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Form	JJU	

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Intern	al Reve	nue Service	Information about Fo	rm 990 and its Instructio	ns is at www./	les.aav/form990		Inspection
AF	or the	e 2014 calend					2014	
Вс	track d	C Name of	f organization		····	D Employer	identificat	ion number
4	policaci		TOL BAY REGIONAL S	EAROOD		Linployer	ioci illicai	
_	Addre					ł		
⊨	_Ichany TMana		LOPMENT ASSOCIATION	N, INC.		╛.		
<u>_</u>	_ishar g	e i Doine b	usiness as				<u> 20-266</u>	50011
	Initial	Number	and street (or P.O. box if mail is not deli	vered to street address)	Room/suite	E Telephone	number	·
	Final return	, 800	E. DIMOND BLVD. SU	ITE 3-131 #15	8 #158		907-77	70-6339
	termin	. !	own, state or province, country, and			G Gross receipts		1,385,243.
	Anten		ORAGE, AK 99515	ZiP or loreign postal code		***************************************		
<u> </u>				701111011		H(a) is this a	group retui	
L_	Applic Mon penda		nd address of principal officer:FRI	rz Johnson		for subo	dinates?	Yes X No
	Penus	" SAME	AS C ABOVE			H(b) Are all subc	rdinates Inclu	ded? Yes No
1 7	ax ex	empt status:	501(c)(3) X 501(c)(6)	(insert no.))(1) or 527	7 If "No." a	ttach a list	t. (see instructions)
			BBRSDA.COM		<u> </u>	H(c) Group ex		,
				sociation Other	I van			tate of legal domicile: AK
				Sociation Outer P	[L TEAT	Or ionnation: &	O DI IN O	rate of rediti gaturent way
Pa	rt I	Summary						
بو	1	Briefly describ	e the organization's mission or most	significant activities: ${f TO}$				
ᆲ		BRISTOL	BAY FISHERY FOR T	HE BENEFIT OF	ITS ME	MBERS BY	FOCUS	SING ON
Governance	2	Check this bo	x 🕨 📖 if the organization discor	itinued its operations or di	sposed of mor	re than 25% of d	s net assa	ts.
ξ			ting members of the governing body				3	~~~ 7
8			· · · · · · · · · · · · · · · · · · ·		41-3	•		
- ব্			lependent voting members of the gov	• • •	(טו		4	
<u>8</u>	5	Total number	of individuals employed in calendar y	ear 2014 (Part V, line 28)		-	5	0
7	6	Total number	of volunteers (estimate if necessary)		RECE	83 A5-170 + 11	- 6	25
Activities &	7 a	Total unrelate	d business revenue from Part VIII, co	umn (C), line 12	RECE		7a	0.
- ▼	i		business taxable income from Form	Lion			7b	0.
		Het differated	Dusiness taxable income from Form	191	1111 I	Prior Year		
	_			22	MAY 🙎	Alles All	364	Current Year
e e	8	Contributions	and grants (Part VIII, line 1h)			41) £30 [1,384,995.
Revenue	9	Program servi	ce revenue (Part VIII, line 2g)		888	lõ	[0.	0.
Š	10	Investment in	come (Part VIII, column (A), lines 3, 4,	and 7d)	OGDA	W III	548.	167.
~			e (Part VIII, column (A), lines 5, 6d, 8c			THE BOARD	# O.I	81.
3						1,630,	732	1,385,243.
3			- add lines 8 through 11 [must equal		<u> </u>	381,		362,373.
4			milar amounts paid (Part IX, column (•		301,		302,3/3.
. 1		•	to or for members (Part IX, column (A				0.	0.
တ္က	15	Salaries, other	r compensation, employee benefits (F	Part IX, column (A), lines 5-	10)	111,	007.	57,498.
Expenses	16a	Professional f	undraising fees (Part IX, column (A), li	ne 11e) _, , , , , , , , , , , , , , , , , , ,			0.	0.
툂			ing expenses (Part IX, column (D), line		···· o . I			
ŭ						1,192,	110	368,528.
		-	es (Part IX, column (A), lines 11a-11d,	, , , , , ,	· ··· · · · · · · · · ·			
	18	Total expense	s. Add lines 13-17 (must equal Part I	K, column (A), line 25)		1,684,		788,399.
\Box	19	Revenue less	expenses. Subtract line 18 from line	12	,	<54 ,	096.>	596,844.
58					В	eginning of Curre	nt Year	End of Year
Sects or Belances	20	Total assets (I	Part X, line 16)			2,670,		3,227,254.
38	04	-	(Dort V. Ima 26)	** **************************		101,		61,993.
100						2,568,		3,165,261.
			fund balances, Subtract line 21 from	line 20		2,300,	# T / •	3,103,201.
		Signature						
Unde	er pena	alties of perjury,	I declare that I have examined this return,	including accompanying sche	edules and stater	ments, and to the b	est of my kr	nowledge and belief, it is
true,	COITE	ct and complete	. Declaration of pragarer fother-than office	r) is based on all information	of which prepare	r has any knowled	ge.	
		T.	7200		······		5/7/	15
0 1-		Signatur	e of officer		· · · · · · · · · · · · · · · · · · ·	Date		7,3
Sigr	1	1 *				04.0		
Here	8		Z JOHNSON, PRESIDE	N.T.				
		lype or	print name and title					
		Print/Type pre	parer's name	Preparer's signature		Date	Check	PIIN
Paid	ļ		M. LANCE, CPA	. •			() self-employed	P01381407
Prep			THOMAS, HEAD & G	RETSEN PC		Eirenia		2-0043874
						Firm's	LIIV	/a-UV#30/#
Use	Unity	Firm's address	1400 WEST BENSON	BLVD., 400		1		11000 4
			ANCHORAGE, AK 99	503-3683	· · · · · · · · · · · · · · · · · · ·	Phone	no. (907	7)272-1571
May	the f	RS discuss thi	s return with the preparer shown abo	ve? (see instructions) .				X Yes No
	01 11-0		For Paperwork Reduction Act Notice		uctions.			Form 990 (2014)

