### COMMITTEE ON NATURAL RESOURCES 113<sup>th</sup> Congress Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

The Reauthorization of the Magnuson-Stevens Fishery Conservation and Management Act – Wednesday, September 11, 2013

For Individuals:

- 1. Name: Jeffrey Dennis Deem
- 2. Address: [Information redacted for privacy]
- 3. Email Address: [Information redacted for privacy]
- 4. Phone Number: [Information redacted for privacy]

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For Witnesses Representing Organizations:

- 1. Name: Jeff Deem
- 2. Name of Organization(s) You are Representing at the Hearing:
- 3. Business Address:
- 4. Business Email Address:
- 5. Business Phone Number:

### For all Witnesses

Mr. Jeff Deem, Recreational Fishing Alliance The 1Reauthorization of the Magnuson-Stevens Fishery Conservation and Management Act – Wednesday, September 11, 2013

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Currently one of two Virginia appointed representatives to the Mid Atlantic Fisheries Management Council. Also served on the Council from 2006 to 2009.

Currently Chairman of the Virginia Marine Resources Commission's (VMRC), Finfish Management Advisory Committee (FMAC).

Served on numerous ad hoc committees for the VMRC.

Recreational fisherman.

Energy Management Diploma from Virginia Tech. Somewhat relevant to the effect of energy production on the environment, including the ocean and fisheries.

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Certified Energy Manager and Vice President of the National Capital Chapter of the Association of Energy Engineers. Somewhat relevant to the effect of energy production on the environment including the ocean and fisheries.

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing. None additional to what is listed above.

d. Any federal grants or contracts (including subgrants or subcontracts) from the Department of Commerce that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

No.

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

None.

f. A list of all federal lawsuits filed against you by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.

None.

g. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Served on numerous MAFMC committees related to the effects of the MSA on fisheries management.

### Witnesses Representing Organizations

Mr. Jeff Deem, Recreational Fishing Alliance The 2Reauthorization of the Magnuson-Stevens Fishery Conservation and Management Act – Wednesday, September 11, 2013

h. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

# RFA member. I have accompanied RFA staff during visits to Congressional offices in the past.

i. Any federal grants or contracts (including subgrants or subcontracts) from the Department of Commerce that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

j. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

k. A list of all federal lawsuits filed against the organization(s) you represent at the hearing by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.

1. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

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Form S	33	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue ( benefit trust or private foundation)	Code (exc	ept black lu	ng	2011
	ent of the <sup>-</sup> Revenue S	The organization may have to use a convict this return to catisfy sta	ate reporti	ing requirem	ents	Open to Public Inspection
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	ck if ap	RECREATIONAL FISHING ALLIANCE INC			-	ntification number
	ress cha	Doing Business As	_	E Teleph	41755 ι <mark>οne nι</mark>	
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		PO BOX 3080	aff	ılıates?		∏Yes 🔽 No
		NEW GRETNA, NJ 08224	H(b) Are	e all affiliates	includ	ed? 🛛 🔽 Yes 🔽 No
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	****		20	12-11-15		
Sign	Signature of officer		Da	te		
Here	GERARD D STRAUB JR CONTROLLER					
	Type or print name and title					
	Preparer's	Check If	Preparer's taxpayer identification number (see instructions)			
Paid	signature	2012-11-15 self- employed <b>F</b>				
Preparer's Use Only	if self-employed),	•		EIN 🕨 51-0305246		
eee emy	address, and ZIP + 4 🖡 7 PHEASANTS RIDGE RD-NORTH					
	WILMINGTON, DE 198071541			Phone no 🕨 (302) 425-0499		
Mau tha TD	·					

Form	990 (2011)			Page <b>2</b>
Par		Service Accomplishments a response to any question in this P	art III	
1	Briefly describe the organization's mis	ssion		
	RFA'S MISSION IS THREE-FOLD (1) TACKLE INDUSTRY JOBS, AND (3) T			
2	Did the organization undertake any sig the prior Form 990 or 990-EZ?			└ Yes \✓ No
	If "Yes," describe these new services			
3	Did the organization cease conducting services?		w it conducts, any program	└ Yes └ No
4	If "Yes," describe these changes on S Describe the organization's program s expenses Section 501(c)(3) and 501 grants and allocations to others, the t	ervice accomplishments for each o (c)(4) organizations and section 49	947(a)(1) trusts are required to r	eport the amount of
	(Code ) (Expenses \$	517,193 including grants of	of \$ ) (Revenue \$	)
	RFA PROGRAMS REPRESENT RECREATIONAL REGIONALLY			SSUES BOTH NATIONALLY &
4b	(Code ) (Expenses \$	including grants o	f \$ ) (Revenue \$	)
	(Code ) (Expenses \$	including grants o	f\$) (Revenue \$	)
ŦĊ				,
4d	Other program services (Describe ir	n Schedule O )		
	(Expenses \$	including grants of \$	) (Revenue \$	)
4e	Total program service expenses 🕨 \$	517,193		
				Form <b>990</b> (2011)

