

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Department of the Treasury
Internal Revenue Service

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

2009

OMB No 1545-0047

2009

Inspection

calendar year, or tax year beginning 10-01-2009 and ending 09-30-2010 A For the 2009 D Employer identification number B Check if applicable TROUT UNLIMITED INC use IRS Address change 38-1612715 label or Doing Business As E Telephone number print or Name change type. See Specific (703) 522-0200 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-**G** Gross receipts \$ 27,045,601 1300 17th St N No 500 Terminated tions. City or town, state or country, and ZIP + 4 ARLINGTON, VA 222093311 Amended return Application pending Name and address of principal officer Is this a group return for CHRISTOPHER WOOD affiliates? 1300 17th St N No 500 ARLINGTON, VA 222093311 Γ Yes Γ No H(b) Are all affiliates included? If "No," attach a list (see instructions) **✓** 501(c) (3) **◄** (insert no) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status Group exemption number 🕨 Website: ► WWW TU ORG K Form of organization 🔽 Corporation Trust 🗆 Association 🗀 Other 🕨 M State of legal domicile MI L Year of formation 1959 Part I Summary Briefly describe the organization's mission or most significant activities to conserve, protect, and restore north america's coldwater fisheries and their watersheds Activities & Governance 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) $\,$. $\,$. 178 Total number of employees (Part V. line 2a) . . . 12,623 Total number of volunteers (estimate if necessary) . 74,423 Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 $\,$. **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 21,326,966 21,337,613 Program service revenue (Part VIII, line 2g) . 4,948,201 5,046,094 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 115,894 204,572 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 77,614 68,231 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 26,468,675 26,656,510 436,131 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 511.546 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 15 9.001.929 9.868.593 **Expenses** 16a Professional fundraising fees (Part IX, column (A), line 11e) . . 0 Total fundraising expenses (Part IX, column (D), line 25) ▶2,278,450 Ь **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 13,177,992 14,967,129 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 22,691,467 25,271,853 3,777,208 19 Revenue less expenses Subtract line 18 from line 12 . 1.384.657 t Assets or | nd Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 18,116,401 20,448,982 Total liabilities (Part X, line 26) . . 1,601,666 2,181,954 22 16,514,735 18,267,028 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign ***** 2011-05-13 Here Signature of officer HILLARY P COLEY CHIEF FINANCIAL OFFICER Type or print name and title Preparer's signature Date Check if Preparer's identifying number Paid empolyed 🕨 🛘 Preparer's Firm's name (or yours RSM McGLADREY INC EIN ▶ if self-employed), **Use Only** address, and ZIP + 4 8000 TOWERS CRESCENT DR STE 500 Phone no 🕨 (703) 336-6400

VIENNA, VA 221826205

May the IRS discuss this return with the preparer shown above? (see instructions) $\ \ .$

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

TO CONSERVE, PROTECT, AND RESTORE NORTH AMERICA'S COLDWATER FISHERIES AND THEIR WATERSHEDS

2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 16,145,130 including grants of \$ 12,500) (Revenue \$ 4,017,135)
	Protect, Reconnect, & RestoreIn Colorado, TU reached a long-term agreement with the Pagosa Area Water and Sanitation District and San Juan Water Conservancy District that sets reservor storage levels, diversion rates, and use restrictions that protect trout in the San Juan River. This settlement agreement is the capstone of a multi-year effort that included a string of TU court victories in which we successfully fought attempts by the Districts to acquire water rights based on unsubstantiated speculation about future population growth TU led a successfully flought attempts by the Districts to acquire water rights based on unsubstantiated speculation about future population growth TU led a successfull effort to reflect the rights which lash string the substance of the subcommittee and the system for distributing funds, which has historically gone to trail building and maintenance, while neglecting investments in habitat restoration and improved enforcement in the East, TU's staff and grassroots members continued to advocate for stronger provisions to require the Marcellus Shale, and have started a Coldwater Conservation Corps in Pennsylvania to monitor the water quality in affected streams in Maine, TU launched a new campaign to conserve wild brook trout in the Senation Read and grassroots members were successful in protecting a key property along one of North Carolina's most popular trout streams, an in-holding in the Pisgah National Forest along the North Mills River In Congress, TU public lands staff and volunteers have been seeking legislation to balance the impending wave of renewable energy development with fish and wildlife conservation on public lands. Senators Read and Tester in the Senate, and Representative Heller in the House, introduced an excellent renewables bill in June that accomplished our renewables goals. The Clean Energy, Community Investment, and Wildlife Conservation Att (H. R. 5735 and S. 3587) was a bipartisan bill that would have set up a pitol leasing program for remove, replace, and r
4b	(Code) (Expenses \$ 3,968,711 including grants of \$ 423,631) (Revenue \$ 954,536)
- T	SustainIn 2010, TU members contributed more than 650,000 volunteer hours On the Boise River system in Idaho, floodplain reclamation and riparian plantings engaged hundreds of volunteers from numerous partner groups. TU helped lead the Kokanee Outdoor Day on the Boise River, which attracted hundreds of visitors to celebrate and promote natural resource-based restoration. In Oregon, a new program was introduced on the Upper Deschutes River to engage TU members, college students, and other adults to become Deschutes Basin Stewards. Participants go through training sessions and volunteer for hands-on field projects in the basin. In West Virginia, the new Potomac Highlands Youth Education Initiative was launched, which is part of TU's B-WET grant for the region. We expanded the TU Campus Club program with six new colleges. This expansion is part of the 5 Rivers College Outreach Program.
	(Code) (Expenses \$ 1,463,288 including grants of \$) (Revenue \$ 74,423)
4c	(Code) (Expenses \$ 1,463,288 including grants of \$) (Revenue \$ 74,423) communications - the communications department publishes the quarterly trout magazine, the monthly "lines to leaders" newsletter, and tu's annual report the communications department also produces trout unlimited television, maintains tu's website, generates press releases, conducts press conferences, and is responsible for tu's public relations A new, updated version of the grassroots Leadership Manual was released. The online Tacklebox and the Leaders Only Tools section were significantly updated and included new bulk e-mail tool upgrades. The chapter/ council contacts page was revised to bring us into compliance with ICANN spam laws The development of the new TU website initiative was unveiled September 2010. The final site should be released in September 2011. Daily postings to TU's blog, Facebook Fanpage, YouTube channel, and Twitter feeds increased our online social network exposure around issues across the organization. We increased our Fanpage base to nearly 9,500 fans, and have more than 1,500 twitter followers. Traffic to the TU ORG website increased to an average of 16,000 visitors each week. These visitors view approximately 56,000 pages in our site and spend on average 2.00 minutes on the site, well above industry standards. A series of new print ads were developed that provide fresh creative content for placement in national magazines, and also can be used on the web and by chapters and councils. "On the Rise" TU's TV Show, fillmed the 2012 season. TU launched a new podcast series focusing on TU initiatives around the country. Trout magazine accepted the gold award for design excellence at the annual Association Media & Publishing EXCEL Awards, and secured an advertising contract with the fly-fishing equipment manufacturer Sage.
4d	Other program services (Describe in Schedule O) See also Additional Data for Description
	(Expenses \$ 557,066 including grants of \$) (Revenue \$)
 4е	Total program service expenses▶\$ 22.134.195