1-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

<u>Form</u>	990 (2014) DEVELOPMENT ASSOCIATION, INC.	20-2660011	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission.		
-	TO MAXIMIZE THE VALUE OF THE BRISTOL BAY FISHERY FOR TH	E BENEFIT OF	į
	ITS MEMBERS BY FOCUSING ON THE ECONOMIC WELLBEING OF BE		
	SUPPORTING A SUSTAINABLE BRISTOL BAY COMMERCIAL FISHERY		
		, AND PROVID	ING
	THE HIGHEST QUALITY WILD SALMON PRODUCTS.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990 EZ?	Yes	LX 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 services'	Yes	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 services, a	s measured by expense	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	· ·	
	revenue, if any, for each program service reported	ers, the total expenses,	ariu
	295 740	 _	
74	RESEARCH: TO SUPPORT RESEARCH. FROM 7/1/14 TO 12/31/1		
	SUPPORTED TEN RESEARCH PROJECTS THAT SUPPORTED SUSTAINA		<u></u>
			δ,
	HABITAT, AND MANAGEMENT OF THE BRISTOL BAY SALMON FISHE		
	RANGED FROM A SURVEY OF PROCESSORS TO DETERMINE PRODUCT	QUALITY GAI	NS
	OR LOSSES, SOCKEYE SALMON MARKET RESEARCH, EXPANSION OF		.UN
	AND ESCAPEMENT EVALUATION TOOLS AND TIME PERIODS, SALMO		
	ASSESSMENT PROJECTS, AND MORE. THESE PROJECTS RESULTED	IN LITERALL	Y
	THOUSANDS OF NEW DATA POINTS AND PAGES OF NEW FISHERIES	ANALYSES.	IN
	ADDITION, THE BOARD AGREED TO FUND FOUR LEGACY FY 15 RE	SEARCH PROJE	CTS.
4b	(Code) (Expenses \$ 143,232. Including grants of \$) (Rever		
70		1/14 TO	
	12/31/14, BBRSDA SUPPORTED SIX PROJECTS THAT PROMOTED U		TAT
			TM
		TED GENERAL	
	MARKETING EFFORTS. DATA DEMONSTRATING THESE EFFORTS AR		
	- BBS FACEBOOK FOLLOWERS INCREASED NUMBER OF SOCIAL MED	IA FOLLOWERS	
	FROM 16,438 TO 16,830, A 2.3% INCREASE.		
	- FOLLOWERS WERE ACTIVELY ENGAGED ACROSS BBS' FACEBOOK	WITH REGULAR	. ,
	COMPELLING POSTINGS. AUDIENCE IMPRESSIONS AVERAGED 1,94	8 PER DAY OV	ER
	THE PERIOD, AND RESULTING CLICKS ON OUR POSTS BY FOLLOW	ERS AVERAGED	185
	PER DAY.		
	- HOSTED SIX FOOD WRITERS, SEAFOOD BUYERS, AND FOOD LEA	DERS IN BRIS	ጥርኒ
	BAY DURING THE FISHING SEASON.		
4c	114 402		
-10	(Code) (Expenses \$. 114,482. including grants of \$) (Reveil ORGANIZATION DEVELOPMENT: TO SUPPORT THE ECONOMIC WELL-	BEING OF BED	CDA
	MEMBERS. FROM 7/1/13 TO 6/30/14, THE BBRSDA CONTINUED T		BUA
	ORGANIZATIONAL DEVELOPMENT NECESSARY TO SUPPORT THE CON		
	BIOLOGICALLY AND ECONOMICALLY HEALTHY AND PRODUCTIVE CO		MON
	FISHERY IN BRISTOL BAY. THE BBRSDA SUPPORTED THESE EFF	ORTS BY:	
	- ATTENDED ONE INDUSTRY TRADE SHOW, HAVING A BOOTH, AND	REPRESENTIN	G
	THE BBRSDA BY HOSTING A WORKSHOP AND SPONSORING A BRIST	OL BAY	
	RECEPTION.		
	- DEVELOPED AND PROVIDED ONE NEWSLETTER TO ALL MEMBERS.		
	- SENT SEVEN INFORMATIONAL WAYPOINTS EMAIL BLASTS TO BE		-
	ABOUT THE BRISTOL BAY FISHERY OR THE ORGANIZATION.		
	- MAINTAINED ONE DYNAMIC WEBSITE.		
4d	150 521		
	500 05-		_
<u>4e</u>	Total program service expenses ► 693,975.	_	
		Form 9	90 (201

BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Form 990 (2014)

Part IV | Checklist of Required Schedules

			Yes	<u>No</u>
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_		<u>X</u>
	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		7.7
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	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	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		- 11	
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		_X_
10	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 V	10	X	
11	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	–	X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	441		v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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	110		х
a	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	11c		
u	Part X, line 16° If "Yes," complete Schedule D, Part IX	11d		X
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f				
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	ا		\ v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	45	ļ	-
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		X
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16	 	
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		_ <u>-</u> _
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
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		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		-	. റെറ	1004 4

Form 990 (2014)

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Part IV Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Х 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? If "Yes," complete X Schedule J 23 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 lines 24b through 24d and complete X Schedule K. If "No", go to line 25a 24a 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 24c any tax-exempt bonds? 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), 501(c)(4), and 501(c)(29) 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 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 26 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L. Part II 26 Х 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 X 27 of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a Х A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b 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

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? Х If "Yes," complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Schedule N, Part II 32 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х Part V, line 1 34 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

Form **990** (2014)

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29

35b

36

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Form 990 (2014)

| Part V | Sta

DEVELOPMENT ASSOCIATION, INC.
Statements Regarding Other IRS Filings and Tax Compliance

20-2660011

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	Check if Schedule O contains a response of note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 26			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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 as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
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		
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		├──
н 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
0	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	_		
9	Sponsoring organizations maintaining donor advised funds.	_8_		<u> </u>
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Ì
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	30		\vdash
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			İ
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	L	<u> </u>
		Form	990	(2014)

Form 990 (2014)

DEVELOPMENT ASSOCIATION, INC.

20-2660011

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 or note to any line in this Part VI			_		<u>LX</u>				
Sect	ion A. Governing Body and Management									
		1	I		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		7						
	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.									
	Enter the number of voting members included in line 1a, above, who are independent	1b	L	7						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	iip with	any other							
	officer, director, trustee, or key employee?		_	2		<u>X</u>				
3	Did the organization delegate control over management duties customarily performed by or under the	he dire	ct supervision	3	х					
	of officers, directors, or trustees, or key employees to a management company or other person?									
	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets		5	37	X				
6	Did the organization have members or stockholders?			6	_X_					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoin	one or		v					
	more members of the governing body?	-41-1		7a	X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	STOCKI	iolaers, or			v				
_	persons other than the governing body?	h 41	ha fallaaa	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by t	ne rollowing.	0-	v					
	The governing body? Find committee with authority to get an habit of the governing body?			8a	<u> </u>					
b	Each committee with authority to act on behalf of the governing body?	اممطمم	at tha	8b						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	acned	at the	9		x				
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal I	Povonu	o Codo I	9		<u> </u>				
366	tion B. Folicies (This Section B requests information about policies not required by the internal r	reveriu	e code /		Yes	No				
100	Did the organization have local chapters, branches, or affiliates?			10a	165	X				
10a b	If "Yes," did the organization have written policies and procedures governing the activities of such	chante	re affiliates	IQa						
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	cnapie	is, aiillates,	10b		İ				
112	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dv hef	ore filing the form?	11a	Х	_				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	u, 501	ore ming the form	1.10						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	se to co	nflicts?	12b	X					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			1,2,5						
Ŭ	in Schedule O how this was done			12c	Х					
13	Did the organization have a written whistleblower policy?			13		х				
14	Did the organization have a written document retention and destruction policy?			14	Х					
15	Did the process for determining compensation of the following persons include a review and appro	val by	ndependent	 ' ' '	=-					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	-		ļ						
а	The organization's CEO, Executive Director, or top management official			15a	х					
b	Other officers or key employees of the organization			15b		X				
_	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 arrang	ement	with a							
	taxable entity during the year?			16a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	iate its	participation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org					}				
	exempt status with respect to such arrangements?			16b		<u></u>				
Sec	tion C. Disclosure		·							
17	List the states with which a copy of this Form 990 is required to be filed ▶AK									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990)-T (Sed	ction 501(c)(3)s only	/) avaılat	le					
	for public inspection. Indicate how you made these available. Check all that apply									
	Own website Another's website X Upon request Other (expla	ın ın So	chedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or	conflict	of interest policy, a	ınd finan	cıal					
	statements available to the public during the tax year									
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks a	and records.							
	CARNEY CONSULTING GROUP - 907-561-0060									
	800 E DIMOND BLVD, SUITE 3-310, ANCHORAGE, AK 99	515								
43200	6 11-07-14		·	Forn	990	(2014)				

BRISTOL BAY REGIONAL SEAFOOD

DEVELOPMENT ASSOCIATION, INC.

