assets or fund balances. Subtract line 21 from line 20 ,515,083. Part II | Signature Block Under penalties of perjury, I declare that I have examined this eturn, 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 his based on all information of which preparer has any knowledge MORTERO Signature of officer Sign GEORGE LIENBAUGH, PRESIDENT Here Type or print name and title Print/Type preparer's name Preparer's signature Paid VICKI J VINCENT VICKI J VINCENT 05/02/19 P00158538 self-employed Firm's name HAVERLOCK. ESTEY & CURRAN LLC Preparer 01-0271013 Firm's EIN Firm's address Use Only 8 COMMERCE COURT HAMPDEN, ME 04444-1538 Phone no. 207 - 945 - 5695 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

Part IV Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?				
_	If "Yes," complete Schedule A	1	X		
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			77	
4	public office? If "Yes," complete Schedule C, Part I	3	_	X	
3	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II			Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	-		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	3			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,				
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Х		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete				
	Schedule D, Part III				
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?				
40	If "Yes," complete Schedule D, Part IV	9		_X_	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			77	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	E2.405 E1	<u>X</u>	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.				
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,				
	Part VI	110	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	11a	21		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in				
	Part X, line 16? If "Yes," complete Schedule D, Part IX				
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete				
120	Schedule D, Parts XI and XII	12a		X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X	
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000				
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 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 fundraising services on Part IX,				
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines				
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	300-11			
	complete Schedule G, Part III	19		X	
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X	
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X	

2018) DOWNEAST SALMON FEDERATION
Statements Regarding Other IRS Filings and Tax Compliance (continued) Form 990 (2018)

| Part V | Sta

		816		Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a 14								
D	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х						
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions				37					
			3a	_	X					
42	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0 At any time during the calendar year, did the organization have an interest in, or a signature or other a		3b							
74	financial account in a foreign country (such as a bank account, securities account, or other financial a		4-		Х					
b	If "Yes," enter the name of the foreign country:	iccount)?	4a	Magazina	Λ					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ar	Counts (FRAR)								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	Septem Mil	Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit								
	any contributions that were not tax deductible as charitable contributions?		6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or gifts								
	were not tax deductible?		6b							
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was									
	to file Form 8282?		7c	66-1011 - 282	Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		v						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		7e	_	X					
f g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control of the organization received a contribution of qualified intellectual arrest and in the premium of the first state		7f		Λ					
h	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g 7h							
8	garage and a series of the ser									
	sponsoring organization have excess business holdings at any time during the year?									
9										
а										
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9a 9b							
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12	10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter:	7								
а	Gross income from members or shareholders	11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)	11b								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	Service 1	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b								
13	Is the organization licensed to issue qualified health plans in more than one state?									
а	Note. See the instructions for additional information the organization must report on Schedule O.		13a	in a second						
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
-	organization is licensed to issue qualified health plans	13b								
С	Enter the amount of reserves on hand	13c		250						
	BOTH A SECOND CONTRACTOR OF THE SECOND CONTRAC		14a		Х					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune									
	excess parachute payment(s) during the year?		15		Х					
	If "Yes," see instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		X					
	If "Yes," complete Form 4720, Schedule O.			06.5						

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

Employees, and Independent Contractors

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

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

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

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

(A) Name and Title	(B) Average hours per week	box	, unle	ss pe	ition more rson i	than o	n an	ed any current officer, of (D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related	(F) Estimated amount of other compensation from the organization and related organizations	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		organizations (W-2/1099-MISC)		
(1) GEORGE LEINBAUGH	2.00									_	
PRESIDENT	1	Х		X				0.	0.	0.	
(2) JOSEPH ROBBINS	1.00								0	0	
DIRECTOR		X					_	0.	0.	0.	
(3) DON SPRANGERS	2.00	1,,		37					0.	0	
VICE PRESIDENT	1.00	X		Х		\vdash		0.	0.	0.	
(4) ALAN KANE DIRECTOR	1.00	x						0.	0.	0.	
(5) RAY CARBONE	1.00	^			_	-	-	0.	0.	0.	
DIRECTOR	1.00	Х						0.	0.	0.	
(6) WILLIAM OTTO	2.00	21		-		-	\vdash	0.	0.	0.	
SECRETARY	2.00	x		Х				0.	0.	0.	
(7) MIKE LOOK	1.00	22		22		\vdash	\vdash				
DIRECTOR		х						0.	0.	0.	
(8) TORA JOHNSON	2.00										
TREASURER		X		X				0.	0.	0.	
(9) GERRY ZEGERS	1.00										
DIRECTOR		X						0.	0.	0.	
(10) MORRIS LAMBDIN	1.00										
DIRECTOR		X						0.	0.	0.	
(11) DENNIS SMITH	1.00									_	
DIRECTOR		X						0.	0.	0.	
(12) JOSEPH HORN	1.00										
DIRECTOR	1 00	Х	_		╙	_	_	0.	0.	0.	
(13) BARBARA WITHAM	1.00	١								_	
DIRECTOR	40.00	Х	_		_		_	0.	0.	0.	
(14) DWAYNE SHAW	40.00			37				70 (22	0	0.	
EXECUTIVE DIRECTOR			\vdash	Х	H		H	70,622.	0.	0.	
		-	-		\vdash	\vdash					
		1	-	-	-	-					
		+									