Part IV Checklist of Required Schedul	les
---------------------------------------	-----

		Yes	No	
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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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 I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Νο
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Νο
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If</i> "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18	Yes	
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	19		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
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 Schedule L, Part I	25b		N o
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		N o
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νο
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		N o
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> " <i>Yes," complete Schedule N, Part II</i>	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		N o
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2009)

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 111 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	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)?	4a		No
Ь	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			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
ā	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
,	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 services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
•	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		
.0	Section 501(c)(7) organizations. Enter			
	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			
.1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

1300 n 17th st 500 ARLINGTON, VA 22209

(703) 522-0200

Part VIGovernance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management				
	At doverning body and Hanagement			Yes	No
		Г			
1a	Enter the number of voting members of the governing body 1a	34			
b	Enter the number of voting members that are independent 1b	32			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with other officer, director, trustee, or key employee?	any •	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 99 filed?) was	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		Νo
6	Does the organization have members or stockholders?		6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	ofthe			
	governing body?		7a	Yes	
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	F	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during year by the following	the			
а	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	Yes	
	ction B. Policies (This Section B requests information about policies not required by the Inte	rnal			
Re	venue Code.)				
		ſ		Yes	No
	Does the organization have local chapters, branches, or affiliates?	•	10a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapte affiliates, and branches to ensure their operations are consistent with those of the organization?	•	10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990	•		163	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	•	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	/		103	
	to conflicts?	•	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		12c	Yes	
13	Does the organization have a written whistleblower policy?		13	Yes	
14	Does the organization have a written document retention and destruction policy?		14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and deci	sion?			
а	The organization's CEO, Executive Director, or top management official		15a	Yes	
b	Other officers or key employees of the organization		15b	Yes	
	If "Yes" to line a or b, 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 taxable entity during the year?		16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate it participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard t	he			
	organization's exempt status with respect to such arrangements?	•	16b		
Se	ction C. Disclosure				
17	List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT ME, MD, MA, MI, MN, MS, NH OH, OK, OR, PA, RI, SC, TN,	, NJ , N	IM,N	Y,NC,	ND,
18			,	,,	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict interest policy, and financial statements available to the public. See Additional Data Table	of			
20	State the name, physical address, and telephone number of the person who possesses the books and recor	ds of th	e oraa	nızatıor	n ▶ -
	HILLARY P COLEY CPA		yu		· •

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)				I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b Total	Ŧ	889,821	0	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶6

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
		4	res	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation					
Porcaro Communications Inc	Description of services	Compensation					
33 West Ninth Avenue Anchorage, AK 99501	Advertising and promotion	722,546					
Merkle Response 100 Jamison Court hagerstown, MD 21740	Caging and fulfillment	405,749					
McMILLEN ENGINEERING LLC 914 Main St Ste 258 Boise, ID 83702	Watershed restoration engineer	387,048					
PACIFIC WATERSHED ASSOCIATES PO Box 4433 Arcata, CA 95518	Watershed restoration engineer	335,740					
Bennett & Sons Sand & Gravel 55110 Country Road 4 plainview, MN 55964	Watershed restoration engineer	224,887					
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►19	Total number of independent contractors (including but not limited to those listed above) who received more than						

Page 8

Form 990 (2009) Part VIII Statement of Revenue										
Part \	/1111	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514		
nts nts	1a	Federated cam	paigns 1a							
<u> </u>	b	Membership du	es 1b							
<u>اري</u> ⊞	С	Fundraising eve	ents 1c	401,905						
<u>#</u>	d		rations 1d							
Sign Sign	e	Government grants		6,160,632						
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no Noncash contri	ons, gifts, grants, and for included above butions included in 0,635	14,775,076						
and	h	IIIIes Ia-II \$ _	s 1a-1f	▶	21,337,613					
				Business Code						
Program Serwce Revenue	2a	membership dues		900,099	4,971,671	4,971,671				
	ь	publications		541,800	74,423		74,423			
	С									
	d									
	e									
200	f	All other progra	ım service revenue							
<u>~</u>	g	Total. Add lines	32a-2f		5,046,094					
	3		ome (including dividend	. +				101 700		
			ar amounts)	F	194,782			194,782		
	4 5		tment of tax-exempt bond p	proceeds	67,482			67,482		
		Royalties	(ı) Real	(II) Personal				27,122		
	6a	Gross Rents	(i) iteal	(ii) i ciocinai						
	ь	Less rental expenses								
	c	Rental income								
	d	or (loss) Net rental incoi	ll me or (loss)							
			(ı) Securities	(II) O ther						
	7a	Gross amount from sales of	241,916							
		assets other than inventory								
	Ь	Less cost or other basis and	232,126							
	 c	sales expenses Gain or (loss)	9,790							
	d		s)		9,790			9,790		
	8a	Gross income f								
Other Revenue		Ψ	,905 reported on line 1c)	157.714						
her	ь	Less direct ex	penses b	157,714 156,965						
ŏ	С		loss) from fundraising e		749			749		
	9a	Gross income f See Part IV, lin	rom gaming activities e 19							
	b c		penses b loss) from gaming activ	/ities►						
	10a	Gross sales of returns and allo								
	b c		a oods sold b loss) from sales of inve	ntory ►						
		Miscellaneous	s Revenue	Business Code						
	11a									
	Ь									
	c									
	d	All other reven	ı							
	е	Total. Add lines	s 11a-11d							
	12	Total revenue.	See Instructions	. ▶	26,656,510	4,971,671	74,423	272,803		
				L	20,030,310	4,3/1,0/1	·	272,803 Form 990 (2009)		