20-2660011

Page 7

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

Check if Schedule O contains a response or note to any line in this Part VII

	The state of the s		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		•
	ete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax	vear	r

- 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 n	or any related	orga	nıza	ition	cor	nper	nsat	ed any current officer, o	firector, or trustee	
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable	Reportable	Estimated				
	hours per week			compensation from	compensation from related	amount of other				
	(list any			the	organizations	compensation				
	hours for	r dire			İ	eq		organization	(W-2/1099-MISC)	from the
	related	ste o	nste		l	eusa		(W-2/1099-MISC)		organization
	organizations	al frus	nal tr		loyee	comp				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	≝	Ë	₩	\$	₹.	횬			
(1) SUE ASPELUND	50.00							50.000		
EXECUTIVE DIRECTOR	F 00			Х	-		_	79,222.	0.	0.
(2) ROBERT HEYANO	5.00					1				
PRESIDENT		X		X		├		5,020.	0.	0.
(3) FRITZ JOHNSON	2.50								_	
VICE PRESIDENT		X		X			_	1,628.	0.	0.
(4) MIKE LARUSSA	3.00	1							_	
SECRETARY/TREASURER		Х	<u> </u>	X	ļ	-		25,499.	0.	0.
(5) KATHERINE CARSCALLEN	2.00		ļ					_		
DIRECTOR	ļ <u></u>	X			<u> </u>	<u> </u>	ļ	60,108.	0.	0.
(6) MATT MARINKOVICH	2.00		1					Į		
DIRECTOR		X						3,966.	0.	0.
(7) LARRY CHRISTENSEN	2.00]								
DIRECTOR		X			<u> </u>	<u> </u>	L	3,071.	0.	0.
(8) MATT LUCK	5.00									
DIRECTOR		X	L	L.	L			7,647.	0.	0.
			ł			i				
			<u> </u>			<u> </u>				
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Form 990 (2014)

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
	(A) Name and title	(B) Average hours per	(B) Average (do not che) hours per box, unles			C) ItION more rson	than	one h an	(D) Reportable compensation	(E) Reportable compensation	1	(F) stimate nount			
		week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	ons compen		comper C) from organia and re		e ion ed
		•				 !									
	·														
									,						
			-		<u> </u>										
							 				-				
	· · · · · ·									<u> </u>	<u> </u>				
	•					_			106 161	0	-				
	Sub-total Total from continuation sheets to Part V	II, Section A							186,161.	0			0.		
	Total (add lines 1b and 1c) Total number of individuals (including but r	not limited to th	nose	liste	ed a	bov	e) wl		186,161.	000 of reportable	<u>.L_</u>		0.		
	compensation from the organization										· · · · ·	Yes	0 No		
	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			e, ke	ey er	nplo	oyee	, or	highest compensated e	mployee on	3	163	X		
4	For any individual listed on line 1a, is the s	um of reportab	le c	-					•	the organization		<u></u>			
	and related organizations greater than \$15 Did any person listed on line 1a receive or									dual for services	4_		X		
	rendered to the organization? If "Yes," con ion B. Independent Contractors	nplete Schedul	e J	for s	uch	per.	son				5		X		
1	Complete this table for your five highest co										sation	from			
	the organization. Report compensation for (A)					vitn	or w	/itnir	(B)			C)			
	Name and business	s address	N	ON:	<u>E</u>				Description of s	services	Compe	ensatio	n		
												. <u>.</u> -			
2	Total number of independent contractors	, -	not I	ımıte	ed to	tho	ose li	stec	d above) who received n	nore than					
	\$100,000 of compensation from the organ	nzation -					U			<u> </u>	Form	990	2014)		

		DEVELOPMENT ASSOCIAT	ON, INC.		<u> 20-2660</u>	<u>011 </u>
Par	t VI	III Statement of Revenue				
		Check if Schedule O contains a response or note to any li	ne in this Part VIII			
	•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 :	a Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues 1b	1			
a El		c Fundraising events 1c	1			
ifts		d Related organizations 1d	1			
å. B.∰		e Government grants (contributions) 1e 1,376,422	1			
Sig		f All other contributions, gifts, grants, and				
le të		similar amounts not included above 1f 8,573				
호텔			4			
ğΕ		9 Noncash contributions included in lines 1a-1f \$	1,384,995.			
<u> </u>		h Total. Add lines 1a-1f Business Code				
.	_					
Program Service Revenue	2 :					
le g		b	 			
6 8	,	С				
Re	,	d				
Š		e				
-		f All other program service revenue				
		g Total. Add lines 2a-2f		.		
	3	Investment income (including dividends, interest, and	167			167.
		other similar amounts)	167.			10/.
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties	-			
		(i) Real (ii) Personal	-			
	6	a Gross rents	-	,		
		b Less rental expenses	-			
		c Rental income or (loss)	-{			
		d Net rental income or (loss)	<u> </u>			
	7	a Gross amount from sales of (i) Securities (ii) Other	-			
		assets other than inventory	\dashv			
		b Less. cost or other basis				
		and sales expenses	-			
		c Gain or (loss)				
		d Net gain or (loss)		<u> </u>		
ě	8	a Gross income from fundraising events (not				
ē		including \$ of				
ş		contributions reported on line 1c) See				
Other Revenue		Part IV, line 18	_	1		Í
돭	1	b Less direct expenses b	_			
_		c Net income or (loss) from fundraising events				
	9	a Gross income from gaming activities. See				
		Part IV, line 19	-			
	L	b Less. direct expenses b	_			
	1	c Net income or (loss) from gaming activities		-		
	10	a Gross sales of inventory, less returns				
	l	and allowances a	_			
		b Less cost of goods sold b	_			
	<u></u>	c Net income or (loss) from sales of inventory				1
	L_	Miscellaneous Revenue Business Cod				
	11	a OTHER REVENUE 900099	81.	81.		
		b				
		с				1
		d All other revenue				
		e Total. Add lines 11a-11d	81.			ļ
	12	Total revenue. See instructions.	1,385,243.	81.	0.	
4320 11-0	09 7-14					Form 990 (2014)

Do r	Check if Schedule O contains a response	(A)	this Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	359,373.	359,373.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	3,000.	3,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16		-		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	57,498.	28,749.	28,749.	
_	trustees, and key employees	51,490.	20,749.	20,749.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages		***		
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)	- "			
а	Management				
b	Legal	18,477.	9,918.	8,559.	
С	Accounting	39,190.	22,534.	16,656.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	171,493.	165,838.	5,655.	
12	Advertising and promotion				
13	Office expenses	11,582.	11,054.	528.	
14	Information technology	2,778.	2,479.	299.	
15	Royalties				
16	Occupancy	40 550	40 451	0 101	<u> </u>
17	Travel	48,552.	40,451.	8,101.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	62 012	20 570	22 242	
19	Conferences, conventions, and meetings	62,912.	39,570.	23,342.	
20	Interest Payments to offiliates				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,461.	754.	707.	
23	Insurance Other expenses. Itemize expenses not covered	1,401.	/ 54 •	707.	
24	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 0.)				
а	DETAMENO AND MEMOLEMBER	9,154.	7,567.	1,587.	
b	VT CORT T ANDOMO	1,787.	1,546.	241.	
c	CHICKS TAIABTI TON DROMOUTO	583.	583.		
d	CULDINA DI D. COMBRIDITANI	559.	559.		
-	All other expenses				······································
25	Total functional expenses. Add lines 1 through 24e	788,399.	693,975.	94,424.	0
26	Joint costs Complete this line only if the organization	•			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 1 Cash - non-interest-bearing 2,670,309. 3,159,754. 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 **Assets** 7 Notes and loans receivable, net 7 8 Inventories for sale or use 67,500. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 10c **b** Less accumulated depreciation 11 11 Investments - publicly traded securities Investments - other securties See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 3,227,254. 2,670,309. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 56,678. 9,319. Accounts payable and accrued expenses 17 17 25,000. 18 Grants payable 18 30,244. 27,274. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons 14,970. 22 400. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 61,993. 101,892. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 367,866. 2,797,395. <190,952.>27 27 Unrestricted net assets 2,759,369. 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 3,165,261. 3,227,254. 2,568,417. 33 33 Total net assets or fund balances 2,670,309. 34 Total liabilities and net assets/fund balances

Form 990 (2014)

Par	t XI Reconciliation of Net Assets			•	
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,38	<u>5,2</u>	<u>43.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	78	8,3	<u>99.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	59	6,8	<u>44.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,56	8,4	<u>17.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	3,16	<u>5,2</u>	<u>61.</u>
Pai	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	e basis,			
	consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	_X_	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audit			
	Act and OMB Circular A-133?		_3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	000	(224:
			Form	990	(2014)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2014