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 🔀	3	Yes	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😨	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 🕏	10		No
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, line10? If "Yes," complete Schedule D, Part VI. 🕏	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .	11b		No
	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? <i>If "Yes," complete Schedule D, Part VIII</i> . 🕄	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 🕏	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete</i> <i>Schedule D, Part X.</i> 🕏	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 📆	12a		No
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 1930	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> " <i>Yes," complete Schedule F, Part I</i> .	14Ь		No
15	Did the organization report on Part IX, column (A ), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If</i> "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the US ? If "Yes," complete Schedule F, Part III and IV • • •	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A ), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Dıd the organızatıon report more than \$15,000 of gross ıncome from gamıng actıvıtıes on Part VIII, lıne 9a? <i>If</i> "Y <i>es," complete Schedule G, Part III</i>	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20Ь		

Page **3** 

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

Form	990 (2011)			Page <b>5</b>
Ра	Statements Regarding Other IRS Filings and Tax Compliance           Check if Schedule O contains a response to any question in this Part V		.୮	-
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
U	<b>1b</b>			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
		2b	Yes	
	<b>Note.</b> 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?	3a		No
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," 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 or securities account)?	4a		No
Ь	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\cdot$ .	5a		No
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50		
Ľ		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
b	organization solicit any contributions that were not tax deductible?	6b		
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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? $\cdot$ .	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	<i>'</i> 9		·
	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised f unds and section $509(a)(3)$ supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
0	Sponsoring organizations maintaining donor advised funds.	8		
9		9a		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	<b>-</b>		<u> </u>
	Initiation fees and capital contributions included on Part VIII, line 12 <b>10a</b>			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club <b>10b</b>			
	facilities	1		
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			
4-	year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by		Ì	İ
	the states in which the organization is licensed to issue qualified health plans           13b           Enter the aggregate amount of reserves on hand         Image: Imag			
	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

orm	990 (2011)			Page <b>6</b>
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7t a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or char O. See instructions.		n Sche	
	Check if Schedule O contains a response to any question in this Part VI	•••	. [~	
Se	ction A. Governing Body and Management		Yes	No
			163	<u> </u>
•	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νο
	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
)	A re any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N 0
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal venue Code.)			
			Yes	No
а	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10Ь	Yes	
а	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
:	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
	Did the organization have a written whistleblower policy?	13		No
	Did the organization have a written document retention and destruction policy?	14		No
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
3	The organization's CEO, Executive Director, or top management official	15a		No
)	Other officers or key employees of the organization	15b		No
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
,	List the States with which a copy of this Form 990 is required to be filed			
:	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
)	☐ O wn website ☐ A nother's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table			
)	State the name, physical address, and telephone number of the person who possesses the books and records of th	ie orga	nızatıor	• <b>•</b> •

THE ORGANIZATION PO BOX 3080 NEW GRETNA, NJ 08224 (609) 404-1060

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's current key employees, 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

🦵 Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

<b>(A )</b> Name and Title	<b>(B)</b> Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						<b>(D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Former Highest compensated employee Key employee Officei Institutional Trustee		Former		MISC)	related organızatıons		
(1) JAMES A DONOFRIO EXECUTIVE DIRECTOR	40 00	х		х				65,400	0	7,732

### Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		1								,
<b>(A)</b> Name and Title	hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						<b>(D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	<b>(E)</b> Reportable compensation from related organizations (W- 2/1099-	<b>(F)</b> Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organızatıons
										<u> </u>
	• • • • •				•					
c Total from continuation sheets d Total (add lines 1b and 1c) .	-				•			65,400	0	7,732
2 Total number of individuals (inc									-	7,752