	990 (2009)				Page 10
Par	IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
Do no	other organizations must complete column (A) but are not required to bot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	436,131	436,131		скрепаса
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	,	,		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	563,886	176,712	179,344	207,830
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	7,137,309	6,529,301	248,669	359,339
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	289,794	249,472		23,585
9	Other employee benefits	1,145,990	986,539	 	93,265
10	Payroll taxes	731,614	629,818	 	59,542
11	Fees for services (non-employees)	751,014	023,010	72,237	33,342
a	Management	00.014	71.026	0.070	
b	Legal	80,914	71,036	' 	
с	Accounting	75,615	277.460	75,615	
d	Lobbying	277,460	277,460		
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	6,383,310		 	28,298
12	Advertising and promotion	68,581	68,036	 	150
13	Office expenses	1,549,813		· +	406,226
14	Information technology	872,571	789,818	39,428	43,325
15	Royalties				
16	Occupancy	645,459	598,912	 	21,988
17	Travel	1,491,932	1,320,797	25,258	145,877
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	349,822	298,388	25,254	26,180
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	170,426	146,660	10,387	13,379
23	Insurance	58,922	307	58,615	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	fulfillment	1,354,176	831,808		522,368
b	Printing and publicatio	967,377	667,884	265	299,228
c	Restoration Materials	445,153	445,153		
d	Water leases	139,505	139,505		
e	LIST RENTAL	36,093	8,223		27,870
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	25,271,853	22,134,195	859,208	2,278,450
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	25/271/033	22,131,133	333,233	2,2.0,130
	campaign and fundraising solicitation				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	621	1	509
	2	Savings and temporary cash investments	4,708,032	2	4,747,413
	3	Pledges and grants receivable, net	3,772,479	3	5,363,394
	4	Accounts receivable, net	296,270	4	512,043
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of			
		Schedule L		5	
s	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ Complete Part II of			
		Schedule L		6	
÷	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	497,692	8	524,462
	9	Prepaid expenses and deferred charges	360,957	9	337,081
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 927,239			
	ь	Less accumulated depreciation 10b 554,674	415,962	10c	372,565
	11	Investments—publicly traded securities	8,064,388	11	8,591,515
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	18,116,401	16	20,448,982
	17	Accounts payable and accrued expenses .	1,416,511	17	2,064,375
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
<u>.</u>	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ä		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	185,155	25	117,579
	26	Total liabilities. Add lines 17 through 25	1,601,666	26	2,181,954
S)		Organizations that follow SFAS 117, check here 🕨 🔽 and complete lines 27			
ĕ		through 29, and lines 33 and 34.	1 100 221		1 528 270
<u> </u>	27	Unrestricted net assets	1,180,321		1,528,279
Fund Balance	28	Temporarily restricted net assets	9,244,568		10,588,903
ш	29	Permanently restricted net assets	6,089,846	29	6,149,846
正		Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
Ę,	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	16,514,735		18,267,028
ž	34	Total liabilities and net assets/fund balances	18,116,401	34	20,448,982
		otal natificies and net assets/falla balances	10,110,401	34	20,440,302

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

Employer identification number

SCHEDULE A Public

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public Inspection

TROU	T UNLI	MITED INC			
		38-1612715			
	rt I	Reason for Public Charity Status (All organizations must complete this part.) See instru	<u>uctions</u>		
The	organı —	zation is not a private foundation because it is (For lines 1 through 11, check only one box)			
1	Г	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).			
2	Г	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)			
3	Г	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A hospital's name, city, and state	.)(iii). Ente	rthe	
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unsection 170(b)(1)(A)(iv). (Complete Part II)	nıt describe	_ id in	
6	\sqcap	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).			
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from the described in section 170(b)(1)(A)(vi) (Complete Part II)	the general	public	:
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)			
9	Ī	An organization that normally receives (1) more than 331/3% of its support from contributions, members	ship fees, ar	nd aro	SS
	·	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more th	· · · · · ·	_	
		its support from gross investment income and unrelated business taxable income (less section 511 tax)			
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)			
10	Г	An organization organized and operated exclusively to test for public safety See section 509(a)(4).			
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to ca one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See set the box that describes the type of supporting organization and complete lines 11e through 11h		a)(3).	Check
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)	•	•	
f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type III s check this box	upporting o	rganız	ation,
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?		T v.	
		(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)	14-/:>	Yes	No
		and (III) below, the governing body of the the supported organization?	11g(i)		\vdash
		(ii) a family member of a person described in (i) above?	11g(ii)		<u> </u>
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		
h		Provide the following information about the supported organization(s)			

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

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not about	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

((Complete	only if	you	checked	the box	on	lıne	9 of	Part 1	[.

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	19,443,021	21,902,544	20,750,260	26,189,013	26	,309,284	114,594,122
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	308,018	243,239	171,349	170,926		157,714	1,051,246
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	19,751,039	22,145,783	20,921,609	26,359,939	26	,466,998	115,645,368
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons	1,282,874	567,124	442,840	612,872		983,968	3,889,678
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the							0
	year	1 202 074	FC7 124	442.040	612.072		003.000	2 000 670
с 8	Add lines 7a and 7b Public Support (Subtract line 7c	1,282,874	567,124	442,840	612,872		983,968	3,889,678
	from line 6)							111,755,690
	ction B. Total Support ndar year (or fiscal year							
Cale	beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	009	(f) Total
9	A mounts from line 6	19,751,039	22,145,783	20,921,609	26,359,939	26	,466,998	115,645,368
L0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	446,024	626,135	588,428	296,103		262,264	2,218,954
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
c 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	446,024	626,135	588,428	296,103	262,264		2,218,954
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)	20,197,063	22,771,918	21,510,037	26,656,042	26	,729,262	117,864,322
14	First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second	third, fourth, or	fifth tax year as a	501(c)(3) organ	ization, ▶┌
	ction C. Computation of Pub							
15	Public Support Percentage for 2009			13 column (f))		15		94 820 %
16	Public support percentage from 200	U8 Schedule A, P	art III, line 15			16		94 840 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))