Open to Public Inspection

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

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

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

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

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

rax) (see separate instructions), then				
 Section 501(c)(4), (5), or (6) organiza 	•			
	BAY REGIONAL SE		Emi	oloyer identification number
DEVELOP	MENT ASSOCIATION	, INC.		20-2660011
Part I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527	organization.
1 Provide a description of the organiz	ation's direct and indirect politic	al campaign activities	in Part IV	
2 Political expenditures			•	\$
3 Volunteer hours				
				
Part I-B Complete if the org	ganization is exempt und	er section 501(c)		
1 Enter the amount of any excise tax	incurred by the organization und	ler section 4955	•	
2 Enter the amount of any excise tax	incurred by organization manage	ers under section 495	5	\$
3 If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				L Yes
b If "Yes," describe in Part IV				
Part I-C Complete if the org	ganization is exempt und	er section 501(c)		
1 Enter the amount directly expende	d by the filing organization for se-	ction 527 exempt fund	ction activities	\$
2 Enter the amount of the filing organ	nization's funds contributed to ot	her organizations for s		
exempt function activities			>	\$
3 Total exempt function expenditures	s Add lines 1 and 2 Enter here a	nd on Form 1120-POL	-,	
line 17b			>	\$
4 Did the filing organization file Form	1120-POL for this year?			Yes No
5 Enter the names, addresses and er	mployer identification number (El	N) of all section 527 p	olitical organizations to wh	ich the filing organization
made payments For each organiza	ation listed, enter the amount pair	d from the filing organ	ızatıon's funds Also enter	the amount of political
contributions received that were pi				rate segregated fund or a
political action committee (PAC) If	additional space is needed, prov	ide information in Par	t IV	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
` '			filing organization's	contributions received and
			funds If none, enter -0	promptly and directly delivered to a separate
				political organization
				If none, enter -0-
	1			
	1			
				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2014

LHA 432041 10-21-14 BRISTOL BAY REGIONAL SEAFOOD

Schedule C (Form 990 or 990 EZ) 2014 DE Part II-A Complete if the organ	VELOPMENT	ASSOCIATIO	$\frac{N}{N}$, INC.	20 - 2 od Form 5768 (2660011 Page 2
Part II-A Complete if the organ section 501(h)).	ization is exer	iipt under sectio	ii 50 i(c)(5) and me	, 2016 mil 3700 (cicotion under
	belongs to an affi	liated group (and list in	Part IV each affiliated of	group member's nar	ne, address, EIN,
expenses, and share of					
B Check ▶ ☐ if the filing organization	checked box A ar	nd "limited control" pro	ovisions apply		
	on Lobbying Expe	nditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influen	ce public opinion (grass roots lobbying)			
b Total lobbying expenditures to influen		-			
c Total lobbying expenditures (add lines	3 1a and 1b)			- -	
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (a	idd lines 1c and 1c	d)			
f Lobbying nontaxable amount Enter t	ne amount from the	e following table in bot	h columns		
If the amount on line 1e, column (a) or (b) is: The lob	bying nontaxable am	ount is:		-
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,0	00 \$100,00	00 plus 15% of the exc	cess over \$500,000		
Over \$1,000,000 but not over \$1,500		00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,00		00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000	\$1,000,	000			
g Grassroots nontaxable amount (enter	25% of line 1f)				
h Subtract line 1g from line 1a If zero o	r less, enter -0-				
i Subtract line 1f from line 1c If zero or	less, enter -0-				
j If there is an amount other than zero	on either line 1n or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this year	ar?				Yes No
(Some organizations that	made a section 5	eraging Period Under 601(h) election do not ate instructions for li	have to complete all o	f the five columns	below.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount	- 10 '				
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 DEVELOPMENT ASSOCIATION, INC. 20-2660011 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b	o)
of the lobbying activity	Yes	No	Amo	ount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?	-			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
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?				
Part III-A Complete if the organization is exempt under section 501(c)(4), so	ection 501(c)	(5), or se	ction	
501(c)(6).		(-),		
(-)/(-)	-		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		Х
Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	ered "No," Ol	R (b) Par	t III-A, lir	ne 3, is
Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	political			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	es	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	ie excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	and political			
expenditure next year?		4_		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information			.	
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated	group list), Part I	I-A, lines 1	and 2 (see	
Instructions); and Part II-B, line 1 Also, complete this part for any additional information SCHEDULE C, PART III-A, LINE				
AS DISCLOSED ON SCHEDULE B PART I BBRSDA RECEIVED	GRANTS FI	ROM TH	E STAT	re of
ALASKA AND A 501(C)(3) ORGANIZATION. PURSUANT TO R	EV. PROC	. 98-1	9, FOI	R THE
PURPOSE OF MEETING THE REQUIREMENTS OF IRC SECTION	6033(E)	(3) TH	E AMOU	UNTS
REPORTED ON SCHEDULE B PART 1, LINES 1 AND 2 ARE C	ONSIDERE	D (SIM	ILAR	
AMOUNTS) AS A RESULT OF MEETING THE 90% TEST SET F		SECTIC		
	Julieat	" ~ (LOUI	. 220 01 231	· 20 14

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BRISTOL BAY REGIONAL SEAFOOD

Schedule C (Form 990 or 990-EZ) 2014 DEVELOPMENT ASSOCIATION, INC. 20-2660011 Page 4 Part IV Supplemental Information (continued)
THE REVENUE PROCEDURE. BBRSDA CONSIDERS THE APPROPRIATIONS BY THE
LEGISLATURE OF THE STATE OF ALASKA AS AUTHORIZED, BUT NOT MANDATED BY
ALASKA STATUTE 43.76.380(D) AND REPORTED ON SCHEDULE B, TO BE WITHIN THE
DEFINITION OF (SIMILAR AMOUNTS) CONTAINED IN SECTION 5.01 OF REV. PROX.
98-19.
ACCORDINGLY QUESTION 1 IN PART III-A HAS BEEN ANSWERED YES.

432044

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2014
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

BRISTOL BAY REGIONAL SEAFOOD

Employer identification number

20-2660011 DEVELOPMENT ASSOCIATION, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) __ Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051

Schedule D (Form 990) 2014

a Revenue included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

BRISTOL BAY REGIONAL SEAFOOD

		MENT ASSOC				Ale e u		<u> 20-26</u>			ge ∠
Par											
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the	following that are	a sign	ıfıcant	use of its	collection	1 items	3
	(check all that apply).										
а	Public exhibition	d			nange programs						
b	Scholarly research	е		ther			-				
С	Preservation for future generations							_			
4	Provide a description of the organization's co							ose in Par	XIII		
5	During the year, did the organization solicit o					nılar as	ssets		_	_	1
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arrange reported an amount on Form 990, Par	-	ete if the	organızatıoı	n answered "Yes	to Fo	rm 990), Part IV, I	ine 9, or		
	Is the organization an agent, trustee, custodi	an or other intermed	liary for c	ontribution	s or other assets	not inc	cluded				
	on Form 990, Part X?		•						Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing ta	able							
-	g								Amoun	t	
С	Beginning balance						1c				
	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for e	scrow or cu	ustodial account I	ability	?		Yes		No
b	If "Yes," explain the arrangement in Part XIII]
Par											
		(a) Current year		or year	(c) Two years bad		Three	years back	(e) Four	years '	back
1a	Beginning of year balance	2,075,085.		768,157.	1,427,54	0.	1.0	045,210.		738_	350.
b	Contributions	344,224,		306,928.	340,61		:	382,330.		306	860.
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
-	and programs										
f	Administrative expenses										
g	End of year balance	2,419,309.	2	075,085.	1,768,15	7.	1.4	127,540.	1	,045,	210.
2	Provide the estimated percentage of the cur							<u>-</u>			
а	Board designated or quasi-endowment	•	%								
b	Permanent endowment	%	_								
C	Temporarily restricted endowment										
-	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%									
За	Are there endowment funds not in the posse		ation tha	t are held a	nd administered t	or the	organi	zation			
	by	_								Yes	No
	(i) unrelated organizations								3a(ı)		X
	(ii) related organizations								3a(ii)		X
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Sched	ule R?					3b		
4	Describe in Part XIII the intended uses of the	<u>-</u>									
	rt VI Land, Buildings, and Equipm				<u></u> , <u>-</u>						
	Complete if the organization answere	d "Yes" to Form 990), Part IV,	line 11a S	ee Form 990, Par	t X, lın	e 10				
	Description of property	(a) Cost or o					umulat	ed	(d) Boo	k value	9
		basis (investr			(other)	depre	eciation	<u> </u>			
1a	Land										
b											
c	Leasehold improvements										
d											
	Other										
	L Add lines 1a through 1e (Column (d) must e	agual Form 990 Part	X colum	n (R) line 1	10c)						0.

