Form **990**

Department of the Treasury

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)

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

OMB No. 1545-0047 2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning JUL 1. 2012 and ending JUN 30, 2013 Check if applicable: C Name of organization D Employer identification number BRISTOL BAY REGIONAL SEAFOOD X Address DEVELOPMENT ASSOCIATION, INC. 20-2660011 Doing Business As Initial Room/suite Number and street (or P.O. box if mail is not delivered to street address) E Telephone number 907-770-6339 Termin-800 E. DIMOND BLVD. SUITE 3-131 #158 Amended 1,550,554. City, town, or post office, state, and ZIP code G Gross receipts \$ Applica-ANCHORAGE, AK 99515-2028 H(a) Is this a group return pending F Name and address of principal officer: SUE ASPELUND Yes X No for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? __Yes L Tax-exempt status: 501(c)(3) X 501(c) (4947(a)(1) or L) (insert no.) If "No," attach a list. (see instructions) J Website: ► WWW.BBRSDA.COM **H(c)** Group exemption number ▶ K Form of organization: X Corporation Association Other > L Year of formation: 2005 M State of legal domicile: AK Part I Summary Briefly describe the organization's mission or most significant activities: THIS ASSOCIATION IS ORGANIZED TO Activities & Governance IMPLEMENT THE PROVISIONS OF AS 44.33.065 FOR FISHERS OPERATING Check this box | 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) Number of independent voting members of the governing body (Part VI, line 1b) Ō Total number of individuals employed in calendar year 2012 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 Ō. b Net unrelated business taxable income from Form 990-T, line 34 **Current Year** 1,620,014. 1,549,782. Contributions and grants (Part VIII, line 1h) Revenue 0. Ō. Program service revenue (Part VIII, line 2g) 772. 833. Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 1,620,847. 1,550,554. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 723,992. 407,998. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Λ. Benefits paid to or for members (Part IX, column (A), line 4) 92,501. 97,500. Salaries. other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 228,157. 725,115. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,230,613. 1,044,650 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 319,941. 576,197. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 2,413,588. 2,701,226. 20 Total assets (Part X, line 16) 111,016. 78,713. 21 Total liabilities (Part X, line 26) 2,302,572. 2,622,513. Net assets or fund balances. Subtract line 21 from line Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign SUE ASPELUND, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature P00044581 Paid JOHN A. LETOURNEAU, CPA self-employed Firm's name THOMAS, HEAD & GREISEN, 92-0043874 Preparer Firm's EIN Firm's address 1400 WEST BENSON BLVD., Use Only ANCHORAGE, AK 99503-3683 Phone no. (907)272-1571 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

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Part IV Checklist of Required Schedules

1 Is the organization described in section S01 (e)(3) or 4941/(a)1 (other than a private foundation)? 1				Yes	No
2 Is the organization engage in direct or indirect political camping activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule D, Part I I seed to repair a section 501(k)4 incidence or indirect political camping activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule D, Part I I seed to regard to the organization engage in lobbying activities, or have a section 501(k)4 election in effect during the tax year? If "Yes," complete Schedule O, Part I I is the organization as a defined in Revenue Procedure 98-1911 "Yes, complete Schedule C, Part II I seed the organization maritain any donor advised funds or any similar funds or accounts if Ves, complete Schedule D, Part I I is the organization maritain any donor advised funds or any similar funds or accounts if Ves, complete Schedule D, Part I I is the organization maritain any donor advised funds or any similar funds or accounts if Ves, complete Schedule D, Part I I I is the organization maritain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part I II I is the organization maritain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part I II I I is expanization report an amount in Part X, line 21, for escrew or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part I II I I the organization report an amount for Insentine Part X, inceptive Schedule D, Part V II I I the organization report an amount for Insentine Program related in Part X, line 107 If "Yes," complete Schedule D, Part V II I I I the organization report an amount for other somplete Schedule D, Part V II I I I I I I I I I I I I I I I I I	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4 Section 501(6)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(fit) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization assertion 501(6)(4), 501(6)(6), 501(6)(6), 501(6)(6), 501(6)(6) 6 Did the organization neared any quictor of the section of the organization for the section of			1		X
public office? If "Yes," complete Schedule C, Part II Section 501(6)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(e)(4), 501(e)(5), or 501(e)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Proceedings 9-187 If "Yes," complete Schedule C, Part II Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical areas, or historical structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21, for escrow or oustodial account liability; serve as a custodian for amounts on listed in Part X, in provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part XII Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes," complete Schedule D, Part XII Did the organization report an amount for livestments - other securities in Part X, line 10? If Yes, complete Schedule D, Part XII Did the org	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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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 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b	16				
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20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20a X	19		,		v
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	^	Complete Scriedule G, Part III		-+	
	a	ii res to inte zoa, diu the organization attach a copy of its audited financial statements to this return?		990 //	2012

BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC. Form 990 (2012) DEVELOPMENT ASSOCI Part IV Checklist of Required Schedules (continued)

Page 4

21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 2		ı	
	: 1	х	ı
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	2	х	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1		
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	з	1	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	7		
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	4a		X
	4b	$\neg \uparrow$	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	=		
	1c		
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	+		
	5a		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	" +		
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		1	
		İ	
Schedule L, Part I	100		
Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			Х
person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	^		
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		İ	
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	_		х
of any of these persons? If "Yes," complete Schedule L, Part III	7	200022	
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
instructions for applicable filing thresholds, conditions, and exceptions):			37
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	3b		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			77
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	9		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
contributions? If "Yes," complete Schedule M	<u>이</u>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations?			
If "Yes," complete Schedule N, Part I	1		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		- 1	
Schedule N, Part II	2		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		i	
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	3		<u> </u>
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		l	
Part V, line 1	4		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	a		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	b		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
If "Yes," complete Schedule R, Part V, line 2	6		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	Т		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	7		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	T		
Note. All Form 990 filers are required to complete Schedule O	3	X	

BRISTOL BAY REGIONAL SEAFOOD

20-2660011 Page 5

Form 990 (2012) DEVELOPMENT ASSOCIATION, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		***************************************			
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	11			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	Ī		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	reporta	ble gaming	1		
	(gambling) winnings to prize winners?			1c	X	
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	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ırns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action?) 	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to					
	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 contribu					
	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 se	rvices p	rovided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			
	to file Form 8282?	······	***************************************	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contrac	t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	e during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	90/900-000000	and the second
10	Section 501(c)(7) organizations. Enter:	1 1				
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:					
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	1 1	•	12a	000000000000000000000000000000000000000	alicontinuos es
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				- 1	
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ا .م. ا				
	organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c				X
14a				14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	⊌ U	***************************************	14b	000	2040
				LOUIN	990 (ZU 12)

Form 990 (2012)

DEVELOPMENT ASSOCIATION, INC. Part VI 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 in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No 1a 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 in Schedule O. b Enter the number of voting members included in 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 Х of officers, directors, or 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 6 X Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? d8 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 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, branches, or affiliates? X 10a b 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? 11a b Describe in 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 X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 14 14 Did the organization have a written document retention and destruction policy? 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? X a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶AK 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain in Schedule O) Another's website X Upon request Own website 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: BRISTOL BAY REGIONAL SEAFOOD DEVELO - 907-770-6339 1120 HUFFMAN ROAD, BOX 208, ANCHORAGE,

Form 990 (2012)

232006 12-10-12

Form 990 (2012) DEVELOPMENT ASSOCIATION, INC. 20-2 [Part VII] Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and Independent Contractors

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.