18	Investment income percentage from 2008 Schedule A , Part III, line 17	
----	---	--

	18			2	2 1	20	%
e tha	n 33	1/3%	and line	17	IS	not	:

1 880 %

17

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493133040711

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

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

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

- ◆ 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

If th		t have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5 (zations Complete Part III			
	me of the organization DUT UNLIMITED INC			Employer iden	tification number
IRC	OUT ONLIMITED INC			38-1612715	
Par	t I-A Complete if the or	ganization is exempt unde	r section 501(c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect pol	ıtıcal campaıgn act	civities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	r section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization (ınder section 4955	.	\$
2	Enter the amount of any excise	e tax incurred by organization man	agers under section	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	720 for this year?		┌ Yes
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt unde	r section 501(c) except section 501	l(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing o exempt funtion activities	rganızatıon's funds contributed to	other organizations	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter her	e and on Form 112	0-POL, line 17b	\$
4	Did the filing organization file F	Form 1120-POL for this year?			☐ Yes ☐ No
5	were made For each organizat contributions received that we	nd employer identification number ion listed, enter the amount paid fr re promptly and directly delivered hittee (PAC) If additional space is	om the filing organi to a separate politi	ızatıon's funds Also enter t cal organızatıon, such as a	he amount of political
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and fi	led Form 5768	(election
4	Check If the filing organization belongs to				
<u>B</u>	Check If the filing organization checked bo	x A and "limited control" provisions apply			
	Limits on Lobbying I (The term "expenditures" means a		(a) Filing Organization's Totals	(b) A ffiliated Group Totals	
1a	Total lobbying expenditures to influence public		0		
b	Total lobbying expenditures to influence a legisl	latıve body (dırect lobbyıng)		277,460	
c	Total lobbying expenditures (add lines 1a and 1	b)		277,460	
d	Other exempt purpose expenditures			25,151,358	
е	Total exempt purpose expenditures (add lines 1	c and 1d)		25,428,818	
f	Lobbying nontaxable amount Enter the amount columns		1,000,000		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
g	Grassroots nontaxable amount (enter 25% of li	ne 1f)		250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		0	
i	Subtract line 1f from line 1c If zero or less, ento	0			

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total		
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000		
ь 	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000		
_c	Total lobbying expenditures	314,794	434,017	190,701	277,460	1,216,972		
_d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000		
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000		
f_	Grassroots lobbying expenditures							

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	a)	(b)
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	neır staffs, government officials, or a l	egislative body?				
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, c	rany sımılar means?				
i	Other activities? If "Yes," descri	ibe in Part IV					
j	Total lines 1c through 1:						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	=	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
2611	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
a	Current year	(. , para).		2a			
ь	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493133040711

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization TROUT UNLIMITED INC

Employer identification number

ROUT L	JNLIMITED INC		20 .	1612715		
art I					Complet	e ıf the
	organization answered "Yes" to Form 99	(a) Donor advised funds		(b) Funds and ot	her accour	nts
Tot	tal number at end of year			. ,		
	gregate contributions to (during year)					
Αg	gregate grants from (during year)					
Αg	gregate value at end of year					
	d the organization inform all donors and donor advi ons are the organization's property, subject to the		ıor advı	sed	☐ Yes	┌ No
us	d the organization inform all grantees, donors, and ed only for charitable purposes and not for the ben nferring impermissible private benefit	5 5	•		┌ Yes	┌ No
irt I		ıf the organization answered "Yes" t	o Forn	n 990. Part IV	. line 7.	•
드	rpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space Implete lines 2a-2d if the organization held a qual	on or pleasure) Preservation of an Preservation of a G	certifie	d historic struct		ı
ea	sement on the last day of the tax year			T		
_				Held at the	End of the	Year
	tal number of conservation easements		2a			4
	tal acreage restricted by conservation easements		2b		1,	715 00
	ımber of conservation easements on a certified his	, ,	2c			(
Nu	ımber of conservation easements included in (c) a	cquired after 8/17/06	2d			(
N u D o	e taxable year - 0 Imber of states where property subject to conserve The taxable year - 0 The taxable year	g the periodic monitoring, inspection, hand	—— dling of	· violations, and	[7 v	⊏.
	forcement of the conservation easements it holds' aff and volunteer hours devoted to monitoring, insp		nents d	uring the year 🕨	∨ Yes	No
Δn	nount of expenses incurred in monitoring, inspecti	ng and enforcing conservation easement	e durina	n the vear b - ¢	0	
Do	es each conservation easement reported on line 2 0(h)(4)(B)(i) and 170(h)(4)(B)(ii)?			g the year P p _	☐ Yes	✓ No
ba the	Part XIV, describe how the organization reports c lance sheet, and include, if applicable, the text of t organization's accounting for conservation easer	the footnote to the organization's financial nents	Istater	nents that desc	rıbes	
rt II	Organizations Maintaining Collection Complete if the organization answered		or Otl	her Similar <i>I</i>	Assets.	
art	the organization elected, as permitted under SFAS s, historical treasures, or other similar assets held ovide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or research	ch ın fu			,
hıs	the organization elected, as permitted under SFAS storical treasures, or other similar assets held for ovide the following amounts relating to these items	public exhibition, education, or research i			•	
(i)	Revenues included in Form 990, Part VIII, line 1			► \$		
(ii)	Assets included in Form 990, Part X			► \$		
Ift	the organization received or held works of art, hist lowing amounts required to be reported under SFA		or finan			
Re	venues included in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