Schedule D (Form 990) 2014

DEVELOPMENT ASSOCIATION, INC.

	20-	- 26	60	011	Page 3
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Complete if the organization answered "Yes" t a) Description of security or category (including name of security)	(b) Book value	(c) Method of	valuation C	ost or end-of-ye	ar market value
Financial derivatives	(2)	\-\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Closely-held equity interests					
Other	· · · · · · · · · · · · · · · · · · ·				
(A)					
(B)					
					
(C)					
(D)	· -				
(E) (T)					
(F)					
(G)	<u> </u>				
(H)					
at (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				<u> </u>	
art VIII Investments - Program Related.	- F 000 D-4 N/ Iv	- 44 - O F 000	Dark V. Iraa	10	
Complete if the organization answered "Yes" t (a) Description of investment	(b) Book value	e LIC See Form 990	valuation C	ost or end-of-ve	ar market value
	(b) Book value	(c) Wethod of	valuation 0	- Cost of Crid of ye	ar market value
(1)					
(2)				-	
(3)					
(4)					
(5)				_	
(6)	-				
(7)					
(8)					
(8) (9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) > Part IX Other Assets.					
(8) (9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes"	to Form 990, Part IV, Irr Description	e 11d See Form 990), Part X, line		(b) Book value
(8) (9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) [e 11d See Form 990), Part X, line		(b) Book value
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(8) (9) Ital. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) [(1) (2) (3) (4) (5) (6) (7) (8) (9) Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3)	Description	ne 11e or 11f See Fol			(b) Book value
(8) (9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) [(1) (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4)	Description	ne 11e or 11f See Fol			(b) Book value
(8) (9) Ital. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) [(1) (2) (3) (4) (5) (6) (7) (8) (9) Ital. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	Description	ne 11e or 11f See Fol			(b) Book value
(8) (9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) [(1) (2) (3) (4) (5) (6) (7) (8) (9) Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	Description	ne 11e or 11f See Fol			(b) Book value
(8) (9) (al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) (art IX Other Assets. Complete if the organization answered "Yes" (a) [1] (2) (3) (4) (5) (6) (7) (8) (9) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7)	Description	ne 11e or 11f See Fol			(b) Book value

432053 10-01-14

Schedule D (Form 990) 2014

20-2660011 Page 4

Schedule D (Form 990) 2014

SCHEDULE (Form 990) Name of the organization

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.

Employer identification number 20-2660011 BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION. INC.

	[X Yes No	
Part I General Information on Grants and Assistance	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	criteria used to award the grants or assistance?	o Describe in Dat 17 the exempetation's exemplating for monitoring the use of grant finds in the United States

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Part II

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	\$5.000 Part II can	be duplicated if addit	ional space is need	pa			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALASKA DEPARTMENT OF FISH AND GAME 333 RASPBERRY ROAD ANCHORAGE AK 99518	92-6001185		30,000	0			STOCK COMP TOOLS
BRISTOL BAY HERITAGE LAND TRUST P.O. BOX 1388 DILLINGHAM AK 99576	31-1721762	501(C)(3)	7,500,	0			STREAM RESEARCH PROJECT
BRISTOL BAY SCIENCE & RESEARCH INSTITUTE - P.O. BOX 1464 - DILLINGHAM AK 99576	92-0168036	501(C)(3)	68,000.	0			VARIOUS SALMON RESEARCH PROJECTS
CHEFS COLLABORATIVE 89 SOUTH STREET BOSTON, MA 02111	04-3337348	501(C)(3)	12,000.	0			MARKETING OF SALMON
NORTHERN ECONOMICS 880 H STREET #210 ANCHORAGE AK 99501	92-0162195		17,154,	0.			BUYBACK REPORT
THE BREACH, LLC 1609 DEXTER AVENUE N, #2B SRATTIE WA 98109			67,500,	0			FILM TO SUPPORT AND PROTECT BRISTOL BAY SALMON
2 Enter total number of section 501(c)(3) and government organizations	and government or	rganizations listed in th	listed in the line 1 table				4

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2014)

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BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Page 1		grant ce	ROVE	RESEARCH			!		
20-2660011		(h) Purpose of grant or assistance	ICE BARGE TO IMPROVE QUALITY OF SALMON	FUND SCIENTIFIC RESEARCH PROJECTS					
	t)	(g) Description of non-cash assistance							
	and Organizations in the United States (Schedule I (Form 990), Part II)	(f) Method of valuation (book, FMV, appraisal, other)							
	nited States (Sche	(e) Amount of non-cash assistance	0	0					
T ASSOCIATION, INC.	nizations in the U	(d) Amount of cash grant	15,000.	141,500.	_				
	vernments and Organ	(c) IRC section if applicable							
	Assistance to Go	(b) EIN	47-0702463	91_6001537					
Schedule (Form 990) DEVELOPMENT	Part II Continuation of Grants and Other Assistance to Governments	(a) Name and address of organization or government	TRIDENT SEAFOODS 5303 SHILSHOLE AVENUE NW SEATTLE, WA 98107	1 :					

Schedule I (Form 990)

20-2660011

DEVELOPMENT ASSOCIATION, INC.

Schedule I (Form 990) (2014)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
					,
Part IV Supplemental Information. Provide the information required in		e 2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information	dditional information	
PART I, LINE 2:					
THE ORGANIZATION MAY PUBLICIZE A GRANT	RANT PRO	JECT AND S	PROJECT AND SOLICIT APPLICATIONS.	LICATIONS.	
GRANTEE IDEAS MAY ALSO BE BROUGHT FORWARD	FORWARD	BY INDIVID	INDIVIDUAL PROPOSAL OR	AL OR	
REQUEST. ALL GRANTS ARE APPROVED 1	BY THE B	OARD OF DI	RECTORS, (BOARD OF DIRECTORS, (CURRENTLY NO	
SEPARATE GRANT COMMITTEE).					

ALL GRANTEES SIGN A GRANT AGREEMENT, WHICH INCLUDES REPORTING REQUIREMENTS.

OR ONLY FINAL REPORTING. A GRANT MAY INCLUDE INTERIM AND FINAL REPORTING, THE GRANT AGREEMENT DESCRIBES THE EXEMPT PURPOSE AND INCLUDES A LIMITATION

432102 10-15-14

432291 05-01-14

SCHEDULE L

Transactions With Interested Persons

OMB No 1545-0047

Department of the Treasury

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ.

dule I. (Form 990 or 990-F7) and its instructions is at www.lrs.gov/form990.