(A) Name and Title	(B) Average			Pos	C) itior) 		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	-	not c c, unle	not check more than one unless person is both an er and a director/trustee)			one h an tee)	compensation from	compensation from related	amount of other
-	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ROBERT WALDROP EXECUTIVE DIRECTOR	50.00	-		х				96,021.	0.	0
(2) ROBERT HEYANO	5.00	┼	┼─	<u> </u>	-	┼─		70,021.	U •	0
PRESIDENT	1	\mathbf{x}		х	İ			0.	0.	0
(3) FRITZ JOHNSON	3.00		\vdash							
VICE PRESIDENT		X		Х				0.	0.	0
(4) MIKE LARUSSA	3.00							_	•	•
FREASURER-SECRETARY	 	X		Х	<u> </u>	<u> </u>		0.	0.	0
(5) MATT MARINKOVICH DIRECTOR	2.00	x						0.	0.	0
(6) KATHERINE CARSCALLEN	2.00	┝	-			-		0.	0.	V
DIRECTOR	2.00	X						0.	0.	0
(7) JOHN FAIRBANKS	2.00	┢▔				-				
DIRECTOR		X						0.	0.	0
(8) MATT LUCK	2.00									
DIRECTOR		X						0.	0.	0
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1 41			stees, Key Em (B)	pioy	/ees			igne	St	Compensated Employe				<i>(E</i>)	
	(A)		Average			Pos	C) ition	1		(D)	(E)	_	г.	(F)	لم م
	Name an	ia title	hours per	(do	not o	heck ss pe	more	than	one	Reportable compensation	Reportabl compensat			timate nount	
			week			nd a d				from	from relate			other	
			(list any	ctor					Γ	the	organizatio			pensa	
			hours for	or director				Pa		organization	(W-2/1099-M			om th	
			related	stee o	ustee			eusa		(W-2/1099-MISC)			-	anizat	
			organizations below	al tru	nal t		loyee	uo e						relat	
			line)	individual trustee	institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	ınizati	ons
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1b	Sub-total		, i		·				!	96,021.		0.	*************		0.
		ition sheets to Part V								0.		0.	**********	~	0.
		and 1c)								96,021.		0.			0.
2								e) wh	no r	received more than \$100	,000 of reportat	ole			
	compensation from t	the organization											—т	Yes	No No
3	Did the examination	list ony former officer	director or tru	icto/	. ko		anla		or	highest compensated e	malayaa an	ſ		103	
3	_	nplete Schedule J for s				-							3		X
4				.,,,						her compensation from					
•	•	tions greater than \$15	•							•	ine organization	' I	4		X
5		_								ted organization or indivi	dual for services		7		
•		nization? If "Yes," com							Ciui	iod organization of marv	addi for corvidor	-	5		X
Sect	ion B. Independent		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<i>F</i>						1			
1	Complete this table f	for your five highest co	mpensated inc	lepe	ende	nt co	ontr	acto	ors t	that received more than	\$100,000 of cor	npens	ation fr	om	
										n the organization's tax		•			
		(A)			***************************************					(B)			(C)	
		Name and business	address							Description of s	ervices	C	ompen		า
SCH	IEDERMAYER	& ASSOCIATI	ES, 733	WE	SI	1 4	TF	I	7	ADVERTISING .	AND				
AVE	NUE, SUITE	401, ANCHO	RAGE, AF	5	95	01			þ	PUBLIC RELAT	IONS		206	5,0	68.
************									\dashv						
•••••		· · · · · · · · · · · · · · · · · · ·	***************************************				~~~	~~~~							
									1				***************************************		
2	Total number of inde	pendent contractors (i	ncluding but n	ot lir	nited	d to t	thos	se lis	ted	d above) who received m	ore than				
	\$100,000 of compen	sation from the organi	zation >				1								

	BRISTOL BAY	REGIONAL SEA	FOOD
Form 990 (2012)		ASSOCIATION,	INC.
Part VIII Sta	atement of Revenue		

		Check if Schedule O cont	tains a response	to any question	in this Part VIII			<u></u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
s, C		Fundraising events						
a di		Related organizations	1d					
in;		Government grants (contribut	tions) 1e 1	360,904.				
ron	f	All other contributions, gifts, gran	its, and					
the E		similar amounts not included abo	ve 1f	188,878.				
E O	g	Noncash contributions included in lines	: 1a-1f: \$		1		5.00	
3 8		Total. Add lines 1a-1f			1,549,782.			
				Business Code				
8	2 a							
<u> </u>	b							
Sign	С							
ex	d							
Program Service Revenue	е							
تم	f	All other program service reve	enue	<u> </u>				
	g	Total. Add lines 2a-2f		>				
	3	Investment income (including	dividends, interes	est, and				
		other similar amounts)			772.			772.
l	4	Income from investment of tax	, ,					
	5	Royalties		<u>,</u>				
1			(i) Real	(ii) Personal				
1	6 a							
1	b	Less: rental expenses						
- 1		Rental income or (loss)		<u> </u>				
1	d	Net rental income or (loss)	·	>			11-10-1	
ŀ	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
l	b	Less: cost or other basis					100	
1		and sales expenses		ļ				
1		Gain or (loss)		L				
		Net gain or (loss)		>				
enne	8 a	Gross income from fundraising	-					
		including \$						
Other Rev		contributions reported on line						
je		Part IV, line 18						
₹		Less: direct expenses		L				
- 1		Net income or (loss) from fund		>				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
1		Less: direct expenses						
		Net income or (loss) from gam		>				
1	IU a	Gross sales of inventory, less			100			
		and allowances		1 1				
		Less: cost of goods sold		<u> </u>				
ŀ		Net income or (loss) from sales Miscellaneous Revenue		Business Code				
F	11 a			Busilless Code				
	b							
	c d	All other revenue						~
		All other revenue Total. Add lines 11a-11d						
1	12	Total revenue. See instructions.			1,550,554.	0.	0.	772.
232009 12-10-								Form 990 (2012)

Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon				X
	not include amounts reported on lines 6b, 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 United States. See Part IV, line 21	407,998.	407,998.		
2	Grants and other assistance to individuals in				100
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	07 500	00 000	14 565	
	trustees, and key employees	97,500.	82,933.	14,567.	
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits			***************************************	
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
þ	Legal	8,083.	4,683.	3,400.	
С	Accounting	25,814.		25,814.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	455 006	450 504	- 04-	
	column (A) amount, list line 11g expenses on Sch O.)	157,826.	152,781.	5,045.	
12	Advertising and promotion	369,360.	369,360.	<u> </u>	
13	Office expenses	1,940.	1,669.	271.	
14	Information technology	3,564.	3,376.	188.	
15	Royalties				
16	Occupancy				
17	Travel	27,313.	27,236.	77.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	74,589.	61,197.	13,392.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			~ ~ ~ ~ ~	
23	Insurance	2,015.		2,015.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	PRINTING AND NEWSLETTER	52,050.	47,915.	4,135.	
h	MISCELLANEOUS	1,814.	1,699.	115.	
~	DUES AND SUBSCRIPTIONS	468.	468.	0.	
d	BANK FEES	279.	0.	279.	
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,230,613.	1,161,315.	69,298.	0.
<u>25</u> 26	Joint costs. Complete this line only if the organization			,	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	112-10-12	L			Form 990 (2012)

BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Form 990 (2012)
Part X | Balance Sheet

Pa	irt X	Balance Sheet				
		Check if Schedule O contains a response to any q	uestion in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments	***************************************	2,413,588.	2	2,701,226.
	3	Pledges and grants receivable, net	***************************************		3	
	4	Accounts receivable, net	***************************************		4	
	5	Loans and other receivables from current and form				
		trustees, key employees, and highest compensate	d employees. Complete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified	d persons (as defined under			And the second s
		section 4958(f)(1)), persons described in section 49	958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section	501(c)(9) voluntary			
ω.		employees' beneficiary organizations (see instr). Co	omplete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7		
As	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 D1				annual englishment
	b	Less: accumulated depreciation1	0ь		10c	
	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	<u> </u>	
	16	Total assets. Add lines 1 through 15 (must equal li	ne 34)	2,413,588.	16	2,701,226.
	17	Accounts payable and accrued expenses		55,635.	17	54,653.
	18	Grants payable		55,381.	18	10,000.
	19	Deferred revenue			19	14,060.
	20	Tax-exempt bond liabilities			20	
es	21	Escrow or custodial account liability. Complete Par			21	
Liabilities	22	Loans and other payables to current and former of				
iä		key employees, highest compensated employees,	-			
		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated			23	
	24	Unsecured notes and loans payable to unrelated the			24	
	25	Other liabilities (including federal income tax, payab				
		parties, and other liabilities not included on lines 17	-24). Complete Part X of			
		Schedule D		111 016	25	70 713
	26	Total liabilities. Add lines 17 through 25		111,016.	26	78,713.
		Organizations that follow SFAS 117 (ASC 958), o				
ces		complete lines 27 through 29, and lines 33 and 3		E 22 / 101		206 014
ä	27	Unrestricted net assets		522,481. 1,780,091.	27	286,014. 2,336,499.
Ва	28	Temporarily restricted net assets		1,700,031.	28	2,330,433.
pu	29				29	
Ę		Organizations that do not follow SFAS 117 (ASC	958), check here			
Net Assets or Fund Balances		and complete lines 30 through 34.				
set	30	Capital stock or trust principal, or current funds		30		
As	31	Paid-in or capital surplus, or land, building, or equip			31	
Ret	32	Retained earnings, endowment, accumulated incor		2,302,572.	32	2,622,513.
	33	Total net assets or fund balances		2,413,588.	33 34	2,701,226.
***************************************	34	Total liabilities and net assets/fund balances		#, #15,500 e	J4	Form 990 (2012)

	n 990 (2012) DEVELOPMENT ASSOCIATION, INC.	<u> 20-</u>	-2660011	Pa	ige 12			
Pa	rt 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	1,550					
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,230					
3	Revenue less expenses. Subtract line 2 from line 1	3	$\frac{319}{2,302}$		41.			
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))4							
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	2,622	2,5	13.			
Pa	rt 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: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,						
	consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e 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.								
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Auc	l tit					
	Act and OMB Circular A-133?		3a	X				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red aud	lit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	X				

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

See separate instructions.