3	Using the organization's accession and othe						_					ntinuea)
	items (check all that apply) —		_	_								
а	Public exhibition		d	ı	Loan or	exch	ange progr	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's c Part XIV	ollections and expla	ın how	they	further t	the or	rganızatıon	's ex	cempt purpos	e in		
5	During the year, did the organization solicit	or receive donations	of art,	, hıst	orical tre	easur	es or othe	rsım	nılar			
	assets to be sold to raise funds rather than										Yes	┌ No
Par	Part IV, line 9, or reported an ar						answere	d "Y	es" to Forn	1 990), 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ons or	r other ass	ets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follown	ng ta	ble		Γ			A mou	ınt	
c	Beginning balance							1c				
d	Additions during the year						<u> </u>	1d				
e	Distributions during the year						F	1e				
f	Ending balance						-	1f				
2a	Did the organization include an amount on F	orm QQO Dart V line	217				L		l		Yes	
	-	•	e 2 1 '							'	165	1 140
	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete		2000	voro	d "Voc"	to E	orm 000	Dar	+ T\/ lino 1	<u> </u>		
Гα	Endowment Funds. Complete	(a)Current Year		Prior \					Three Years Ba)Four Y	ears Back
1a	Beginning of year balance	6,089,846		5	,979,346			Ť	<u> </u>	1		
ь	Contributions	60,000			110,500							
c	Investment earnings or losses									\top		
d	Grants or scholarships									\top		
e	Other expenditures for facilities and programs											
f	Administrative expenses							T				
g	End of year balance	6,149,846		6	,089,846							
2	Provide the estimated percentage of the yea	r end balance held a	 as		I							
a	Board designated or quasi-endowment											
b	Permanent endowment • 100.000 %											
	remanent endowment P											
c 3a	Term endowment ► Are there endowment funds not in the posse	ccion of the organize	ntion th		ra hald a	nd ad	lminictoro	d for	tha			
за	organization by	ssion of the organiza	ation ti	iat a	re neiu a	iiu au	ıııııııstere	101	tile		Yes	No
	(i) unrelated organizations								[Ba(i)		No
	(ii) related organizations								🛭	Ba(ii)		No
b	If "Yes" to 3a(11), are the related organization	ns listed as required	d on Sc	hedu	ule R? .					3b		
4	Describe in Part XIV the intended uses of th											
Do.	t VI Investments—Land, Building	s, and Equipme	nt. Se	e Fo	orm 990), Pa	rt X, line	<u> 10.</u>	1			
Pal										hate		
Pal	Description of investment) Cost or of is (investm		(b) Cost or o		(c) Accumula depreciation		(d) Bo	ook value
	Description of investment						basis (oth		depreciation		(d) Bo	ook value 7,801
1a	<u> </u>		·				basis (oth	er)	depreciation		(d) Bo	
1a b	Land						basis (oth	er)	depreciation		(d) Bo	
1a b c	Land						basis (oth	er) 7,801	depreciation	on	(d) Bo	7,801
1a b c d	Land		· · · ·				basis (oth	er) 7,801	depreciation 2	on	(d) Bo	7,801

Part VIII Investments—Other Securities. See			d of valuation
(a) Description of security or category (including name of security)	(b) Book value		d of valuation -year market value
Financial derivatives			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line		
(a) Description of investment type	(b) Book value		d of valuation
		Cost or end-or	-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin	e 15.		
	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	e 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	e 15. tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value

Sche	dule D (Form 990) 2009		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	26,656,510
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	25,271,853
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,384,657
4	Net unrealized gains (losses) on investments	4	367,636
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	367,636
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,752,293
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	27,181,111
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	524,601
3	Subtract line 2e from line 1	3	26,656,510
4	A mounts 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 XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	26,656,510
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	25,428,818
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d 156,965		
e	Add lines 2a through 2d	2e	156,965
3	Subtract line 2e from line 1	3	25,271,853
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 XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	25,271,853
Pa	rt XIV Supplemental Information		

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

Ident if ier	Return Reference	Explanation
Part II, Line 5	Explanation of Easements Enforcement Policies	Annually a TU representative visits the property and speaks with the landowner to review the property and identify any new activities or damages since the last inspection that could affect the property. The representative discusses with the landowner any potential or planned activities concerning the land including, but not limited to, the transfer of the land, agricultural activities, timber harvesting, water development, road construction, and commercial activities.
Part II, Line 9	Description of How Organization Reports Conservation Easements	Conservation easements are not reported in the revenue, expense or balance Sheet of TU
Part V, Line 4	Description of Intended Use of Endowment Funds	CCF Endowment - This endowment is expected by the donors to produce annual investment income that is to be spent to cover the salaries, benefits, and operating budget for TU's Senior Scientist and CCF Director Given that these expenses exceed a reasonable earnings rate for the size of this endowment, the spending rate of 4% was set for fiscal years ended September 30, 2010 and 2009 Other Endowments - The earnings from these endowments are available in support of the general operations of TU. The Board of Trustees determines annually the spending rate for these endowments. Due to the current market conditions, the Board of Trustees authorized a 0% spending rate for the fiscal years ended September 30, 2010, and 2009.
Part X	Description of Uncertain Tax Positions Under FIN 48	On October 1, 2009, TU adopted the accounting standard on accounting for uncertainty in income taxes, which addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements. Under this guidance, TU may recognize the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authorities, based on the technical merits of the position. The tax benefits recognized in the financial statements from such a position are measured based on the largest benefit that has a greater than 50% likelihood of being realized upon ultimate settlement. The guidance on accounting for uncertainty in income taxes also addresses de-recognition, classification, interest and penalties on income taxes, and accounting in interim periods. Management evaluated TU's tax positions and concluded that TU had taken no uncertain tax positions that require adjustment to the financial statements to comply with the provisions of this guidance. Generally, TU is no longer subject to income tax examinations by the U.S. federal, state or local tax authorities for years before 2007
Part XII, Line 2d - Other Adjustments		event expense reported on part VIII, line 8b 156965
Part XIII, Line 2d - Other Adjustments		event expense reported on part VIII, line 8b 156965

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493133040711

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization TROUT UNLIMITED INC

licensing

Employer identification number

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Internet and e-mail solicitations Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (iii) Did fundraiser have (v) A mount paid to (vi) A mount paid to (i) Name of individual (iv) Gross receipts (or retained by) custody or (ii) Activity (or retained by) or entity (fundraiser) fundraiser listed in control of from activity organization contributions? col (i) No Yes