Open To Public

nternal Revenue Service	TALION ADOUL	Ocheunie E (i oin		JI JJU-1					<u> </u>	speci		
		AY REGIO						•			on nu	mber
		<u>NT ASSOC</u>							<u>600</u>	<u>11</u>		
Part I Excess Benefit T		•		•								
Complete if the organia						, or Form 990-EZ, P	art V, I	ıne 40)b			
1 (a) Name of disqualified person	(b) R	elationship betw person and or			ied (c) Description of trans		saction			(d) Corrected? Yes No		
	- 	person and on	yarııza	111011						Y	es	No
									_		+	
												
							-					
2 Enter the amount of tax incurre	ed by the o	rganization man	agers	or disc	qualified persons dur	ing the year under						
section 4958								> \$				
3 Enter the amount of tax, if any	, on line 2,	above, reimburs	ed by	the org	ganızatıon			▶ \$				
Part II Loans to and/or												
Complete if the organi					, Part V, line 38a or F	orm 990, Part IV, Iir	ie 26,	or if th	ne orga	anızatı	on	
reported an amount or		·	r ' —	an to or	(a) Owned	(A) Dalamas due	(=)	ıln	(h) Ap	proved	/i) \A	Iritton
	Relationship organization	onship (c) arpose		n the	(e) Original principal amount	(f) Balance due	(g) In gefault?		by board or committee?		o or o o mon	
·	Ü		To Fro		, ,		Yes	No	Yes	1	Yes	No
KATHERINE CARSCDIF	RECTOR	PROFESSI		1.10	14,970.	400.		X	X		X	1
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Total Part III Grants or Assista	ance Bei	nefiting Inter	este	d Pe		±00.						_
Complete if the organi		•										
(a) Name of interested person		(b) Relationship			(c) Amount of	(d) Type	of		(€	e) Purp	ose c	of
(-)		interested pers			assistance	assistan	ce	ļ		assist	ance	
		the organiza	ation				_					
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SEE PART V FOR CONTINUATIONS

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

Schedule L (Form 990 or 990-EZ) 2014

Schedule L (Form 990 or 990-EZ) 2014 DEVELOPMENT ASSOCIATION, INC. Part IV Business Transactions Involving Interested Persons.

(a) Name of interested person	d "Yes" on Form 990, Part IV, line 28a, 28 (b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	(e) Sharing of organization's revenues?		
				Yes	No		
		<u></u>			-		
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					-		
Part V Supplemental Information				<u> </u>	<u> </u>		
	oonses to questions on Schedule L (see i	nstructions)					
	a mo ave epov aveepe	aman bengo	MG.				
SCHEDULE L, PART II, LOAN	S TO AND FROM INTERES	STED PERSO	NS:				
A) NAME OF PERSON: KATHE	RINE CARSCALLEN						
(-)	ANTERNATON DIRECTOR						
(B) RELATIONSHIP WITH ORG	ANIZATION: DIRECTOR						
(C) PURPOSE OF LOAN: PROF	ESSIONAL SERVICES						
(n) 1014 mg on 1004 ongay	T						
(D) LOAN TO OR FROM ORGAN	IZATION? = TO			-			
(E) ORIGINAL PRINCIPAL AM	OUNT \$ 14,970. (F)	BALANCE DU	E \$ 400.				
(G) LOAN IN DEFAULT? = NO							
(G) HOAN IN DEFAULT: - NO							
(H) APPROVED BY BOARD OR	COMMITTEE? = YES						
(I) WRITTEN AGREEMENT? =	VES						
(1) WRITTEN AGREEMENT: -	100						

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2014
Open to Public

Open to Public Inspection

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.les.gov/form990
BRISTOL BAY REGIONAL SEAFOOD Emplo
DEVELOPMENT ASSOCIATION, INC. 20

Employer identification number 20-2660011

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE ECONOMIC WELLBEING OF BBRSDA MEMBERS, SUPPORTING A SUSTAINABLE
BRISTOL BAY COMMERCIAL FISHERY, AND PROVIDING THE HIGHEST QUALITY WILD
SALMON PRODUCTS.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
- PARTICIPATED IN TWO TRADE EVENTS, INCLUDING: CHEFS COLLABORATIVE
SUMMIT AND INTERNATIONAL FOOD BLOGGERS CONFERENCE.
- DISTRIBUTED BRISTOL BAY SOCKEYE RECIPE CARDS, POSTERS, STICKERS,
STATIC CLINGS, ICE SPEARS, AND FACTSHEETS TO DIRECT MARKETERS,
DISTRIBUTORS, PROCESSORS, AND RETAILERS AROUND THE COUNTRY.
- SENT TWO WAYPOINTS COMMUNICATIONS TO THE BBRSDA MEMBERSHIP ON THE
TOPIC OF MARKETING.
- TWO PRESS RELEASES WERE DISTRIBUTED.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
- CONDUCTED FOUR BOARD MEETINGS.
- DEVELOPED AND APPROVED AN ANNUAL BUDGET.
- ALL OF THESE ACTIVITIES SUPPORT CONTINUOUS STRENGTHENING OF THE
ORGANIZATIONAL FOUNDATION OF THE BBRSDA AND ITS MEMBERSHIP.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
SUSTAINABILITY: TO HELP ENSURE THE BIOLOGICAL SUSTAINABILITY OF THE
BRISTOL BAY SALMON FISHERY. THE FOLLOWING STATISTICS QUANTIFY BBRSDA'S
AND COMMERCIAL FISHERMEN FOR BRISTOL BAY'S (CFBB) WORK TOWARDS A
SUSTAINABLE FISHERY FROM 7/1/14 TO 12/31/14:
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2014)

432211 08-27-14 CFBB FACEBOOK FOLLOWERS INCREASED FROM 2,666 TO 3,350, A 32%

INCREASE.

- FOLLOWERS WERE ACTIVELY ENGAGED ACROSS CFBB'S FACEBOOK WITH REGULAR, COMPELLING POSTINGS. AUDIENCE IMPRESSIONS AVERAGED 3,967 PER DAY OVER THE PERIOD AND RESULTING CLICKS ON OUR POSTS BY FOLLOWERS AVERAGED 407 PER DAY.
- 1150 COMMENTS WERE DELIVERED TO THE ENVIRONMENTAL PROTECTION AGENCY (EPA) ON ITS DRAFT 404(C) DETERMINATION TO PROTECT BRISTOL BAY THE BBRSDA'S SOCIAL MEDIA AND WEBSITE PLATFORMS.
- ONE TRADE SHOW WAS ATTENDED, WITH BOOTH PRESENCE AND OUTREACH.
- OPERATED A BOOTH AT FISHTIVAL (NAKNEK/KING SALMON'S ANNUAL COMMUNITY CELEBRATION OF THE FISHING SEASON) AND HELD MULTIPLE SCREENINGS OF IN THE SAME BOAT AROUND THE REGION WHERE EPA COMMENT CARDS WERE COLLECTED.
- THROUGH BBRSDA'S CFBB AND SAVOR BRISTOL BAY LIST-SERVES, 23 COMMERCIAL FISHING ORGANIZATIONS AND BUSINESSES SUBMITTED COMMENTS TO THE EPA ON ITS DRAFT 404(C) DETERMINATION TO PROTECT BRISTOL BAY.
- SENT SIX WAYPOINTS COMMUNICATIONS TO THE BBRSDA MEMBERSHIP ON THE TOPIC OF SUSTAINABILITY.
- PARTNERING WITH UNITED TRIBES OF BRISTOL BAY AND TROUT UNLIMITED, DEVELOPED FISHERMEN-SPECIFIC TALKING POINT DOCUMENTS AND VISITED EVERY COMMUNITY IN BRISTOL BAY WHERE PUBLIC HEARINGS WERE HELD TO PREPARE TESTIFIERS AND ENCOURAGE TURN OUT AT EPA HEARINGS IN THE REGION. 1500 COMMENT POSTCARDS WERE COLLECTED AND SUBMITTED TO THE EPA ON ITS DRAFT 404(C) DETERMINATION TO PROTECT BRISTOL BAY AS A RESULT OF THESE EFFORTS.
- HELD A PHOTO CONTEST DURING THE 2014 FISHING SEASON TO PUT A PERSONAL FACE ON BRISTOL BAY'S FISHING FLEET, GENERATING OVER 1000 PHOTOS AND INCREASING THE TOTAL FACEBOOK FOLLOWING BY OVER 25%.

Schedule O (Form 990 or 990-EZ) (2014)

Employer identification number

20-2660011

Name of the organization BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EXPENSES \$ 110,119.