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

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

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

	or within the organization's tax year		
	(A) Name and business address	<b>(B)</b> Description of services	<b>(C)</b> Compensation
2	Total number of independent contractors (including but not limited to those listed above) \$100,000 of compensation from the organization <b>F</b> 0	who received more than	

# Form 990 (2011) Part VIII Statement of Revenue

				<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns <b>1a</b>					
ou	Ь	Membership dues 1b	242,062				
an S	С	Fundraising events 1c	11,366				
<u>a d</u> i	d	Related organizations 1d					
چ آ	e	Government grants (contributions) 1e					
tion "	f	All other contributions, gifts, grants, and <b>1f</b>	220,311				
έž.	g	Noncash contributions included in					
ŧĕ		lines 1a-1f \$					
o e	h	Total. Add lines 1a-1f		473,739			
<u>e</u>		Busı	ness Code				
шe	2a						
Æ	Ь						
e S	с						
čer v	d						
Ê	e						
Program Service Revenue	f	All other program service revenue					
ž	g	Total. Add lines 2a-2f					
	3	Investment income (including dividends, inte					
		and other similar amounts)	►				
	4	Income from investment of tax-exempt bond proceeds	· ►				
	5	Royalties					
			Personal				
	6a	Gross rents Less rental					
	Ь	expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	•				
			) O ther				
	7a	Gross amount from sales of assets other					
	ь	Less cost or					
		other basis and sales expenses					
	с	Gain or (loss)					
	d	Netgaın or (loss)					
Other Revenue	8a	Gross income from fundraising events (not including \$11,366 of contributions reported on line 1c)					
å		See Part IV, line 18	0				
Ter	ь	Less direct expenses b	0				
ş	с	Net income or (loss) from fundraising events		0			
	9a	Gross income from gaming activities See Part IV , line 19 a					
	Ь	Less direct expenses b					
	с	Net income or (loss) from gaming activities	►				
	10a	Gross sales of inventory, less returns and allowances					
	Ь	Less cost of goods sold b					
	c	Less cost of goods sold b Net income or (loss) from sales of inventory	►				
	<u> </u>		ness Code				
	11a	FISHING TOURNAMENTS	900099	212,469	212,469		
	ь	MISCELLANEOUS INCOME	900099	5,728	5,728		
	c				· · · · · · · · · · · · · · · · · · ·		
	d	All other revenue					┟────┤
		Total. Add lines 11a – 11d					
			•	218,197			
	12	Total revenue. See Instructions	•	691,936	218,197	0	0 Form <b>990</b> (2011)

Do no	neck if Schedule O contains a response to any question in this Part IX ot include amounts reported on lines 6b,	 (A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	65,400	65,400		
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	169,560	141,560	28,000	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,606	5,906	700	
9	Other employee benefits	51,926	51,926		
10	Payroll taxes	22,505	18,780	3,725	
11	Fees for services (non-employees)				
а	Management				
b	Legal	11,005		11,005	
с	Accounting				
d	Lobbying	12,000		12,000	
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	17,398	1,548	15,850	
12	Advertising and promotion	177,810	154,808	9,500	13,502
13	Office expenses	3,340		3,340	
14	Information technology	2,935		2,935	
15	Royalties				
16	Occupancy	878		878	
17 18	Travel	66,382	66,382		
	state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest			<u> </u>	
21 22	Payments to affiliates	E 730		E 734	
22	Depreciation, depletion, and amortization	5,726		5,726	
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	3,364		3, 304	
а	DUES PROCESSING	138,983		138,983	
b	BANK CHARGES & FEES	12,997		12,997	
с	WIB	10,305		10,305	
d	TELEPHONE	9,334	3,154	6,180	
e					
f	All other expenses	14,459	7,729	6,730	
25	Total functional expenses. Add lines 1 through 24f	803,133	517,193	272,438	13,502
26	Joint costs. Check here F [ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