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or

Pa	rt II	Fundraising Events. Commore than \$15,000 on Form					report	:ed
			(a) Event #1	(b) Event #2 SFEVNT	(c) O ther Events	(d) Tot (Add col	(a) th	
			(event type)	(event type)	(total number)	601	(c))	
e Mu	1	Gross receipts	261,459	167,728	130,432		559	9,619
Revenue	2	Less Charitable contributions	200,859	130,827	70,219		40	1,905
	3	Gross income (line 1 minus line 2)	60,600	36,901	60,213		15	7,714
	4	Cash prizes						
မွာ	5	Non-cash prizes						
Expenses	6	Rent/facility costs						
	7	Food and beverages						
Direct	8	Entertainment						
	9	Other direct expenses .	58,019	35,607	63,339		156	6,965
	10	Direct expense summary Add lin					15	6,965
	11	Net income summary Combine li	<u> </u>		.			749
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii	rganızatıon answered ne 6a.	"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e than	i
₽.			(a) Bingo	(b) Pull tabs/Instant	(c) O ther gaming	(d) Tot		
Revenue				bingo/progressive bingo		(Add col	(a) thi	rougn
œ	1	Gross revenue						
မှ	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor						
			l No	Πο	Гио	1		
	7	Direct expense summary Add line	s 2 through 5 in column (d)				
	8	Net gaming income summary Com	nbine lines 1, column d, ai	nd line 7				
•							Yes	No
9 a		er the state(s) in which the organization in the organization licensed to operate			 .	. 9a		
b	If"	No," Explain						
10a	— Wer	re any of the organization's gaming	licenses revoked, susper	nded or terminated during	the tax year?			
b		Yes," Explain						
11		es the organization operate gaming	activities with nonmembe	ers?				
12		the organization a grantor, beneficia						
	forn	med to administer charitable gaming	J [?]			. 12		
					Schedule G (Form 9	990 or 990-	·EZ) 20	09

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493133040711

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

Name of the organization						Employer identification	on number
TROUT UNLIMITED INC						38-1612715	
Part I General Informatio						•	
 Does the organization maintain in the selection criteria used to aw Describe in Part IV the organization 	ard the grants or ass tion's procedures fo	sistance? r monitoring the use o	f grant funds in the Unite	ed States		· · · · · ·	✓ Yes
Form 990, Part IV, line Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
							
2 Enter total number of section 50	1(c)(3) and governr	nent organizations .	<u>.</u>				33

Enter total number of other organizations . . .

	, ,					
Part III	Grants and Other Assistance to Individuals in the United States.	Complete if the organization	answered "Yes"	to Form 990,	Part IV, line	e 22.
	Use Schedule I-1 (Form 990) if additional space is needed.					

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
	1		ı	I.	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 The majority of the grants are given out to TU Chapters and Councils and are monitored by the Embrace-A-Stream Committee for compliance with their grant agreement. For those grants issued to outside organizations, those are typically part of a larger grant agreement that dictates the term of the arrangements with the appropriate TU employee monitoring compliance

Software ID: Software Version:

EIN: 38-1612715

Name: TROUT UNLIMITED INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Form 990,Schedule 1, Par	t 11, Grants and	d Other Assistance	10 Governments	and Organization	5 III tile Olliteu Sta	, tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BLACKFOOT CHAPTER OF TROUT UNLIMITEDPO Box 1 ovando, MT 59854	52-1765527	501 (C)(3)	7,500				Watershed Restoration
CALIFORNIA COUNCIL OF TROUT UNLIMITED26855 Via San Jose mission viejo, CA 92691	52-1765533	501 (C)(3)	22,263				General O perations
COLORADO COUNCIL OF TROUT UNLIMITED5065 Westridge Dr Fort Collins,CO 80526	84-0628113	501 (C)(3)	6,500				Watershed Restoration
COLORADO COUNCIL OF TROUT UNLIMITED5065 Westridge Dr fort Collins, CO 80526	84-0628113	501 (C)(3)	20,009				General O perations
CONNECTICUT COUNCIL OF TROUT UNLIMITED15 Princess Pine Rd norwolk,CT 06850	51-0208498	501 (C)(3)	6,583				General Operations
GEORGIA COUNCIL OF TROUT UNLIMITED264 Laurelwood Saute Nacoche, GA 30571	51-0225125	501 (C)(3)	9,000				Watershed Restoration
GEORGIA COUNCIL OF TROUT UNLIMITED264 Laurelwood saute Nacoche, GA 30571	51-0225125	501 (C)(3)	7,840				General Operations
GUADALUPE RIVER CHAPTER OF TROUT UNLIMITED1854 Ponderosa Dr new braunfels,TX 78132	23-7184499	501 (C)(3)	9,503				General Operations
ILLINOIS COUNCIL OF TROUT UNLIMITEDPO BOX 5046 Oak Brook, IL 60522	52-1765995	501 (C)(3)	5,263				General Operations
JACKSON HOLE CHAPTER OF TROUT UNLIMITEDPO Box 11067 Jackson, WY 83002	52-1491981	501 (C)(3)	10,000				Watershed Restoration

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (d) A mount of cash (a) Name and address of **(b)** EIN (c) IRC Code section (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization if applicable arant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) LITTLE RIVER CHAPTER OF 62-1533995 501 (C)(3) Watershed TROUT UNLIMITEDPO Box Restoration 7,800 6440 maryville, TN 37082 MASSACHUSETTSRHODE 51-0225123 501 (C)(3) General Operations COUNCIL OF TROUT 8,251 UNLIMITED5 Baker Pl newton lower, MA 02462 51-0208681 MASSANUTTEN CHAPTER 501 (C)(3) Watershed OF TROUT UNLIMITEDPO Restoration 9.496 Box 801 harrisonburg, VA 22803 MERRIMACK RIVER VALLEY 52-1766035 501 (C)(3) Watershed CHAPTER OF TROUT Restoration 7,000 UNLIMITED47 River Rde new boston, NH 03070 MICHIGAN COUNCIL OF 23-7188803 501 (C)(3) General Operations TROUT UNLIMITED2114 14,383 7TH St bay city, MI 48708 52-1118808 MID-ATLANTIC COUNCIL 501 (C)(3) General Operations OF TROUT UNLIMITED 3700 5,543 Kanawha St Nw washington, DC 20015 MINNESOTA COUNCIL OF 52-1766036 501 (C)(3) General Operations TROUT UNLIMITED12600 5,351 Marion Ln W minnetonka, MN 55305 MONTANA COUNCIL OF 23-7355289 501 (C)(3) General Operations TROUT UNLIMITEDPO Box 6,923 7186 missoula, MT 59807 NEW JERSEY COUNCIL OF 51-0225120 501 (C)(3) General Operations TROUT UNLIMITEDPO Box 7,958 594 budd lake, NJ 07828 NEW RIVER CHAPTER OF 74-2047563 501 (C)(3) Watershed TROUT UNLIMITED112 Restoration 8,160 Caudill St pearisburg, VA 24134