QUALITY: TO IMPROVE QUALITY AND HENCE, THE VALUE OF THE CATCH BY BUILDING THE CAPACITY AND DESIRE OF THE FLEET TO CHILL PRODUCT DURING HARVEST AND ENCOURAGING ADOPTION OF HANDLING PROCEDURES THAT RESULT IN HIGHER QUALITY SALMON FROM THE POINT OF HARVEST THROUGH TO THE POINT OF THE FOLLOWING STATISTICS QUANTIFY BBRSDA'S WORK TOWARDS SALE. IMPROVING QUALITY FROM 7/1/14 TO 12/31/14:

- RECEIVED THREE FINAL REPORTS ON QUALITY PROJECTS.
- CONTRACTED FOR ONE POST-SEASON RESEARCH PROJECT TO ANALYZE HOW MANY FISHERMEN CHILLED AND WHAT PERCENTAGE OF THE CATCH WAS CHILLED AT THE POINT OF CAPTURE.
- CONTINUED FUNDING ONE GENETICS PROJECT AIMED AT DETERMINING WHETHER OR NOT A FISHERY MANAGEMENT REGIME THAT COULD IMPROVE HARVEST QUALITY WOULD NEGATIVELY IMPACT DISTRICT ESCAPEMENTS.
- PROVIDED ONE NEWSLETTER ARTICLE ABOUT QUALITY ISSUES AND SOLUTIONS.
- CONDUCTED ON QUALITY MEETING DURING PACIFIC MARINE EXPO TO MAXIMIZE FLEET PARTICIPATION.
- BEGAN PLANNING A STRATEGIC QUALITY PLANNING SESSION.
- THE BOARD APPROVED FUNDING FOR THREE LEGACY FY 15 QUALITY PROJECTS,

WITH A NUMBER MORE TBD PENDING THE STRATEGIC PLANNING PROCESS. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 3:

THE EXECUTIVE DIRECTOR IS AN INDEPENDENT CONTRACTOR.

FORM 990, PART VI, SECTION A, LINE 6:

Schedule O (Form 990 or 990-EZ) (2014)

EXPENSES \$ 40,402.

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

Employer identification number 20-2660011

ALL FISHERMEN IN THE BRISTOL BAY DRIFTNET WHO ARE PERMIT HOLDERS IN THE

FISHING FLEET (OTHER THAN THE SETNET FISHERMEN) PAY A SELF-IMPOSED TAX

COLLECTED BY THE STATE OF ALASKA AND APPROPRIATED TO FUND BBRSDA, ARE

VOTING MEMBERS OF THE ASSOCIATION.

FORM 990, PART VI, SECTION A, LINE 7A:

ALL MEMBERS HAVE THE RIGHT TO VOTE FOR THE GOVERNING BODY AND VOTE AT THE ANNUAL MEETING.

FORM 990, PART VI, SECTION B, LINE 11:

THE FORM 990 WILL BE PRESENTED DURING A BOARD MEETING. IT WILL BE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF DIRECTORS AND THE EXECUTIVE DIRECTOR ARE REQUIRED TO SUBMIT ANNUAL FORMS DISCLOSING ANY POSSIBLE CONFLICT OF INTEREST. THEY ARE ALSO REQUIRED TO DISCLOSE AT ANY TIME DURING THE YEAR WHEN A POSSIBLE CONFLICT OF INTEREST DEVELOPS DUE TO THE ASSOCIATION ENTERING INTO, OR CONSIDERING, NEW BUSINESS RELATIONSHIPS. MEMBERS OF THE BBRSDA BOARD ARE NOT PREVENTED FROM PARTICIPATING IN PROGRAMS OFFERED TO BRISTOL BAY FISHERMAN BECAUSE THEY ARE ON THE BOARD, VOTED TO ESTABLISH THE PROGRAM, OR OTHERWISE PARTICIPATE IN PROGRAM ADMINISTRATION, SO LONG AS THEY ADHERE TO NORMAL PROGRAM REQUIREMENTS MADE APPLICABLE TO ALL PARTICIPANTS. FURTHER, IF A BOARD MEMBER PARTICIPATES IN SUCH A PROGRAM AFTER IT WAS ADVERTISED AND MADE AVAILABLE TO ALL BRISTOL BAY FISHERMAN, THEN BOARD STATUS IS NOT RELEVANT TO PROGRAM PARTICIPATION AND A CONFLICT OF INTEREST NEED NOT BE DECLARED IN FURTHER DELIBERATIONS CONCERNING PROGRAM ADMINISTRATION.

5,655.

104,117.

0.

TOTAL EXPENSES

FUNDRAISING EXPENSES

MANAGEMENT AND GENERAL EXPENSES

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.	Employer identification number 20-2660011
CONSULTING AND CONTRACT SERVICES:	
PROGRAM SERVICE EXPENSES	48,492.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	. 0.
TOTAL EXPENSES	48,492.
PUBLIC RELATIONS SERVICES:	
PROGRAM SERVICE EXPENSES	9,661.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	9,661.
BUYBACK AND MARKET ANALYSIS REPORT SERVICES:	
PROGRAM SERVICE EXPENSES	7,305.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	7,305.
OTHER PROFESSIONAL SERVICES :	
PROGRAM SERVICE EXPENSES	1,918.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,918.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	171,493.
PART VIII LINE 1E:	
IN MAY 2006 BRISTOL BAY DRIFNET PERMIT HOLDERS VOTED PUR	SUANT TO ALASKA
STATUTE 43.76.370 TO APPROVE A 1% SEAFOOD DEVELOPMENT TA	X ON THE
332212 08-27-14 36 440.0 5.0 5.7 5.0 3.0 0. 61.0 0.0 3.0 4.0 3	nedule O (Form 990 or 990-EZ) (2014

Name of the organization BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.	Employer identification number 20 – 2660011
EX-VESSEL PRICE OF SEAFOOD SOLD, THE "ASSESSMENT", ON THE	IR HARVESTS TO
SUPPORT BBRSDA. THE TAX IS PAID THROUGH THE STATE OF ALAS	KA AND
APPROPRIATED ANNUALLY AT THE DISCRETION OF THE ALASKA STA	TE LEGISLATURE
TO BBRSDA AS A GRANT.	
IN PREPARING THIS RETURN, BBRSDA HAS CLASSIFIED THE ASSES	SMENT AS A
GOVERNMENTAL GRANT REPORTABLE ON LINE 1E AND NOT PROGRAM	SERVICE
REVENUE REPORTABLE ON LINE 2, PURSUANT TO EXAMPLES 1 AND	2 ON PAGE 38
OF THE INSTRUCTIONS FOR THE 2013 FORM 990.	
	· · · · · · · · · · · · · · · · · · ·

