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

OMB No. 1545-1150

2008

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

**A For the 2008 calendar year, or tax year beginning**

OCT 16, 2008, and ending

OCT 15, 2009

<b>B Check if applicable</b>	<b>C Name of organization, number and street, city, town, state, and ZIP code</b>	<b>D Employer identification number</b>
Address change	Please use IRS label or print or type. See Specific Instructions	
Name change	BRISTOL FISH & GAME ASSOCIATION INC	
Initial return	PO BOX 175	
Termination	BRISTOL CT 06011-	
Amended return		
Application pending		
<b>E Telephone number</b>		06-0642486
<b>F Group Exemption Number</b>		860-450-6650

- Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G Accounting method:**  Cash  Accrual  
Other (specify) ►

**I Website:** ►

**H Check**  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

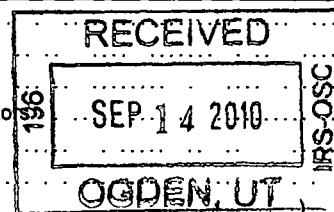
**K Check**  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000.

A return is not required, but if the organization chooses to file a return, be sure to file a complete return

**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ** ► \$ 399,652.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions)

<b>Revenue</b>	1 Contributions, gifts, grants, and similar amounts received .....	1
	2 Program service revenue including government fees and contracts .....	2
	3 Membership dues and assessments .....	3 286,000 ..
	4 Investment income .....	4
	5 a Gross amount from sale of assets other than inventory .....	5a
	b Less cost or other basis and sales expenses .....	5b
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ►	
	a Gross revenue (not including \$ ..... of contributions reported on line 1) .....	6a
	b Less direct expenses other than fundraising expenses .....	6b
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) .....	6c
	7 a Gross sales of inventory, less returns and allowances .....	7a 73,652 ..
	b Less cost of goods sold .....	7b 67,200 ..
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) .....	7c 6,452 ..
	8 Other revenue (describe ► SEE STMT) .....	8 40,000 ..
	9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 .....	9 332,452 ..
<b>Expenses</b>	10 Grants and similar amounts paid (attach schedule) .....	10
	11 Benefits paid to or for members .....	11 57,000 ..
	12 Salaries, other compensation, and employee benefits .....	12 26,287 ..
	13 Professional fees and other payments to independent contractors .....	13
	14 Occupancy, rent, utilities, and maintenance .....	14 87,000 ..
	15 Printing, publications, postage, and shipping .....	15
	16 Other expenses (describe ► SEE STMT) .....	16 6,851 ..
	17 Total expenses Add lines 10 through 16 .....	17 177,138 ..
<b>Net Assets</b>	18 Excess or (deficit) for the year (Subtract line 17 from line 9) .....	18 155,314 ..
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) .....	19 873,592 ..
	20 Other changes in net assets or fund balances (attach explanation) .....	20
	21 Net assets or fund balances at end of year Combine lines 18 through 20 .....	21 1,028,906 ..



**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions)

	<b>(A) Beginning of year</b>	<b>(B) End of year</b>
22 Cash, savings, and investments .....	873,592 ..	22 1,028,906 ..
23 Land and buildings .....		23
24 Other assets (describe ► SEE STMT) .....		24
25 Total assets .....	873,592 ..	25 1,028,906 ..
26 Total liabilities (describe ► SEE STMT) .....		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21) .....	873,592 ..	27 1,028,906 ..

For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990.

20



## Part V Other Information (Note the statement requirements in the instructions for Part VI.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T	35a	X
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35b	
b If "Yes," has it filed a tax return on Form 990-T for this year?	36	X
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	37a	0
a Enter amount of political expenditures, direct or indirect, as described in the instructions.	37b	
b Did the organization file Form 1120-POL for this year?	38a	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38b	
b If "Yes," complete Schedule L, Part II and enter the total amount involved	39a	
39 Section 501(c)(7) organizations Enter	39b	
a Initiation fees and capital contributions included on line 9		
b Gross receipts, included on line 9, for public use of club facilities		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► section 4912 ► section 4955 ►	40b	X
b Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Enter amount of tax on line 40c reimbursed by the organization		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e	X
41 List the states with which a copy of this return is filed.		
42a The books are in care of ► ARTHUR MILLER Telephone no ► 860-450-6650 Located at ► PO BOX 175 CT BRISTOL ZIP + 4 ► 06011-		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	X
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ►	42c	X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