OMB No. 1545-0047
2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

 Section 501(c)(4), (5), or (6) organ 	izations: Complete Part III.	A, 10A,, 01 (01 000		ony runy, mon
Name of organization BRISTO	L BAY REGIONAL SI	EAFOOD		Employer identification number
DEVELO	PMENT ASSOCIATION	N, INC.		20-2660011
Part I-A Complete if the c	organization is exempt un	der section 501(c	c) or is a section 52	27 organization.
Provide a description of the orga Political expenditures Volunteer hours				
	rganization is exempt un			
1 Enter the amount of any excise t	ax incurred by the organization ur	nder section 4955		> \$
2 Enter the amount of any excise t	ax incurred by organization manag	gers under section 495	55	▶ \$
3 If the organization incurred a sec				
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV. Part I-C Complete if the o	rganization is evennt un	der section 501(c	except section	S01(c)(3)
Enter the amount directly expend				▶ \$
2 Enter the amount of the filing org		•		5
	arazation s rainas contributed to o	_		▶ \$
3 Total exempt function expenditu				***************************************
				▶ \$
4 Did the filing organization file For	m 1120-POL for this year?	*************************	***************************************	Yes No
contributions received that were	employer identification number (E zation listed, enter the amount pa promptly and directly delivered to If additional space is needed, pro	id from the filing organ a separate political or	nization's funds. Also ent ganization, such as a se	er the amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization funds. If none, enter	's contributions received and
				
For Paperwork Peduction Act Notice	see the Instructions for Form	990 or 990-E7	Schodul	a C (Form 990 or 990-FZ) 2012

232041 01-07-13

LHA

BRISTOL BAY REGIONAL SEAFOOD

Schedule C (Form 990 or 990-EZ) 2012 Part II-A Complete if the or					20-2 lod Form 5769	2660011 Page 2		
(election under se	_		mpi under sedud	ni soricijoj anu ii	ileu Form 5766			
A Check if the filing organize expenses, and sha	ation belong are of excess	s to an affi			d group member's nan	ne, address, EIN,		
Lim	its on Lobb	/ing Expe			(a) Filing organization's totals	(b) Affiliated group totals		
 1a Total lobbying expenditures to inf b Total lobbying expenditures to inf c Total lobbying expenditures (add d Other exempt purpose expenditure e Total exempt purpose expenditure 								
f Lobbying nontaxable amount. En								
If the amount on line 1e, column (a) Not over \$500,000								
Over \$500,000 but not over \$1,00								
Over \$1,000,000 but not over \$1,								
Over \$1,500,000 but not over \$17 Over \$17,000,000	7,000,000	\$1,000,0	0 plus 5% of the exce 000.	ess over \$1,500,000.				
h Subtract line 1g from line 1a. If zei Subtract line 1f from line 1c. If zer	g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720							
(Some organi	4 zations that	-Year Ave made a se	raging Period Under ection 501(h) election	Section 501(h) n do not have to com es 2a through 2f on p	plete all of the five	Yes No		
	Lobby	ing Expen	ditures During 4-Ye	ar Averaging Period	·	·		
Calendar year (or fiscal year beginning in)	(a) 20	009	(b) 2010	(c) 2011	(d) 2012	(e) Total		
2a Lobbying nontaxable amount								
b Lobbying ceiling amount (150% of line 2a, column(e))								
c Total lobbying expenditures								
d Grassroots nontaxable amount						***************************************		
e Grassroots ceiling amount (150% of line 2d, column (e))								

Schedule C (Form 990 or 990-EZ) 2012

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2012 DEVELOPMENT ASSOCIATION, INC. 20-266001 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		a)	(b)		
of th	e lobbying activity.	Yes	No	Am	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or					
	local legislation, including any attempt to influence public opinion on a legislative matter					
	or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>				
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<u> </u>			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	ion 501(c)	(5), or s	ection		
	501(c)(6).			· · · · · · · · · · · · · · · · · · ·		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?			 	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			X		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section				X	
1	answered "Yes." Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b						
С	Total					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political				
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par	t IV Supplemental Information					
Comp	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P	art II-A (affilia	ated group	list); Part I	I-A, line 2;	
and F	Part II-B, line 1. Also, complete this part for any additional information.					

					M	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047

2012
Open to Public

Open to Public Inspection

Name of the organization BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Employer identification number 20-2660011

Pa	organizations Maintaining Donor Advise organization answered "Yes" to Form 990, Part IV, line		s or Accounts.Complete if the
************	Cigarination and root of the control	(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 v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	anization answered "Yes" to Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struct	ture
	listed in the National Register	***************************************	2d
3	Number of conservation easements modified, transferred, rele		
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the peri		
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	during the year >
7	Amount of expenses incurred in monitoring, inspecting, and e	_	
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizati	ion's financial statements that describes	the organization's accounting for
10 1250	conservation easements.	A	WO:
Pai	t III Organizations Maintaining Collections of	· · · · · · · · · · · · · · · · · · ·	itner Similar Assets.
	Complete if the organization answered "Yes" to Form 9		
1a	If the organization elected, as permitted under SFAS 116 (AS)	•	
	historical treasures, or other similar assets held for public exh		ince of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
b	If the organization elected, as permitted under SFAS 116 (ASI		
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
_			
2	If the organization received or held works of art, historical trea	•	al gain, provide
	the following amounts required to be reported under SFAS 11		. .
a	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		\$

