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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

गीरीएने को ताञ्चल त्विनिञ्ज्ञ्हारी

A	For the 2	2011 calen	dar year, or tax year beginning , 2011, and ending		·	. 1		
В	Check if ap	plicable	С		D Employ	yer Identii	fication Number	
	X Addres	ss change	AMERICAN FLY FISHING TRADE ASSOCIATION,	1	82-	04990	014	
	-	change	INC.	Γ	E Telepho	one numb	er	
	Initial	•	321 EAST MAIN STREET, #300	i	406	-522-	-1556	
	Termir		BOZEMAN, MT 59715	F				
	H			1	G 0		502	2,627.
	\vdash	ded return	F Name and address of principal officer	H(a) Is this a	G Gross r			
	Applic	ation pending		H(b) Are all a			rates? Ye	=
_			SAME AS C ABOVE		ttach a list			
<u> </u>		npt status	501(c)(3) X 501(c) (6) ◀ (Insert no.) 4947(a)(1) or 527			_		
<u>J</u> _	Websi	-		H(c) Group ex				
K		organization	X Corporation Trust Association Other ► L Year of Formation	on 2008	M :	State of le	gal domicile M	<u>T</u>
Pe		Summar						
	1		be the organization's mission or most significant activities: ${\tt TO_PROMOT}$	<u> E_THE</u>	<u>SUSTA</u>	<u>INED</u>	<u>GROWTH</u>	<u>OF</u>
9	L_TI	HE FLY	FISHING INDUSTRY.		. _			
Activities & Governance				-	· -	- 		
Į.								
. 6			if the organization discontinued its operations or disposed of more	re than 25	% of its		sets	1 0
ું જ	1		oting members of the governing body (Part VI, line 1a)			3 4		15 15
es	1		of individuals employed in calendar year 2011 (Part V, line 2a) .			5		$\frac{15}{0}$
]			of volunteers (estimate if necessary)		•	6		2
- ₩	1		ed business revenue from Part VIII, column (C), line 12		•	7a		0.
-	1		business taxable income from Form 990-T, line 34			7b		0.
ANNE PER PER PER PER PER PER PER PER PER PE				Pri	or Year		Current '	
Z	8 Co	ntributions	and grants (Part VIII, line 1h)		74,0	000.		3,968.
			rice revenue (Part VIII, line 2g).		440,8			3,463.
∑ ₹			come (Part VIII, column (A), lines 3,4, and 7d)			53.		196.
W.E	11 Ot	her revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 90 10c, and 11e).		1	50.		
			- add lines 8 through 11 (must equal Part VIII - column (A), line 12)		515,1	16.	502	2,627.
	13 Gr	ants and si	milar amounts paid (Part IX, column (A), lines 1-3) ப					
	14 Be	nefits paid	to or for members (Part IX, columnic(A), line (B) 17.2013.					
	15 Sa	laries, othe	er compensation, employee benefits (Part IX, column (A), lines 5-10).		180,7	732.	104	1,516.
Expenses			104		•			
ē	L Ta	tal fundan	fundraising fees (Part IX, column (A), line 11e). sing expenses (Part IX, column (B), line 25)					
쬤					240 (0.6	201	
		•	es (Part IX, column (A), lines 11a-11d, 11f-24e)		240,6			2,624.
	•	-	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		421,3			7,140.
		venue less	expenses. Subtract line 18 from line 12	1	93,7			487.
9 6				Beginning			End of Y	
9 E			(Part X, line 16)		232,3		34	7,824.
Net Assets Fund Balan	,		s (Part X, line 26)	<u></u>		0.		0.
_			fund balances Subtract line 21 from line 20	<u> </u>	232,3	337.	34	<u>7,824.</u>
		Signatur						
Und	ler penalties iplete Decla	of perjury, I de tration of preparation	eclare that I have examined this return, including accompanying schedules and statements, and to t arer (other than officer) is based on all information of which preparer has any knowledge	he best of my	knowledge	and belo	ef, it is true, corre	ct, and
			3		-2/./	1.2		
c:		Signatur	re of office	Date	9// 	_ر_ر		
Sig He	jii ro		Seniamin Dulis Possident					
110		Type or	print name and title					
			reparer's name Preparer's signeture Date		Shoot:	, TE	PTIN	
		1	160,161		Check _	J"		7
Pa				در کر ا ه	elf-employ	ea 11	20136671	<u>'</u>
	eparer e Only	Firm's name				. 04	0247000	
US	e Only	Firm's addre					0347988	-
			BOZEMAN, MT 59715		Phone no	(406		_
			is return with the preparer shown above? (see instructions)	<u> </u>	<u></u>		X Yes	No
BA.	A For Pa	perwork R	eduction Act Notice, see the separate instructions. TEEA	A0113L 08/1	8/11		Form 9	90 (2011)

