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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)

2012

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning 2012, and ending

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization Federation of Fly Fishers, Inc.		D Employer identification number 81-0514222
	Doing Business As		E Telephone number (406) 222-9369
	Number and street (or P.O. box if mail is not delivered to street addr) Room/suite 5237 US Highway 89 South 11		G Gross receipts \$ 701,405.
	City, town or country State ZIP code + 4 Livingston MT 59047		
	F Name and address of principal officer Philip Greenlee 5237 US Highway 89 South Livingston MT 59047		H(a) Is this a group return for affiliates? ☒ Yes ☐ No H(b) Are all affiliates included? ☒ Yes ☐ No If "No," attach a list. (see instructions)
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527		H(c) Group exemption number 9453	
J Website: www.fedflyfishers.org			
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other		L Year of formation: M State of legal domicile:	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>Education of youth on fisheries and water quality management, conservation of water, and research for water quality improvement.</u>		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	350
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	350
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	2,500
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	142,491.	194,142.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	256,047.	313,760.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11,669.	8,254.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	151,191.	163,189.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	561,398.	679,345.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	43,628.	31,757.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 34,437.		
Net Assets or Fund Balances	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	510,727.	584,533.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	554,355.	616,290.
	19 Revenue less expenses. Subtract line 18 from line 12	7,043.	63,055.
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	1,178,062.	1,362,729.
22 Net assets or fund balances. Subtract line 21 from line 20	0.	0.	
		1,178,062.	1,362,729.

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 Here	Signature of officer		Date	
	Philip Greenlee		President/CEO	
Paid Preparer Use Only	Print/preparer's name		Preparer's signature	Date
	Jacqueline McGuire		<i>Jacqueline McGuire</i>	10/3/13
	Firm's name ▶ MCGUIRE & ASSOCIATES		Check ☒ If self-employed	PTIN P00569247
	Firm's address ▶ 300 N. Willson, Suite 3008 Bozeman MT 597156050		Firm's EIN ▶ 81-0516192	Phone no (406) 587-3333

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0101 05/09/13

Form 990 (2012)

SCANNED FEB 21 2014

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