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant ıf applıcable valuation non-cash assistance organization arant cash or assistance or government assistance (book, FMV, appraisal, other) NEW YORK COUNCIL OF 23-7355317 501 (C)(3) General Operations TROUT UNLIMITEDPO Box 16,383 815 port ewen, NY 12466 NMWT Land TrustPO Box 31-1721762 501 (C)(3) Ekwok Fly-fishing and 1388 assistant quide 10,000 Dillingham, AK 99576 academy NORTH CAROLINA 23-7188798 501 (C)(3) General Operations COUNCIL OF TROUT 7,866 UNLIMITED1204 Brittany Point Ct apex, NC 27502 OHIO COUNCIL OF TROUT 91-1928278 501 (C)(3) General Operations UNLIMITED12955 Walden 6,108 Oaks Dr chardon, OH 44024 93-1253141 OREGON COUNCIL OF 501 (C)(3) General Operations TROUT UNLIMITED22875 5,688 Nw Chestnut St hillsboro, OR 97124 PENNSYLVANIA COUNCIL 23-7188794 501 (C)(3) General Operations OF TROUT UNLIMITED 107 25,180 Simmons St dubois, PA 15801 23-7184512 SOUTHEASTERN 501 (C)(3) Watershed Restoration WISCONSIN CHAPTER OF 7,500 TROUT UNLIMITED18225 Hoffman Ave brookfield, WI 53045 TED TRUEBLOOD CHAPTER 52-1766250 501 (C)(3) Watershed Restoration OF TROUT UNLIMITED 7,000 23377 Hoskins Rd wilder, ID 83676 TENNESSEE COUNCIL OF 51-0225114 501 (C)(3) General Operations TROUT UNLIMITED1106 5,683 Melvın Ave maryville, TN 37803 TETON VALLEY CHAPTER 82-0528838 501 (C)(3) Watershed Restoration OF TROUT UNLIMITEDPO 9,000 Box 716 victor, ID 83455

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA COUNCIL OF TROUT UNLIMITEDPO BOX 1256 charlottesvle, VA 22902	23-7355308	501 (C)(3)	8,152				General Operations
WASHINGTON COUNCIL OF TROUT UNLIMITED2701 NE 148th Ave vancouver, WA 98684		501 (C)(3)	9,488				General Operations
WISCONSIN COUNCIL OF TROUT UNLIMITED1326 14TH Ave green bay, WI 54304	23-7188784	501 (C)(3)	9,563				General Operations

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information**

DLN: 93493133040711

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization TROUT UNLIMITED INC

Employer identification number

38-1612715

Pa	rt I Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III		,			
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc			1b		
2	Did the organization require substantiation prior to r					
	officers, directors, trustees, and the CEO/Executive	Directo	or, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the					
	Compensation committee	Г	Written employment contract			
	▼ Independent compensation consultant	⊽	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, for a related organization	Part VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo
ь	Participate in, or receive payment from, a supplemen	ntal non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	st comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	lıne 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d			7		Νo
8	Were any amounts reported in Form 990, Part VII, p					
	subject to the initial contract exception described in	Regs	section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

			, ,	. ,			_	
(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
CHRISTOPHER WOOD	(I) (II)	154,737 0	0	0	14,382 0	15,596 0	184,715 0	0 0
CHARLES GAUVIN	(ı) (ıı)	206,905 0	0	0	18,942 0	17,702 0	243,549 0	0
HILLARY COLEY	(I) (II)	143,981 0	0	0	13,599 0	15,596 0	173,176 0	0
Pieter Fosburgh	(I) (II)	146,222 0	0	0	13,479 0	15,596 0	175,297 0	0
STEVEN MOYER	(I) (II)	134,201 0	0	0	12,267 0	15,596 0	162,064 0	0
	_	-		-				

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
		TU is currently paying into an unqualified plan (457f) for its officers and key employees in which none of the officers or key employees vest in until January of 2012. The purpose of the Supplemental Benefit Plan is to provide the Executive with a lump sum cash benefit upon the termination of his or her employment or upon his or her death if his or her employment is terminated on account of death, if a benefit is payable under the Plan. For the first Fiscal Year during which an Executive participates in the Plan, the Employer shall credit 5% of such Executive's Compensation earned during such Fiscal Year, but after such Executive's Entry Date, to such Executive's Deferred Benefit Account (if such Executive is continuously employed by the Employer on a full-time basis from his Entry Date until the end of the Fiscal Year which includes such Executive's Entry Date). Any amounts credited to an Executive's Deferred Benefit Account shall be credited on the first day of the Fiscal Year following the Fiscal Year for which such credit is to be made. Any distribution made to an Executive or his Beneficiary pursuant to the Plan shall be deducted from such Executive's Deferred Benefit Account shall be credited with interest as of the date on which such distribution is made. During each Fiscal Year, each Executive's Deferred Benefit Account shall be credited with interest as of the last day of such Fiscal Year. Interest shall be credited on the amount that was in the account as of the first day of such Fiscal Year. The interest rate per annum which shall be credited to each Executive's Deferred Benefit Account for each Fiscal Year shall be the rate or rates specified by the Board of Directors of the Corporation for such Year. If the Executive Benefit Account for each Fiscal Year has been such as a