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

232051 12-10-12 Schedule D (Form 990) 2012

	BRISTOL	BAY REGIO	NAL SEAFOC)D		
Sche	edule D (Form 990) 2012 DEVELOPM	ENT ASSOC	IATION, IN	IC.	20-2	660011 Page 2
***************************************	rt III Organizations Maintaining Co	llections of Ar	t, Historical Tr	easures, or Ot	her Similar Ass	ets(continued)
3	Using the organization's acquisition, accession	, and other record	s, check any of the	following that are	a significant use of it	s collection items
	(check all that apply):					
а	Public exhibition	d	Loan or exc	hange programs		
b	Scholarly research	e	Other			
С	Preservation for future generations					
4	Provide a description of the organization's colle	ections and explain	n how they further t	he organization's e	xempt purpose in Pa	art XIII.
5	During the year, did the organization solicit or r	eceive donations	of art, historical trea	sures, or other sim	ilar assets	
	to be sold to raise funds rather than to be main	tained as part of t	he organization's c	ollection?		Yes No
Pai	rt IV Escrow and Custodial Arrange	ements. Comple	te if the organization	n answered "Yes"	to Form 990, Part IV	, line 9, or
	reported an amount on Form 990, Part 2					
1a	Is the organization an agent, trustee, custodiar	or other intermed	iary for contributior	ns or other assets r	ot included	
	on Form 990, Part X?		**********************	*****		Yes No
b	If "Yes," explain the arrangement in Part XIII an					
						Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year					
f	Ending balance					
2a	Did the organization include an amount on Form	n 990, Part X, line	21?		L	Yes No
	If "Yes," explain the arrangement in Part XIII. C					
Pai	t V Endowment Funds. Complete if the	ne organization an	swered "Yes" to Fo			
	· ·	a) Current year	(b) Prior year		(d) Three years back	
1a	Beginning of year balance	1,427,540.	1,045,210.	ļ	- 	
b	Contributions	340,617.	382,330.	306,860	. 264,826	251,888.
С	Net investment earnings, gains, and losses					
d	Grants or scholarships					
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
g	End of year balance	1,768,157.	1,427,540.	L	738,350	473,524.
2	Provide the estimated percentage of the currer			i)) held as:		
а	Board designated or quasi-endowment	100.00	_%			
b	Permanent endowment	%				
С	Temporarily restricted endowment	%				
_	The percentages in lines 2a, 2b, and 2c should					
За	Are there endowment funds not in the possess	ion of the organiza	tion that are held a	nd administered fo	r the organization	
	by:					Yes No
	(i) unrelated organizations					·· ==\(\frac{1}{2}\) ==
	(ii) related organizations					
b	If "Yes" to 3a(ii), are the related organizations lis					3b
4	Describe in Part XIII the intended uses of the or tVI Land, Buildings, and Equipment					
Par	www.composed	- 	-		A = =	(-N.D1
	Description of property	(a) Cost or ot basis (investm		1	Accumulated epreciation	(d) Book value
1.	l and	Dasis (ilivestili	Uasis i	Outer)	Сртонаногі	

Schedule D (Form 990) 2012

e Other

b Buildings c Leasehold improvements

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

200100000000000000000000000000000000000			
1.	(a) Description of liability	(b) Book v	alue
(1)	Federal income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	>	

2. FIN 48 (ASC 740) Footnote. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

Pai	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With F	evenue per R	eturn	
1	Total revenue, gains, and other support per audited financial statements			1	1,550,554.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
	Donated services and use of facilities				
	Recoveries of prior year grants				
	Other (Describe in Part XIII.)				
	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,550,554.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b		,,	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,550,554.
Pai	t XII Reconciliation of Expenses per Audited Financial Statem	ents With I	xpenses per	Retu	
1	Total expenses and losses per audited financial statements		.,,	1	1,230,613.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		.,	2e	0.
3	Subtract line 2e from line 1			3	1,230,613.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
C	Add lines 4a and 4b	***************************************	,	4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,230,613.
	t XIII Supplemental Information				
Comp	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	II, lines 1a and	4; Part IV, lines 1b	and 2	b; Part V, line 4; Part
	2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to				
PAR	T V, LINE 4: THE BOARD HAS ESTABLISHED A	QUASI-E	IDOWMENT I	FUNL	FOR
THE	PURPOSE OF ENSURING THAT THE ASSOCIATION	HAS OP	TIONS IRRI	ESPE	ECTIVE OF
THE	OUTCOME OF ANY ONE SEASON. THE BOARD HAS	DESIGNA	ATED 25% (OF T	HE REVENUE
~~-					
COT	LECTED FROM THE STATE OF ALASKA TO BE HELD	D FOR TI	HE BUDGET	RES	SERVE EACH
	_				
YEA	К.				~ · · · · · · · · · · · · · · · · · · ·
					···············
		, , , , , , , , , , , , , , , , , , , ,			