Form 990 (2011) AMERICAN FLY FISHING TRADE ASSOCIATION,	82-0499014	Page 2
Part III Statement of Program Service Accomplishments		
Check if Schedule O contains a response to any question in this Part III .		[]
1 Briefly describe the organization's mission: TO PROMOTE THE SUSTAINED GROWTH OF THE FLY FISHING INDUSTRY.	~~	
2 Did the organization undertake any significant program services during the year which were not listed Form 990 or 990-EZ?	on the prior	X No
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 s	ervices? Yes	s X No
If 'Yes,' describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program ser Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the others, the total expenses, and revenue, if any, for each program service reported.	vices, as measured by amount of grants and a	expenses. Allocations to
4a (Code:) (Expenses \$ 118,619. including grants of \$) (PRODUCE THE FLY FISHING RETAILER WORLD TRADE EXPO WHICH CONNECTS OF FLY FISHING RELATED INDUSTRY MEMBERS TO CONDUCT BUSINESS IN A FRIENDLY ATMOSPHERE. SINCE 1998, MANUFACTURERS, SUPPLIERS, RETA GUIDES, OUTFITTERS, DISTRIBUTORS, IMPORTERS, EXPORTERS, PRESS, A INFLUENCERS HAVE CONVERGED AT THIS SHOW TO CHART THE FUTURE OF T	A TARGETED AND PROFESSIONAL AND INDUSTRY	YET
4b (Code:) (Expenses \$ 36,658. including grants of \$) (ORGANIZE THE YOUTH AND FAMILY CASTING CALL, WHICH IS A YOUTH FISEXPO. AFFTA PROVIDES INSTRUCTORS AND GEAR FOR PARTICIPANTS AND CHILDREN GET THEIR NATIONAL PARK SERVICE JUNIOR RANGER BADGE THE AS WATER QUALITY TESTING, FLY CASTING OR FLY TYING, FISH ART SCATTANKS AND MUCH MORE. PARTNER AGENCIES AND ORGANIZATIONS SET UP LEARN ABOUT HOW THEY ARE HELPING FISH AND FISHING ACROSS THE COUR ARCOURT AND ACCORDED TO THE COUR ARCOURT AND	HING AND EDUCA WHEN NOT FISHI COUGH ACTIVITIE VENGER HUNTS, DISPLAYS FOR F	NG, S SUCH TOUCH
4c (Code:) (Expenses \$ 5,043. including grants of \$) (TAKE PART IN THE INTERNATIONAL SPORTSMAN SHOW. THIS SHOW INCLUDE ACTIVITIES AND PROMOTIONAL EVENTS FOR VARIOUS OUTDOOR SPORTSMAN WAS A MAIN SPONSOR FOR THE FLY FISHING SHOW OF THIS EVENT AND PARTICLE ASSOCIATED WITH THE FLY FISHING ACTIVITES.	ES ALL TYPES C ENTHUSIASTS.	8,675.))F AFFTA
4d Other program services. (Describe in Schedule O.)	 	
(Expenses \$ including grants of \$) (Revenue \$		`
4e Total program service expenses ► 160,320.		

Part V Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A. 1 Х . . 2 Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Х 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III Х 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D. Part I 6 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part III 8 Х 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 X Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V10 Х If the organization's answer to any of the following questions is 'Yes', then complete Schedule D. Parts VI. VII. VIII. IX. or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI. . . . 11 a Х **b** 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* 11b Х c 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 11 c Х 11 d Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X Х 11 e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X. 11 f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII X 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E X 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV 14b Х 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 United States? If 'Yes,' complete Schedule F, Parts II and IV. 15 Х 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 United States? If 'Yes,' complete Schedule F, Parts III and IV Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.... 18 Х 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. Х 19 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20 Х b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20 b

Form 990 (2011) AMERICAN FLY FISHING TRADE ASSOCIATION,
Partity Checklist of Required Schedules (continued)

			Yes	No
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 IL	21		X
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		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		X
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
	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		
25	a 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		
	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		
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		_X
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):			
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
İ	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I .	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		_X
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? If 'Yes,' complete Schedule R, Part I.	33		Х
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		х
3 5 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ı	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		_X_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
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		X
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	х	
AA		Form	99n <i>(</i> 2	2011)

	Check if Schedule O contains a response to any question in this Part V			丄
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 4			
Ł	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?.	1 c	X	
2 a	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			
Ł	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
ь	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь		
4 a	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		Х
b	olf 'Yes,' enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	of 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?.	5с		<u> </u>
6 a	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		Х
b	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		
d	If 'Yes,' indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	ı If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9ь		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1.		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	استين	
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	olf 'Yes' has it filed a Form 720 to report these payments? If 'No ' provide an explanation in Schedule O	14b		

Part VI 'Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? ... SEE SCHEDULE O 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X members of the governing body? SEE SCHEDULE O. b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 a a The governing body? X 8ь **b** Each committee with authority to act on behalf of the governing body? ... Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates?. . . . 10a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a 15b **b** Other officers of key employees of the organization. If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ► NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Upon request Another's website Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ BENJAMIN BULIS_321_EAST_MAIN_STREET, STE_300_BOZEMAN_MT_59715_406-522-1556