**Part VI Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46 - 49 and complete the tables for lines 50 and 51.

- |  | Yes | No |
|--|-----|----|
| 46 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 I  | 46  | X  |
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II  | 47  | X  |
| 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 48  | X  |
| 49a Did the organization make any transfers to an exempt non-charitable related organization?  | 49a | X  |
| b If "Yes," was the related organization(s) a section 527 organization?  | 49b |    |
| 50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None" |     |    |

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$100,000 ►				

- 51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		
Total number of other independent contractors each receiving over \$100,000 ►		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

► Signature of officer  
► ARTHUR MILLER

08/30/2010

Date

TREASURER

► Type or print name and title

Paid Preparer's Use Only

► Preparer's signature	Date	Check if self-employed ►	Preparer's Identifying No (See instr)
► Firm's name (or yours if self-employed), address, and ZIP + 4 ►		EIN ►	Phone no. ►

May the IRS discuss this return with the preparer shown above? See instructions

►  Yes  No

Form 990-EZ (2008)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

## Public Charity Status and Public Support

**To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.**

Department of the Treasury  
Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

► See separate Instructions.

**Name of the organization**

BRISTOL FISH & GAME ASSOCIATION INC

**Employer Identification number**  
06-0642486

**Part I** **Reason for Public Charity Status** (All organizations must complete this part) (see instructions)

**The organization is not a private foundation because it is (Please check only one organization )**

- |    |                                     |  |
|----|-------------------------------------|--|
| 1  | <input type="checkbox"/>            | A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).   |
| 2  | <input type="checkbox"/>            | A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)  |
| 3  | <input type="checkbox"/>            | A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H )   |
| 4  | <input type="checkbox"/>            | A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:  |
| 5  | <input type="checkbox"/>            | An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II )  |
| 6  | <input type="checkbox"/>            | A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).   |
| 7  | <input type="checkbox"/>            | An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete the Support Schedule in Part II )   |
| 8  | <input type="checkbox"/>            | A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)   |
| 9  | <input checked="" type="checkbox"/> | An organization that normally receives, (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2) (Complete Part III ) |
| 10 | <input type="checkbox"/>            | An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)  |
| 11 | <input type="checkbox"/>            | An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h  |
| e  | <input type="checkbox"/>            | a <input type="checkbox"/> Type I      b <input type="checkbox"/> Type II      c <input type="checkbox"/> Type III - Functionally integrated      d <input type="checkbox"/> Type III - Other  |
| f  | <input type="checkbox"/>            | By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)  |
| g  | <input type="checkbox"/>            | If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box   |
| h  | <input type="checkbox"/>            | Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?   |
|    | (i)                                 | A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....   |
|    | (ii)                                | A family member of a person described in (i) above? .....  |
|    | (iii)                               | A 35% controlled entity of a person described in (i) or (ii) above? .....  |
| i  | <input type="checkbox"/>            | Provide the following information about the organizations the organization supports  |

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

**h** Provide the following information about the organizations the organization supports:

Total

**For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule A (Form 990 or 990-EZ) 2008

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") .....						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....					399652.	399652.
3 Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
5 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
6 Total. Add lines 1-5 .....					399652.	399652.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 .....						
c Add lines 7a and 7b .....						
8 Public support (Subtract line 7c from line 6) .....						399652.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6 .....					399652.	399652.
10a Gross income from interest, dividends payments received on securities loans, rents, royalties and income from similar sources .....						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
c Add lines 10a and 10b .....						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) .....						
13 Total support. (Add lines 9, 10c, 11 and 12) .....						399652.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) .....	15	100.00	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g .....	16	0.00	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) .....	17	0.00	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h .....	18	0.00	%
19a 33 1/3 % support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>			
b 33 1/3 % support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here The organization qualifies as a publicly supported organization ► <input type="checkbox"/>			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>			

US 990		Gross Profit on Sales of Inventory 990-EZ: Page 1, Line 7; 990-PF: Page 12, Line 10		2008
Description		Gross sales less returns	Cost of goods sold	Gross profit
BAR SALES		73,652. 73,652.	67,200. 67,200.	6,452. 6,452.

US 990	Other Expenses	2008		
Description	Expenses per books	Net investment income	Adjusted net income	Charitable purposes
PAYROLL TAXES	2,682..			2,682..
SALES TAX	4,169..			2,682..
	6,851..			

**US 990****Other Revenue (990EZ, Page 1, Line 8)****2008**

Description	Amount
RENT	6,000.
MISCELLANEOUS	12,000.
FISH AND GAME INCOME	22,000.
	40,000.