Form 1128 Application To Adopt, Change, or Retain a Tax Year

	iment of the	e Treasury Inf	formation about Form 1	1128 and its separate i	Instructions is availa	able at www.irs gov/form1128.	Sequence No 148
	rt I	General Inform	ation			· - · - ·	50,000,000,000
	mparisni	1 All filers must complete	e Part i and sign below .	See instructions.			
1	Name of f	iler (If a joint return is file	ed, also enter spouse's n	ame) (see instructions)		Filer's identifying number	_ _
1	RISTO	L BAY REGIONAL	L SEAFOOD DEVE	LOPMENT ASSO	CIATION_INC.	20-2660011	
	Number, s	street, and room or suite	no (if a P.O box, see in	nstructions)		Service Center where income tax r	eturn will be filed
듄	300 E D	IMOND BLVD., SL	JITE 3-131 #158			OGDEN, UT	·
5	City or tov	vn, state, and ZIP code				Filer's area code and telephone nu	mber/Fax number
0.1		RAGE. AK 99515				(907) 770-6339 /	
5	Name of a	applicant, if different than	n the filer (see instruction	16)		Applicant's Identifying number (see instructions)
ŀ				وساخون سيدو فسدو فسعا		-	······································
			the applicant or filer, atta	ich a power of attorney)		Contact person's area code and te	ephone number/Fax number
		YM LANCE, CPA				(907) 272-1571 /	
1	_		e box(es) to indic	••	ipplicant (see ir		
	L In	dividual	Cooperative (se			Passive foreign investment	company (PFIC)
	L Pa	artnership	Controlled foreign	gn corporation (CFC)) (sec. 957)	(sec. 1297)	
	E:	state		orporation (FSC) or I	-	Other foreign corporation	
		omestic corporation	domestic interna	ational sales corpora	ition (IC-DISC)	X Tax-exempt organization	
	□ s	corporation	Specified foreign	n corporation (SFC)	(sec 898)	Homeowners Association (s	sec. 528)
	Pe	ersonal service	10/50 corporation	on (sec 904(d)(2)(E))	Other	
	co	rporation (PSC)	Trust			(Specify entity and applicab	le Code section)
3 4	If chace of the character of the charact	Retain a tax year eranging a tax year, is opting or changing applicant's present a tax year at the applicant's ash receipts and differ method (special the nature of the ASSOCIATION'S)	nding ▶ indicate the date the a tax year, the first JULY 1 , that tax year, as statemation. present overall metisbursements metisify) ▶ applicant's busines PRINCIPAL SOURET PERMIT HOLDE	t return or short per 20 14 , and a ed on line 2b above thod of accounting the X Accr	r ends (see instri eriod return will b inding DE re, also its currer g. rual method	nd PSCs: Go to Part III after uctions). Get filed for the tax year CEMBER 31 , 20 14 nt financial reporting year? OM A 1% SEAFOOD DEVELOR ALASKA AND APPEARED ALASKA AND APPEARED STATE OF ALASKA AND APPEARED ALASKA AND APPEARED STATE OF ALASKA AND APPEARED ALASKA	P
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	parer Only		HOMAS, HEAD				92-0043874
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	TIZE (REV 10-2014) BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC. 20-2000011		²age ∠
Par			
	Identify the revenue procedure under which this automatic approval request is filed ▶ 85-58		
Sec	tion A – Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or	its su	rcces.
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year and is allowed to use the automatic approval rules under section 4 of Rev. Proc. 2006-45 (or its successor)? (see instructions)	Yes	No
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period?		\vdash
2	If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions)		
Sec	tion B – Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc.		
	2006-46, or its successor)]	1
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year and is allowed to use the automatic approval rules under section 4 of Rev. Proc. 2006-46 (or its successor)? (see instructions)		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S		1
6	corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4.01(2) of Rev Proc 2006-46 (or its successor)?		
	Attach a statement showing gross receipts for the most recent 47 months. (See instructions for information		J
7	required to be submitted)		-
7 8	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev. Proc. 2006-45		
0	(or its successor) or section 5 04(8) of Rev. Proc. 2002-39 (or its successor)? (see instructions).		
Sec	tion C – Individuals (Rev. Proc. 2003-62, or its successor) (see instructions)		
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year?		
	tion D – Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions)		
	Is the applicant a tax-exempt organization requesting a change?	X	
Par		that	
	applies to the entity. See instructions.) (Rev. Proc. 2002-39, or its successor)		
Sec	tion A General Information	Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination	1	
	by the IRS, before an appeals office, or a Federal court?		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year?		
	If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted. If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented?		ļ
	If "Yes," attach an explanation	-	+-
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev. Proc. 2002-39 (or its		}
	successor)?		<u> </u>
b	If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions). If your business purpose is based on one of the natural business year tests under section 5.03, check the applicable box	:	
	Annual business cycle test Seasonal business test 25-percent gross receipts test		
_	Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short		
	period. If necessary, estimate the amount for the short period		
	Short period \$ First preceding year \$	1	
	Second preceding year \$ Third preceding year \$		
	Note: Individuals, enter adjusted gross income. Partnerships and S corporations, enter ordinary income.		
	Section 501(c) organizations, enter unrelated business taxable income. Estates, enter adjusted total income. All other applicants, enter taxable income before net operating loss deduction and special deductions.		

romi i	1128 (REV 10-2014) BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC. 20-2060011	P	age 3
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period.	Yes	No
	Generated Expiring		
	Net operating loss \$ \$		
	Capital loss \$ \$ Unused credits \$ \$!
7	Unused credits		
•	Rev. Proc. 2002-39, or its successor)		
8a	Is the applicant a U.S shareholder in a CFC?	-	
Vu	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the		-
	percentage of total combined voting power of the applicant, and the amount of income included in the gross		
	income of the applicant under section 951 for the 3 tax years immediately before the short period and for the		·
	short period		1
þ	Will each CFC concurrently change its tax year?		<u>. </u>
	If "Yes" to line 8b, go to Part II, line 3		
	If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U.S. shareholder		
9a	Is the applicant a U.S shareholder in a PFIC as defined in section 1297?		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the		
	percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net		
	capital gain from the PFIC included in the income of the applicant		
	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund?		ļ
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation,		
	a shareholder of an IC-DISC, or a shareholder of an FSC?		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust,		
	estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of		
	interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year		,
	and for the short period. Indicate the percentage of gross income of the applicant represented by each amount.		:
	Will any partnership concurrently change its tax year to conform with the tax year requested?	-	<u> </u>
<u>с</u> 11	If "Yes" to line 10b, has any Form 1128 been filed for such partnership?		<u> </u>
	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office?		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc.) and the specific issues		
	involved in each request	ĺ	
12	Is Form 2848 , Power of Attorney and Declaration of Representative, attached to this application?	ł	
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the		
	IRS proposes to disapprove the application?		
14	Enter amount of user fee attached to this application (see instructions)		·
Sect	ion B – Corporations (other than S corporations and controlled foreign corporations) (see instructions)		
15	Enter the date of incorporation		
		Yes	No
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short		
	period?		
b	If "Yes," will the corporation be going to a permitted S corporation tax year?		
	If "No" to line 16b, attach an explanation.	_	
17	Is the corporation a member of an affiliated group filing a consolidated return?		ļ
	If "Yes," attach a statement providing (a) the name, address, identifying number used on the consolidated		
	return, tax year, and Service Center where the applicant files the return; (b) the name, address, and identifying		
	number of each member of the affiliated group, (c) the taxable income (loss) of each member for the 3 years		1
	immediately before the short period and for the short period; and (d) the name of the parent corporation.		
18a	Personal service corporations (PSCs) Attach a statement providing each shareholder's name, type of entity	1	
	(Individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and		
	amount of income received from the PSC for the first preceding year and the short period.		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year		
	Grandfathered (attach copy of letter ruling) Section 444 election (date of election)		
	Letter ruling (date of letter ruling (attach copy))	i i	1

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Letter ruling (date of letter ruling (attach copy))		!
Attach a statement providing each shareholder's name, type of shareholder (ındıvidual, estate, qualified		
subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying		
number, tax year, percentage of ownership, and the amount of income each shareholder received from the S		
corporation for the first preceding year and for the short period.		
on D – Partnerships (see instructions)		
Enter the date the partnership's business began. ▶	Yes	No
Is any partner applying for a corresponding change in tax year?		
Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust,		
corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of		
interest in capital and profits		
Is any partner a shareholder of a PSC as defined in Regulations section 1.441-3(c)? ▶		
If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in		
capital and profits, and the amount of income received from each PSC for the first preceding year and for the		
short period		
If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year		
		L!
		!
	Yes	No
		-110
on G – Estates		
ion G – Estates Enter the date the estate was created		
Enter the date the estate was created	son w	/ho
Enter the date the estate was created Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each per	son w	/ho
Enter the date the estate was created Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each per is an interested party of any portion of the estate		/ho
Enter the date the estate was created Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each per is an interested party of any portion of the estate Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the	ne	/ho
Enter the date the estate was created Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each per is an interested party of any portion of the estate Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before	ne	/ho
Enter the date the estate was created Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each per is an interested party of any portion of the estate Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before short period and for the short period.	ne	/ho
Enter the date the estate was created Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each per is an interested party of any portion of the estate Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before	ne e the	vho
	subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period. on D – Partnerships (see instructions) Enter the date the partnership's business began. Is any partner applying for a corresponding change in tax year? Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profits Is any partner a shareholder of a PSC as defined in Regulations section 1.441-3(c)? If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period	Enter the date of the S corporation election ► Enter the date of the S corporation election ► If "Yes," each shareholder applying for a corresponding change in tax year? If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year. Grandfathered (attach copy) of letter ruling)