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

Check this box if neither the organization	on nor any	relate	ed o	rgan	izat	ion co	mpe	ensated any current of	fficer, director, or trus	tee.
-				((C)					
(A) Name and title	(B) Average hours per week	unles			(D) Reportable compensation from	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation			
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/10 99 -MISC)	from the organization and related organizations
(1) JIM KLUG										
CHAIRMAN	2	X		Х	L.,			0.	0.	<u> </u>
(2) GARY JENNINGS	ŀ									
VICE CHAIR	2	Х		X				0.	0.	0.
(3) SCOTT HARKINS										
TREASURER	2	Х		X				0.	0.	0.
(4) JIM LEPAGE	J									
SECRETARY	2	Х		X				0.	0.	0.
(5) LARRY BARRETT										
DIRECTOR	2	X						0.	0.	0.
(6) ANDREW BENNETT										
DIRECTOR	_2	Х						0.	0.	0.
(7) DUSTIN CARLSON										
DIRECTOR	2	X						0.	0.	0.
(8) RILEY COTTER										
DIRECTOR	2	X						0.	0.	0.
(9) KATE FOX										
DIRECTOR	2	X						0.	0.	0.
(10) MIKE GAWTRY										
DIRECTOR	2	Х						0.	0.	0.
(11) PAT PENDERGAST										
DIRECTOR	2	Χ						0.	0.	0.
(12) THOMAS SADLER										
DIRECTOR	2	X						0.	0.	0.
(13) JEFF WATT										
DIRECTOR	2	Х						0.	0.	0.
(14) JEFF WIERINGA										
DIRECTOR	2	Х					i	0.	0.	0.

PartiVII: Section A. Officers, Directors, Trust	ees, l	√ey	Em	ıplo	ye	es,	and	d Highest Com	pensated Em	ployees (cont)
			-		C)					
(A) Name and title	(B) Average hours per	box	, unle: cer an	heck ss pe id a d	rson Irect	than is bot or/trus	h an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organization	s compensation
	week (describ	or dir	instrt	Officer	Key e	empl:	Form	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related
	per week (describ e hours for related organi- zations	ector	nstitutional trustee	er	employee	Highest compensate employee	ģ			organizations
	related organi-	ruste	trus		ě	mpen				
	Sch O)		tee			sated				
(15) JIM MURPHY DIRECTOR	2	X						0.	0	. 0.
(16) RANDI SWISHER PRESIDENT	40			х				104,516.	O	
(17)										
(18)										
(19)										
(20)										
(21)				_						
(22)					-					
(23)									····	
(24)			7	-					******	
(25)										
1 b Sub-total				<u> </u>			•	104,516.	0	. 0.
c Total from continuation sheets to Part VII, Section	Α						▶	0.	0	. 0.
d Total (add lines 1b and 1c)							<u> </u>	104,516.	0	
 Total number of individuals (including but not limited from the organization ■ 1 	to the	se II	stea	abo	ove)	wno	o rec	ceived more than	\$100,000 of repo	rtable compensation
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trusi	tee, al	key	emp	oloye	ee, c	r hi	ghest compensate	ed employee	3 X
4 For any individual listed on line 1a, is the sum of rej	ortable	e coi	npei	nsat	lion	and	oth	er compensation f	rom	
the organization and related organizations greater the	nan \$15	50,00	00? /	lf 'Y	es'	com	olet	e Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue co	mpens	satio	n fro	m a	any '	unre	late	d organization or i	individual	
for services rendered to the organization? If 'Yes,' c Section B. Independent Contractors	omplet	e Sc	hedi	ule .	J foi	suc	h p	erson		. 5 X
Complete this table for your five highest compensate compensation from the organization Report compensation.	ed inde isation	pend for t	lent he c	con	itrac ndar	tors yea	tha r er	t received more th	an \$100,000 of the organization	n's tax year.
(A) Name and business address								(B) Description o		(C) Compensation
RANDI SWISHER 17634 E POWERS PLACE CENTENNIAI		800	 l 5				\dashv	MANAGEMENT	1 Services	104,516.
O Tabel combas of a law in the control of the contr							ᆜ			
2 Total number of independent contractors (including l \$100,000 in compensation from the organization ►	_	limi	ed t	o th	ose	iiste	ed a	pove) who receive	d more than	
1									1400	بأهلا ويطار وسيجيب أوعلى بيناه

Pa	rt VIII Statement 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
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues				
Ser	h Total. Add lines 1a-1f	68,968.			
- H	Business Code				
ICE REVEN	2a EXHIBIT AND TRADE SHOWS 900099 b c	433,463.	433,463.		
Š	d				-
AM S	e				
OGR	f All other program service revenue				
<u> </u>	g Total. Add lines 2a-2f	433,463.			
	 Investment income (including dividends, interest and other similar amounts)	196.	196.		
	5 Royalties				
	7 a Gross amount from sales of assets other than inventory. (i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses . c Gain or (loss)				
	d Net gain or (loss)		·		
ENUE	8a Gross income from fundraising events (not including \$				
OTHER REVENUE	of contributions reported on line 1c). See Part IV, line 18 a				
ОТНЕ	b Less: direct expenses b c Net income or (loss) from fundraising events		-		
	9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b				
	b Less: direct expenses b	1	j		
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns				
	and allowances				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	11а				
		-			
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	502,627.	433,659.	0.	0.