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M

Department of the Treasury

Internal Revenue Service

(Form 990)

	e of the organization IT UNLIMITED INC				Employer identificat	ion nu	mber	
11100	T ONLINED INC				38-1612715			
Pa	rt I Types of Property			•				
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of de reven	etermı	nıng	
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
9	Securities—Publicly traded .	Х	5	60,635	FMV			
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ► ()							
26	O ther ►()							
27	` 							
28	O ther ▶ ()							
29	Number of Forms 8283 received for which the organization compl				29	-	1	
20-	Duning the warm did the annual		- h.,h., h., h.,	uko uzuzukadou Dauk I. lonas	1 20 15-1 1		Yes	No
30a	During the year, did the organiza							
	must hold for at least three year			·	a to be used			ļ <u>.</u> .
	for exempt purposes for the enti					30a		No
Ь	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif	·		·		31	Yes	
32a	Does the organization hire or us contributions?				non-cash	222		N.a

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

b If "Yes," describe in Part II

describe in Part II

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

Software ID: **Software Version:**

EIN: 38-1612715

Name: TROUT UNLIMITED INC

DLN: 93493133040711

SCHEDULE 0 (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

2009

OMB No 1545-0047

Open to Public Inspection

Name of the organization TROUT UNLIMITED INC

Employer identification number

38-1612715

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		Someone becomes a member of TU by paying at least the regular annual membership price, which gives them one vote at the annual meeting. TU does not have any stockholders. The classes of memberships are at the discretion of the organization and can be changed at anytime.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		The nominating committee of the board presents the slate of board members at the annual meeting of TU for approval by the membership. Any member in good standing that is present or who has submitted a proxy in advance of the meeting is allowed to vote on the slate.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7b		The membership only approves the slate of board members and changes to the bylaw's as presented at the annual meeting

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		a copy of the form 990 is Made electronically available to all board members prior to submittal

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		A copy of the conflict of interest policy and a questionnaire concerning business relationships is sent to all board members each fiscal year. The board members return the completed questionnaire to the Nominating and Governance Committee of the Board of Trustees, who monitors compliance with the policy

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The Chairman of the Board appoints a compensation committee that consists of non-compensated Board members, including the Chairman. This committee meets at least annually with an independent salary consultant to review the compensation packages for the CEO and other key employees, and compare the packages to the general market and similar non-profit organizations. They also review the work plans and accomplishments of the staff and take into consideration the evaluations of key employees by the CEO when determining the final compensation. Compensation reviews for the CEO and other key employees are done in conjunction with the completion of the annual audit.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		TU posts its governing documents, conflict of interest policy, tax returns and financial statements on its wiebsite and will make copies of the documents available upon request

ldentifier	Return Reference	Explanation
form 990, part XI, line 2c		the process for overseeing the audit of the financial statements and selection of an independent accountant that audited the financial statements has been consistent with prior years

Additional Data

Software ID: Software Version:

EIN: 38-1612715

Name: TROUT UNLIMITED INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program	services				
(Code) (Expenses \$	557,066	including grants of \$) (Revenue \$	
•	- government affairs deals with works on issue areas such as	•		ne federal and state levels The gove trout and salmon programs	ernment

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
JON CHRISTIANSEN CHAIRMAN	5 00	Х		х				0	0	0
LARRY HARRIS VICE CHAIRMAN & CHAIRMAN OF NATIONA	5 00	Х		х				0	0	0
MARK GATES SECRETARY	5 00	Х		х				0	0	0
HARRIS HYMAN IV TREASURER	5 00	X		х				0	0	0
BILL EGAN TRUSTEE	5 00	Х						0	0	0
CHARLES CONN TRUSTEE	5 00	Х						0	0	0
EADDO KIERNAN TRUSTEE	5 00	Х						0	0	0
ELIZABETH STORER TRUSTEE	5 00	Х						0	0	0
GEORGE JENKINS TRUSTEE	5 00	Х						0	0	0
JIM ASSELSTINE TRUSTEE	5 00	Х						0	0	0
OAKLEIGH THORNE TRUSTEE	5 00	Х						0	0	0
KEVIN REILLY TRUSTEE	5 00	Х						0	0	0
KIRK OTEY TRUSTEE	5 00	Х						0	0	0
MARK ULLMAN TRUSTEE	5 00	Х						0	0	0
MATT CLIFFORD TRUSTEE	5 00	Х						0	0	0
MICHAEL W SLATER TRUSTEE	5 00	Х						0	0	0
MICK MCCORCLE TRUSTEE	5 00	Х						0	0	0
NANCY MACKINNON TRUSTEE	5 00	Х						0	0	0
PAUL DOSCHER TRUSTEE	5 00	Х						0	0	0
PAUL MACIEJEWSKI TRUSTEE	5 00	Х						0	0	0
RICH MURPHREE TRUSTEE	5 00	Х						0	0	0
SHARON LANCE TRUSTEE	5 00	Х						0	0	0
SHERRY BRAINERD TRUSTEE	5 00	Х						0	0	0
STEVE STRAINBURG TRUSTEE	5 00	Х						0	0	0
WALLACE HENDERSON TRUSTEE	5 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) (C) A verage Position (check all that apply) per							(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
THOMAS DANKO TRUSTEE	5 00	X						0	0	0	
TOM ANACKER TRUSTEE	5 00	X						0	0	0	
VALERIE OHRSTROM TRUSTEE	5 00	Х						0	0	0	
JOHN WILLIS TRUSTEE	5 00	Х						0	0	0	
KAI ANDERSON TRUSTEE	5 00	Х						0	0	0	
MIKE DOMBECK TRUSTEE	5 00	Х						0	0	0	
RICHARD JOHNSON TRUSTEE	5 00	Х						0	0	0	
CHRISTOPHER WOOD PRESIDENT AND CEO	40 00	Х		х				154,737	0	29,978	
CHARLES GAUVIN President Emeritus & Trustee	40 00	Х		х				206,905	0	34,538	
HILLARY COLEY VICE PRESIDENT/CFO/cao	40 00			х				143,981	0	29,195	
Preter Fosburgh VP of Development	40 00					Х		146,222	0	29,075	
STEVEN MOYER VICE PRESIDENT OF GOVERNMENT AFFAIR	40 00					х		134,201	0	27,863	
Robert Masonis VP of Western Conservation	40 00					х		103,775	0	13,952	

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
fulfillment	1,354,176	831,808		522,368
Printing and publicatio	967,377	667,884	265	299,228
Restoration Materials	445,153	445,153		
Water leases	139,505	139,505		
LIST RENTAL	36,093	8,223		27,870