Page 7

DOWNEAST SALMON FEDERATION 01-0532938 Page 9 Form 990 (2018) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenue excluded from tax under Related or Total revenue Unrelated exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 6,935. b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 1,292,680. g Noncash contributions included in lines 1a-1f: \$ 1,299,615 h Total. Add lines 1a-1f . Business Code Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f . Investment income (including dividends, interest, and other similar amounts) 5,432. 5,432. Income from investment of tax-exempt bond proceeds 4 5 Royalties (i) Real (ii) Personal 8,800. 6 a Gross rents 5,213. b Less: rental expenses 3,587. c Rental income or (loss) 3,587. 3,587. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other 63,136. assets other than inventory b Less: cost or other basis 59,783. and sales expenses 3,353. c Gain or (loss) 3,353. 3,353. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See 16,004. Part IV, line 18 12,288. b Less: direct expenses b 3,716. 3,716. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities ... 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold _____ b c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code**

1,590.

1,520.

3,110.

318,813.

3,353.

111000

900099

0.

1,590.

1,520.

C

11 a BLUEBERRY HARVEST

Total revenue. See instructions

d All other revenue

e Total. Add lines 11a-11d

b OTHER REVENUE

		Check if Schedule O contains a response or note to any line in this Part X		(A)		(B)
				Beginning of year		End of year
	1	Cash - non-interest-bearing		865,490.	1	877,665
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		657,387.	4	566,428
	5	Loans and other receivables from current and former officers, directors,				
		trustees, key employees, and highest compensated employees. Complete				
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined un	der			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu	uting			
		employers and sponsoring organizations of section 501(c)(9) voluntary				
12		employees' beneficiary organizations (see instr). Complete Part II of Sch L	1000	1000 mark 240 000 000 000 000 000 000 000 000 000	6	
Assets	7	Notes and loans receivable, net			7	
Ť	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				(2014) TBI (4774)
		basis. Complete Part VI of Schedule D 10a 3,386,6	97.			
	b	Less: accumulated depreciation 10b 344,7	20.	2,759,052.	10c	3,041,977
	11	Investments - publicly traded securities		132,746.	11	118,766
	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		0.	15	1,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)		4,414,675.	16	4,605,836
	17	Accounts payable and accrued expenses		45,679.	17	18,140
	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	
s	22	Loans and other payables to current and former officers, directors, trustees	PACKET.			
it e		key employees, highest compensated employees, and disqualified persons	111			
Liabilities		Complete Part II of Schedule L			22	
Ë	23	Secured mortgages and notes payable to unrelated third parties			23	60,000
	24	Unsecured notes and loans payable to unrelated third parties			24	00,000
	25	Other liabilities (including federal income tax, payables to related third			24	
	25	parties, and other liabilities not included on lines 17-24). Complete Part X o				
				10,828.	25	12,613
	26	Total liabilities. Add lines 17 through 25		56,507.	26	90,753
_	20	Organizations that follow SFAS 117 (ASC 958), check here	nd	30,307.	20	
S		complete lines 27 through 29, and lines 33 and 34.	iiu			
če	27		188	2,302,779.	27	2,485,040
a	27	Unrestricted net assets		1,227,670.	28	1 202 324
Ř	28	Temporarily restricted net assets		827,719.	29	1,202,324 827,719
Ĕ	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here		021,115.	25	021,113
_						
S	20	and complete lines 30 through 34.	100		30	
sse	30	Capital stock or trust principal, or current funds			31	
Ä	31	Paid-in or capital surplus, or land, building, or equipment fund			32	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		4,358,168.		4,515,083
	33	Total net assets or fund balances		4,414,675.	33	4,605,836
	34	Total liabilities and net assets/fund balances		4,414,0/3.	34	Form 990 (2018