Ranklix Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a response to any question in this Part IX								
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21								
2	Grants and other assistance to individuals in the United States. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	104,516.							
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.							
7	Other salaries and wages								
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)								
9	Other employee benefits								
10	Payroll taxes .								
11	Fees for services (non-employees):								
a	Management								
Ł	Legal	250.							
c	: Accounting	1,215.							
c	I Lobbying	12,000.							
6	Professional fundraising services See Part IV, line 17								
f	Investment management fees								
ç	Other	86,765.							
12	Advertising and promotion	9,888.							
13	Office expenses	1,707.							
14	Information technology	1,009.							
15	Royalties								
16	Occupancy .								
17	Travel .	12,931.							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	124,547.							
20	Interest			<u> </u>	- 				
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	966.							
23		1,359.							
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
2	BANK CHARGES	11,888.							
	MEMBERSHIPS AND DUES	9,938.							
	TELEPHONE AND INTERNET	6,538.			·				
	POSTAGE AND SHIPPING	1,222.							
	All other expenses	401.			· · · · · · · · · · · · · · · · · · ·				
	Total functional expenses. Add lines 1 through 24e	387,140.		1					
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.								
	Check here ►		aa.						

Ka	ırt X	器 Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	33,900		149,446.
	2	Savings and temporary cash investments .	195,881	. 2	196,077.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	710.
	5	Receivables from current and former officers, directors, trustees, key er and highest compensated employees. Complete Part II of Schedule L	nployees,	5	
	6	Receivables from other disqualified persons (as defined under section 4 persons described in section 4958(c)(3)(B), and contributing employers sponsoring organizations of section 501(c)(9) voluntary employees' benefits the section 501 (c)(9) and contributing employees benefits the section 501 (c)	958(f)(1)), and eficiary		
		organizations (see instructions)		6	
A S S E T S	7	Notes and loans receivable, net		7	
E	8	Inventories for sale or use		8	
T S	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	4,831.		
		Less: accumulated depreciation 10b	3,241. 2,556	. 10c	1,590.
	11	Investments – publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	1.
	16	Total assets. Add lines 1 through 15 (must equal line 34).	232,337	. 16	347,824.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue	· ··	19	
Ļ	20	Tax-exempt bond liabilities		20	
Å	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
AB I L I	22	Payables to current and former officers, directors, trustees, key employenghest compensated employees, and disqualified persons. Complete P of Schedule L	ees, art II	22	
Ī	23	Secured mortgages and notes payable to unrelated third parties		23	
E S	l	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third pand other liabilities not included on lines 17-24). Complete Part X of Sc	parties,	25	·
	26	Total liabilities. Add lines 17 through 25.		. 26	0.
N		Organizations that follow SFAS 117, check here ► X and complete	lines 977		
Ē		27 through 29 and lines 33 and 34.			
A S	27	Unrestricted net assets	232,337	. 27	347,824.
ASSETS	28	Temporarily restricted net assets		28	
	29			29	
R		Organizations that do not follow SFAS 117, check here ▶ and com	plete (1997)		
		lines 30 through 34.			
FUZD	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ļ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
BALAZCES	33	Total net assets or fund balances	232,337	. 33	347,824.
Ē	34	Total liabilities and net assets/fund balances .	232,337		347,824.

BAA

Form **990** (2011)

Form 990 (2011) AMERICAN FLY FISHING TRADE ASSOCIATION, 82-049	99014 F	age 12
Part XI Reconciliation of Net Assets		
Check if Schedule O contains a response to any question in this Part XI	<u> </u>	\perp
1	1	
1 Total revenue (must equal Part VIII, column (A), line 12)		627.
Total expenses (mast educar are by column (by mile 25)		140.
3 Revenue less expenses. Subtract line 2 from line 1		487.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		337.
5 Other changes in net assets or fund balances (explain in Schedule O).	<u> </u>	0.
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)).	347,	824.
Part XII: Financial Statements and Reporting		
Check if Schedule O contains a response to any question in this Part XII		\perp
1 Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O	Yes	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b Were the organization's financial statements audited by an independent accountant?	2b	<u> </u>
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a 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.	audit, 2c	
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	on a	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	gle . 3a	X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require or audits, explain why in Schedule O and describe any steps taken to undergo such audits	d audit 3b	2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047 2011

මැඩ්ජු හ අනුම Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.

► 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 V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C.
 - Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
 - Section 527 organizations: Complete Part I-A only.