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States OMB No. 1545-0047
2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Name of the organization BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Employer identification number 20-2660011

Part I General Information on Grants		ATION, INC.	•				20-2660011
1 Does the organization maintain records criteria used to award the grants or ass					-		
2 Describe in Part IV the organization's p	*********	toring the use of gree	+ francis in the I luite.				X Yes No
Part II Grants and Other Assistance to						/»	11.11.21.6
recipient that received more than					anization answered	res" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TROUT UNLIMITED 419 6TH STREET JUNEAU, AK 99801	38-1612715	501(C)(3)	10,000.	0.			GENERAL MARKETING OF BRISTOL BAY SALMON PRODUCTS.
KDLG RADIO P.O. BOX 670 DILLINGHAM, AK 99576	99-0031132		25,000.	0.			EDUCATION ON SALMON PRODUCTS AND THE COMMERCIAL FISHING PROFESSION.
UNIVERSITY OF WASHINGTON P.O. BOX 355020 SEATTLE, WA 98195	91-6001537		348,500.	0.			FUND SCIENTIFIC RESEARCH PROJECTS.
PROPHET PRODUCTIONS 543 N 82ND AVENUE SEATTLE, WA 98103			13,100.	0.			DOCUMENTARY FILM
BRISTOL BAY HERITAGE LAND TRUST P.O. BOX 1388 DILLINGHAM, AK 99576	31-1721762	501(C)(3)	7,500.	0.			FUND SCIENTIFIC RESEARCH PROJECTS
 2 Enter total number of section 501(c)(3) 3 Enter total number of other organization 		1 table	he line 1 table				2. 3.

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

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012) DEVELOPMENT AS:					20-2660011	Page
Part III Grants and Other Assistance to Individuals in the Un Part III can be duplicated if additional space is needed.	nited States. Cor	nplete if the organiz	ation answered "Yes	to Form 990, Part IV, line 22.		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash	assistance
		·				
Part IV Supplemental Information. Complete this part to prov	ide the information	on required in Part I,	line 2, Part III, colum	nn (b), and any other additional ir	nformation.	
SCHEDULE I, PART I, LINE 2: THE O	RGANIZATI	ON MAY PUE	BLICIZE A G	RANT PROJECT		
AND SOLICIT APPLICATIONS. GRANTEE	IDEAS MA	Y ALSO BE	BROUGHT FO	RWARD BY		
INDIVIDUAL PROPOSAL OR REQUEST.	ALL GRANT	S ARE APPE	ROVED BY TH	E BOARD OF		
DIRECTORS, (CURRENTLY NO SEPARATE	GRANT CC	MMITTEE).				
ALL GRANTEES SIGN A GRANT AGREEMEN	NT, WHICH	INCLUDES	REPORTING	REQUIREMENTS.		
A GRANT MAY INCLUDE INTERIM AND F	INAL REPO	RTING, OR	ONLY FINAL	REPORTING.		
THE GRANT AGREEMENT DESCRIBES THE	EXEMPT P	URPOSE ANI	O INCLUDES	A LIMITATION		
ON THE USE OF FUNDS TO THE PURPOSE	Ε.	<u> </u>				
		2.5				

Schedule I (Form 990)

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

2012
Open to Public Inspection

Name of the organization

BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Employer identification number 20-2660011