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

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

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

• ;	Section 501(c)(4), (5), or (6) o	organizations: Complete Part III.		•	••
	e of organization	, <u>, </u>		Employer identif	ication number
AM	ERICAN FLY FISHING	TRADE ASSOCIATION,		82-04990	14
		rganization is exempt under secti	on 501(c) or is a	section 527 organ	ization.
1	Provide a description of the	organization's direct and indirect political of	campaign activities in	Part IV.	
2	Political expenditures	•			\$
	Volunteer hours .				
Pa	THE Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955		\$
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶	\$
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4:	a Was a correction made?				. Yes No
	b If 'Yes,' describe in Part IV				
Pai	Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt function	n activities	\$
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt	\$
3	Total exempt function expen	ditures Add lines 1 and 2. Enter here and		▶	\$
4	Did the filing organization file	e Form 1120-POL for this year?			. Yes X No
5	organization made payments amount of political contributi	and employer identification number (EIN) s. For each organization listed, enter the ar- ons received that were promptly and direct il action committee (PAC). If additional spa	mount paid from the f tly delivered to a sepa	iling organization's fui arate political organiza	which the filing nds. Also enter the ation, such as a senarate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
-					† · · · · · · · · · · · · · · · · · · ·

(6)

chedule C (Form 990 or 990-EZ) 20	11 AMERICAN FL	Y FISHING TRADE	ASSOCIATION,	82-0499	
Complete if section 501	the organizatior (h)).	is exempt under so	ection 501(c)(3) and	filed Form 5768 (el	ection under
A Check ► if the fill	ng organization belo	ngs to an affiliated group	(and list in Part IV each	affiliated group membe	r's name,
address	, EIN, expenses, and	I share of excess lobbyin	ig expenditures).		
B Check ► If the file	ng organization chec	ked box A and 'limited c	ontrol' provisions apply.		
(The term	Limits on Lobbyi 'expenditures' mea	ng Expenditures ns amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expendit	tures to influence pul	blic opinion (grass roots	lobbying)		
b Total lobbying expendit	tures to influence a le	egislative body (direct lot	bbying)		
c Total lobbying expendit	tures (add lines 1a ai	nd 1b)			
d Other exempt purpose	expenditures.				
e Total exempt purpose e	expenditures (add lin	es 1c and 1d)			
f Lobbying nontaxable ar both columns	mount Enter the ame	ount from the following to	able in		
If the amount on line 1e, co	lumn (a) or (b) is T	he 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 exces	ss over \$500,000.		
Over \$1,000,000 but not over		\$175,000 plus 10% of the exces			
Over \$1,500,000 but not over	\$17,000,000	\$225,000 plus 5% of the excess	s over \$1,500,000.		
Over \$17,000,000		\$1,000,000.		<u> </u>	
g Grassroots nontaxable					
h Subtract line 1g from li					
i Subtract line 1f from lin	ne 1c. If zero or less,	enter -0	{		
j If there is an amount of section 4911 tax for this	ther than zero on eit s year?		the organization file Form	m 4720 reporting	Yes No
(Som	se organizations that	l-Year Averaging Period t made a section 501(h) ε s below. See the instruct	Under Section 501(h) election do not have to co tions for lines 2a through	omplete all of the five 1 2f.)	
	Lobby	ying Expenditures Durin	g 4-Year Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying					

					
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a ′es	No		(b) nount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	\dashv				
d Mailings to members, legislators, or the public?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Partill A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5),	or			
section 501(c)(6).					
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR answered 'Yes.'	<u>.</u> (5).	or se	. 3 ection	Yes X 23, is	X X
1 Dues, assessments and similar amounts from members	. T	1		68,4	150.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				00,0	
a Current year		2a		12,0	
b Carryover from last year		2b			13.
c Total	╟	2c		15,1	$\frac{13.}{214.}$
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?.		4			99.
5 Taxable amount of lobbying and political expenditures (see instructions)		5			0.
Part W Supplemental Information					
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part Also, complete this part for any additional information.			•	ne 1.	

Schedule C (Form 990 or 990-EZ) 2011 AMERICAN FLY FISHING TRADE ASSOCIATION,	82-0499014	Page 4
PartIV Supplemental Information (continued)		
		
	. _	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Openio Public Inspection

AMERICAN FLY FISHING TRADE ASSOCIATION,

Employer Identification number

IN				82-0499014
Pa	ায়া Organizations Maintaining Donoi	Advised Funds or Other	r Similar Funds or A	ccounts. Complete if
	the organization answered 'Yes' to	o Form 990, Part IV, line	6.	·
		(a) Donor advised fu	unds (t) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
_				
5	Did the organization inform all donors and dor funds are the organization's property, subject	to the organization's exclusive	legal control?	Yes No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or dono	or advisor, or for any othe	Yes No
Pai	tilli Conservation Easements. Compl	ete if the organization and	swered 'Yes' to Form	990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that	at apply).	
	Preservation of land for public use (e.g., re	ecreation or education)	Preservation of an histo	rically important land area
	Protection of natural habitat		Preservation of a certific	ed historic structure
	Preservation of open space	_	_	
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified conservation	n contribution in the form	of a conservation easement on the
				Held at the End of the Tax Year
ā	a Total number of conservation easements		2a	
1	Total acreage restricted by conservation easer	ments	2b	
•	Number of conservation easements on a certif	ied historic structure included in	n (a)	
•	d Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, and	d not on a historic	
3	Number of conservation easements modified, tax year ►	transferred, released, extinguis	hed, or terminated by the	organization during the
4	Number of states where property subject to co	nservation easement is located	! ►	
5	Does the organization have a written policy rea and enforcement of the conservation easemen	garding the periodic monitoring	, inspection, handling of v	riolations, · · · · Yes No
6	Staff and volunteer hours devoted to monitorin			
7	Amount of expenses incurred in monitoring, in	specting, and enforcing conser	vation easements during	the year
Ω	Does each conservation easement reported on	line 2(d) above satisfy the reg	uirements of section	
٥	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.	o the organization's financial st	venue and expense stateme atements that describes t	ent, and balance sneet, and the organization's accounting for
Pai	College Organizations Maintaining College	ctions of Art, Historical T	reasures, or Other S	imilar Assets.
	Complete if the organization answ	vered 'Yes' to Form 990,	Part IV, line 8.	
12	If the organization elected, as permitted under	SFAS 116 (ASC 958), not to re	eport in its revenue stater	nent and balance sheet works of
	art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finan	s held for public exhibition, educ	cation, or research in furth	nerance of public service, provide,
ŧ	If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items:	d for public exhibition, educatio	on, or research in furthera	nce of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1		▶\$
	(i) Revenues included in Form 990, Part VIII,(ii) Assets included in Form 990, Part X .			▶\$
2	If the organization received or held works of ar amounts required to be reported under SFAS	t, historical treasures, or other	similar assets for financia	al gain, provide the following
ā				▶\$
Ŀ	Revenues included in Form 990, Part VIII, line a Assets included in Form 990, Part X			>\$

Schedule D (Form 990) 2011 AMER							82-049			Page 2
Part III Organizations Mainta	ining Colle	ctions	of Art, Histo	orical Tr	easures, or (Other Si	milar Ass	ets (c	<u>ontinu</u>	ied)
3 Using the organization's acquisit items (check all that apply):	ion, accession	, and o	ther records, ch	eck any of	f the following t	hat are a	significant u	se of its	s collec	tion
a 🔲 Public exhibition			d Loan	or exchan	ge programs					
b Scholarly research			e Other		<u></u>					
c Preservation for future gene										
4 Provide a description of the orga Part XIV.				_	_			se in		
5 During the year, did the organiza assets to be sold to raise funds	ation solicit or rather than to	receive be mair	donations of ar	t, historica	al treasures, or anization's colle	other simi	lar . i	Yes	Γ	No
Part IV Escrow and Custodia line 9, or reported an	l Arrangem	ents.	Complete if t	the orga				m 990), Part	iV,
1 a Is the organization an agent, tru included on Form 990, Part X?			•		butions or othe	r assets n	ot .	Yes		No
b If 'Yes,' explain the arrangement	t in Part XIV a	nd com	plete the followi	ıng table:						
								Amoun	<u>t </u>	
c Beginning balance		•			• • • • •	1c				
d Additions during the year	•	•				1 d				
e Distributions during the year	•••	•	••		• • •	1e				
f Ending balance2a Did the organization include an a	amount on For	m 990	Part X line 217	· · · · · ·	•••••			Yes	T	No
b If 'Yes,' explain the arrangement		111 550,	Tarra, inic 21:	• •• •					L	_].,,
Part V Endowment Funds. Co		ne ora	anization ans	swered "	Yes' to Form	990. Pa	art IV. line	10.		
	(a) Current		(b) Prior year) Two years back		ee years back	(e)	Four year:	s back
1 a Beginning of year balance					- 11 -			30		}
b Contributions								7 - 10 .		•
c Net investment earnings, gains, and losses										; ' . ~ t
d Grants or scholarships								经验	不改	25.5
e Other expenditures for facilities and programs					· · · · · · · · · · · · · · · · · · ·				影響	
f Administrative expenses									~ * \\^-3	
g End of year balance	L				· · · · · · · · · · · · · · · · · · ·	<u> </u>		4.26.	- Alek A	201
2 Provide the estimated percentag		nt year	end balance (lin	ne 1g, colu	ımn (a)) held as	S :				
a Board designated or quasi-endo	wment 🟲		[%]							
b Permanent endowment			8							
c Temporarily restricted endowmer		d agual	_ `							
The percentages in lines 2a, 2b,		-								
3a Are there endowment funds not organization by:	in the possess	sion of t	he organization	that are h	ield and admini	stered for	the		Yes	No
(i) unrelated organizations.	•	•			· · · · · ·			3a(i)		
(ii) related organizations .								3a(ii)		
b If 'Yes' to 3a(II), are the related	=				?	• •	••	3b		
4 Describe in Part XIV the intende					0.10				-	
Part VI Land, Buildings, and Description of property			t or other basis		t or other	(c) Accur	nulated	(4) [Book va	
Description of property			vestment)		(other)	depred		(u) i	300K Va	e
1a Land						\$29.00				
b Buildings										
c Leasehold improvements										
d Equipment					4,831.		3,241.		1,	,590.
e Other				. =						
Total. Add lines 1a through 1e (Colum	nn (d) must ed	ual For	m 990, Part X, (column (B), line 10(c).).	· · · · · ·	· · · •			590.
BAA							Sched	ule D (F	orm 99	0) 2011