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: WITHIN THE BRISTOL BAY REGION OF ALASKA. A PRIMARY GOAL OF THE ASSOCIATION IS TO PROMOTE AND MARKET SEAFOOD HARVESTED IN THE REGION AND TO THEREBY IMPROVE FISHER REVENUES. THE ASSOCIATION SHALL IMPLEMENT A WIDE RANGE OF STRATEGIES FOR IMPROVING FISHER INCOME INCLUDING: PROMOTE AND MARKET ALASKA SEAFOOD PRODUCTS HARVESTED IN THE ESTABLISH EDUCATION, RESEARCH, ADVERTISING AND SALES PROMOTIONS FOR SEAFOOD HARVESTED IN THE REGION. RESEARCH AND IMPLEMENT WAYS AND MEANS FOR REDUCING FISHER COSTS. COOPERATE WITH ASMI AND OTHER PUBLIC OR PRIVATE ENTITIES ENGAGED IN SEAFOOD INDUSTRY. COOPERATE WITH COMMERCIAL FISHERS, FISHER ORGANIZATIONS, SEAFOOD PROCESSORS, AFDF, FITC, STATE AND FEDERAL AGENCIES AND OTHER RELEVANT ENTITIES TO INVESTIGATE MARKET RECEPTION TO NEW SEAFOOD FORMS AND TO DEVELOP COMMODITY STANDARDS AND FUTURE MARKETS FOR SEAFOOD PRODUCTS FROM THE REGION.

THE ASSOCIATION PROMOTED ACTIVITIES AND OUTCOMES THAT ASSURE THE

CONTINUATION OF A BIOLOGICALLY AND ECONOMICALLY HEALTHY AND PRODUCTIVE

COMMERCIAL FISHERY. THE ASSOCIATION HELD PUBLIC MEETINGS, COMPLETED

MAILINGS OF THE ENTIRE FLEET OF BRISTOL BAY FISHERMEN, CONDUCTED

MEETINGS OF THE BOARD OF DIRECTORS, CREATED A BUDGET AND HELD BOARD

ELECTIONS.THE PROGRAMS WORK TO CONTINUOUSLY STRENGTHEN THE

ORGANIZATIONAL FOUNDATION OF THE BB-RSDA.

EXPENSES \$ 320,724. INCLUDING GRANTS OF \$ 54,387. REVENUE \$ 0.

Schedule O (Form 990 or 990-EZ) (2012)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 01-04-13

FORM 990, PART VI, SECTION A, LINE 3: THE EXECUTIVE DIRECTOR IS AN INDEPENDENT CONTRACTOR.

FORM 990, PART VI, SECTION A, LINE 6: ALL FISHERMEN IN THE BRISTOL BAY
FISHING FLEET (OTHER THAN THE SETNET FISHERMEN) PAY A SELF-IMPOSED TAX TO
FUND BBRSDA AND ARE VOTING MEMBERS OF THE ASSOCIATION.

FORM 990, PART VI, SECTION A, LINE 7A: ALL MEMBERS HAVE THE RIGHT TO VOTE FOR THE GOVERNING BODY AND VOTE AT THE ANNUAL MEETING.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WILL BE REVIEWED AND APPROVED BY THE EXECUTIVE DIRECTOR PRIOR TO FILING AND THEN PRESENTED AT A BOARD MEETING TO BE REVIEWED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS AND THE

EXECUTIVE DIRECTOR ARE REQUIRED TO SUBMIT ANNUAL FORMS DISCLOSING ANY

POSSIBLE CONFLICT OF INTEREST. THEY ARE ALSO REQUIRED TO DISCLOSE AT ANY

TIME DURING THE YEAR WHEN A POSSIBLE CONFLICT OF INTEREST DEVELOPS DUE TO

THE ASSOCIATION ENTERING INTO, OR CONSIDERING, NEW BUSINESS RELATIONSHIPS.

MEMBERS OF THE BBRSDA BOARD ARE NOT PREVENTED FROM PARTICIPATING IN

PROGRAMS OFFERED TO BRISTOL BAY FISHERMAN BECAUSE THEY ARE ON THE BOARD,

VOTED TO ESTABLISH THE PROGRAM, OR OTHERWISE PARTICIPATE IN PROGRAM

ADMINISTRATION, SO LONG AS THEY ADHERE TO NORMAL PROGRAM REQUIREMENTS MADE

APPLICABLE TO ALL PARTICIPANTS. FURTHER, IF A BOARD MEMBER PARTICIPATES IN

SUCH A PROGRAM AFTER IT WAS ADVERTISED AND MADE AVAILABLE TO ALL BRISTOL

BAY FISHERMAN, THEN BOARD STATUS IS NOT RELEVANT TO PROGRAM PARTICIPATION

AND A CONFLICT OF INTEREST NEED NOT BE DECLARED IN FURTHER DELIBERATIONS

CONCERNING PROGRAM ADMINISTRATION.

GOVERNMENTAL GRANT REPORTABLE ON LINE 1E AND NOT PROGRAM SERVICE REVENUE REPORTABLE ON LINE 2, PURSUANT TO EXAMPLES 1 AND 2 ON PAGE 35 OF THE INSTRUCTIONS FOR THE 2010 FORM 990.