PartVI	Investments - Other Securities. See	Form 990, Part X,	ine 12.	N/A	
	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valu Cost or end-of-year ma	ation: arket value
(1) Financ	cial derivatives				
	y-held equity interests				
(3) Other					<u> </u>
(c)					
			,		
<u>F</u>					
<u>(G)</u>				· · · · · · · · · · · · · · · · · · ·	
(I) (H)					
	umn (b) must equal Form 990 Part X, column (B) line 12.)				
	Innvestments – Program Related. See	Form 990, Part X.	line 13.	N/A	
10 CDG VW	(a) Description of investment type	(b) Book value	1110 101	(c) Method of valu	ation.
		(2) 20011 1212		Cost or end-of-year ma	rket value
(1)	<u> </u>	,-			
(2)					
(3)				······································	
				<u> </u>	
(5)					
<u>(6)</u>					
				·-,	
<u>(8)</u> (9)					
(10)				-	
. (10)					
Total (Colum	mn (h) must equal Form 990 Part Y column (R) line 13)	[
	mn (b) must equal Form 990, Part X, column (B) line 13) Other Assets. See Form 990, Part X,	ne 15. N/A	· · · · · · · · · · · · · · · · · · ·		
	Other Assets. See Form 990, Part X,	Ine 15. N/A scription	· · · · · · · · · · · · · · · · · · ·		(b) Book value
	Other Assets. See Form 990, Part X,				(b) Book value
Part IX	Other Assets. See Form 990, Part X,				(b) Book value
Part DX	Other Assets. See Form 990, Part X,				(b) Book value
(1) (2) (3) (4)	Other Assets. See Form 990, Part X,				(b) Book value
(1) (2) (3) (4) (5)	Other Assets. See Form 990, Part X,				(b) Book value
(1) (2) (3) (4) (5) (6)	Other Assets. See Form 990, Part X,				(b) Book value
(1) (2) (3) (4) (5) (6) (7)	Other Assets. See Form 990, Part X,				(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. See Form 990, Part X,				(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. See Form 990, Part X,				(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, (a) De	scription			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Other Assets. See Form 990, Part X, (a) De	scription 3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, (a) De olumn (b) must equal Form 990, Part X, column (l) Other Liabilities. See Form 990, Part X	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	scription 3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Other Assets. See Form 990, Part X, (a) De olumn (b) must equal Form 990, Part X, column (l) Other Liabilities. See Form 990, Part X	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Collegative) [Paritix X (2)	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colpanix) (1) Fede (2) (3) (4)	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co [Part X] (1) Fede (2) (3) (4) (5)	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colpanix) (1) Fede (2) (3) (4)	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (College (2) (3) (4) (5) (6) (7)	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co [Park)X (1) Fede (2) (3) (4) (5) (6)	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (College	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (College	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colored	Other Assets. See Form 990, Part X, (a) De Olumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15.)			

Schedule D (Form 990) 2011 AMERICAN FLY FISHING TRADE ASSOCIATION,

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

82-0499014

Page 3

Sche	edule D (Form 990) 2011 AMERICAN FLY FISHING TRADE ASSOCIATION,	82-0499014	Page 4
	t-XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	N/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)		
3	Excess or (deficit) for the year Subtract line 2 from line 1.		
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities	•	
6	Investment expenses	· · 	
7	•		
,	Prior period adjustments	·	
0	Other (Describe in Part XIV.)	•	
10	Total adjustments (net) Add lines 4 through 8	·	
10 Dái	*XIII Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Poturn N/A	
		1 1	
	Total revenue, gains, and other support per audited financial statements	82045 E	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
	Net unrealized gains on investments		
	Donated services and use of facilities		
	Recoveries of prior year grants		
	Other (Describe in Part XIV)		
	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV.)		
	Add lines 4a and 4b.	. 4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return N/A	
	Total expenses and losses per audited financial statements	. 1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	Donated services and use of facilities 2a		
ŀ	Prior year adjustments		
•	: Other losses		
	Other (Describe in Part XIV.)		
•	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
ā	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
	Other (Describe in Part XIV.)		
	Add lines 4a and 4b.	4c	
-	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5	
-	Supplemental Information		
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par V, line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp additional information.	plete this part to provid	de
			_

TEEA3304L 05/25/11

BAA

Schedule **D** (Form 990) 2011

Schedule D (Form 990) 2011 AMERICAN FLY FISHING TRADE ASSOCIATION, RartXIV: Supplemental Information (continued)	82-0499014	Page 5
RartXIV# Supplemental Information (continued)		
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 2011 මලින් මෙන්න මෙනෙක්ව

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Name of the organization AMERICAN FLY FISHING TRADE ASSOCIATION, INC.	Employer identification number 82-0499014
FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR	SHAREHOLDER
TO QUALIFY AS A MEMBER, AN INDIVIDUAL OR ENTITY MUST BE EN	GAGED IN THE BUSINESS OF
MANUFACTURING, DISTRIBUTING, WHOLESALING, OR RETAILING FLY	FISHING TACKLE OR BE A
PERSON OR ENTITIY ENGAGED IN AN ALLIED OR SUPPORTING BUSING	ESS, OR BE A PERSON OR
ENTITY ENGAGED IN THE PROMOTION OF THE FLY FISHING SPORT AS	S THE BOARD OF DIRECTORS
MAY APPROVE.	
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT	GOVERNING BODY
EACH MEMBER, OTHER THAN AN AFFILIATE MEMBER, SHALL BE ENTI:	TLED TO ONE VOTE ON EACH
MATTER SUBMITTED BY THE BOARD OF DIRECTORS TO A VOTE OF THE	E MEMBERS. THE BOARD OF
DIRECTORS CONSISTS OF 15 ELECTED MEMBERS. DIRECTORS ARE EL	LECTED BY A MAJORITY VOTE,
WITH THOSE DIRECTORS RECEIVING THE GREATEST NUMBER OF VOTES	S CONSIDERED ELECTED
DIRECTORS.	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
ALL APPLICABLE TAX FORMS ARE REVIEWED BY THE BOARD OF DIREC	CTORS PRIOR TO FILING.
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLIC	LY AVAILABLE
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE TO) THE PUBLIC UPON REQUEST
AND APPROVAL OF THE BOARD.	

Form 8868 (Rev. 1-2012)				Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ext	tension, c	complete only Part II and check this	s box	X
Note. Only complete Part II if you have already been granted an a	utomatic:	3-month extension on a previously f	iled Form 8868.	
 If you are filing for an Automatic 3-Month Extension, complet 			•	
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no copies needed).	
		Enter filer's	identifying number, see ins	tructions
Type or Name of exempt organization or other filer, see instruc	ctions		Employer Identification num!	per (EIN) or
print AMERICAN FLY FISHING TRADE		IATION,		
File by the INC.		•	X 82-049901	4
due date for Number, street, and room or suite no. If a P.O. box, so	ee instruci	tions.	Social security number (SSN	
filling your 9975 WADSWORTH PARKWAY, UNIT				-7
instructions. City, town or post office, state, and ZIP code. For a fo		ress see instructions		
WESTMINSTER, CO 80021	,, cig., add	1000, 500 mondonom		
Enter the Return code for the return that this application is for (file	a separa	te application for each return)	***************************************	01
Application	Return	Application		Return
Is For	Code	Is For		Code
Form 990 ·	01	The state of the state of the state of	The state of the s	Code
Form 990-BL	02	Form 1041-A	<u> </u>	08
	. 01	Form 4720		
Form 990-EZ		Form 5227		09
Form 990-PF	04	Form 6069	· · · · · · · · · · · · · · · · · · ·	10
Form 990-T (sec. 401(a) or 408(a) trust)	05			11
Form 990-T (trust other than above)	06	Form 8870	1 1	12
STOP! Do not complete Part II if you were not already granted	an auton	natic 3-month extension on a prev	/lously filed Form 8868.	
MISCHA JONES	DADE	AND THE WOLLD	MATATA COURT CO. (30001
• The books are in the care of > 9975 WADSWORTH	PARKI		TMINISTER, CO	30021
Telephone No. ► 303-604-6132		FAX No. D		
If the organization does not have an office or place of business				
e If this is for a Group Return, enter the organization's four digit	1			
box . If it is for part of the group, check this box			<u>f all members the extension is</u>	for.
	MOVEW	BER 15, 2012.		
5 For calendar year 2011 , or other tax year beginning		, and endin		<u> </u>
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	Final return	
L Change in accounting period				
7 State in detail why you need the extension				
. ADDITIONAL TIME IS NEEDED TO C	SATHE:	R THE INFORMATION	NECESSARY TO F	CLE A
COMPLETE AND ACCURATE RETURN.			· · · · · · · · · · · · · · · · · · ·	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6060 e	nter the tentative tay less any		
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, on nonrefundable credits. See instructions.	01 0000, 6	iter the terradive tax, less any	8a \$	0.
	ontor onv	refundable gradite and estimated	02 9	
••	_] 1 .]	
tax payments made. Include any prior year overpayment all	lowed as a	t credit and any amount paid	A	
previously with Form 8868.		to the form of the second second second second	\$b \$	0.
c Balance due. Subtract line 8b from line 8a. Include your pa	•	n this form, it required, by using		
EFTPS (Electronic Federal Tax Payment System). See Instru		the completed for Dort II	8c \$	0.
		st be completed for Part II		nalles
Under penalties of perjury, I declary that I have examined this form, includ it is true, correct, and pomplete and first I am authorized to prepare this fo	ing accomp irm.	ranying schedules and statements, and t	o ale best of my knowleage and l	Jellet,
Signature . Noblet Albu Title .	CPA		Date ▶ 8/13/1Z	_
			Form 8868 (F	ev. 1-2012\