# Part X Balance Sheet

					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing			32,663	1	32,197
	2	Savings and temporary cash investments	•			2	
	3	Pledges and grants receivable, net	•			3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, trustees, highest compensated employees Complete Part II of	key en	nployees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sec persons described in section 4958(c)(3)(B) Complete Part II of		958(f)(1)) and			
		Schedule L				6	
Assets	7	Notes and loans receivable, net			1,000	7	1,000
SS	8	Inventories for sale or use				8	
٨	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part</i> VI of Schedule D	   10a	139,169			
	ь	Less accumulated depreciation	10b	127,648	17,246	10c	11,521
	11	Investments—publicly traded securities	· · ·			11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments-program-related See Part IV, line 11		-		13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		•	50,909	15	44,718
	10	Accounts payable and accrued expenses .	•		63,108		120,243
	18	Grants payable			00,100	17	120,240
						10	
	19 20	Deferred revenue				20	
		Tax-exempt bond liabilities	_				
6S	21	Escrow or custodial account liability Complete Part IV of Schedule	υ.	•		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
lai.		persons Complete Part II of Schedule L		•	126,057		173,678
	23	Secured mortgages and notes payable to unrelated third parties	• •			23	
	24	Unsecured notes and loans payable to unrelated third parties .	• •	•		24	
	25	O ther liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part 2			2 890	25	0
	26	D			2,889		293,921
- Se	26	Total liabilities. Add lines 17 through 25       .       .         Organizations that follow SFAS 117, check here       ▶       ↓       and complete through 20, and block here	ete line	es 27	192,034	20	293,921
nc€		through 29, and lines 33 and 34.			-152,918	~-	240 500
9 9	27	Unrestricted net assets			,		-249,522
ő	28	Temporarily restricted net assets			11,773		319
Fund Balance	29	Permanently restricted net assets				29	
or FL		Organizations that do not follow SFAS 117, check here ▶	comple	ete			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund 🛛 .				31	
	32	Retained earnings, endowment, accumulated income, or other fun	ds			32	
Net	33	Total net assets or fund balances			-141,145	33	-249,203
2	34	Total liabilities and net assets/fund balances			50,909	34	44,718
	-				·	-	Form <b>990</b> (2011)

Par	Reconcilliation of Net Assets           Check if Schedule O contains a response to any question in this Part XI	•		ম.	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6	91,936
2	Total expenses (must equal Part IX, column (A ), line 25)	2			03,133
3	Revenue less expenses Subtract line 2 from line 1	3		- 1	11,197
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		- 1	41,145
5	Other changes in net assets or fund balances (explain in Schedule O)	5			3,139
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		- 2	49,203
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			.Г	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash 🔽 Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? $\cdot$ .		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b		No
с	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A - 133?	e	3a		No
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equirec	3Ь		

## **Additional Data**

Software ID: Software Version: EIN: 22-3417550 Name: RECREATIONAL FISHING ALLIANCE INC

Form 990, Special Condition Description:

**Special Condition Description** 

efile GRAPHIC pr	int - DO NOT PROCESS	6 As Filed Data -			DLN	93493320075942
SCHEDULE C	Political	Campaign and	Lobbying	Activiti	es	OMBNo 1545-0047
(Form 990 or 990- EZ)		omplete if the organizat	ion is described	below.		
Department of the Treasury nternal Revenue Service	► Attach to	Form 990 or Form 990-E	Z. 🕨 See separat	e instructio	ons.	Open to Public Inspection
If the organization an then	swered "Yes," to Form §	990, Part IV, Line 3, or I	Form 990-EZ, Pa	art V, line 4	6 (Political Can	npaign Activities),
	anızatıons Complete Parts I-	A and B Do not complete	e Part I-C			
	than section 501(c)(3)) orga	anizations Complete Parts	s I-A and C belov	v Do not co	mplete Part I-B	
f the organization an ► Section 501(c)(3) org ► Section 501(c)(3) org f the organization an	Nons Complete Part I-A only swered "Yes," to Form 9 anizations that have filed Fo anizations that have NOT file swered "Yes," to Form 9 , or (6) organizations Comp	rm 5768 (election under s ed Form 5768 (election un <b>990, Part IV, Line 5 (Pro</b>	section 501(h)) C ider section 501(	complete Par h)) Comple	t II-A Do not con te Part II-B Do no	nplete Part II-B ot complete Part II-A
Name of the organiza RECREATIONAL FISHING A					Employer ident	ification number
RECREATIONAL FISHING A	ALLIANCE INC				22-3417550	
Part I-A Comple	te if the organization	is exempt under s	ection 501(d	c) or is a	section 527	organization.
	otion of the organization's d andidates for public office i		al campaıgn act	ivities on be	half of or	
2 Political expendi	tures				►	\$12,000
3 Volunteer hours						
Part T-P Compley	te if the organization	is exempt under s	ection 501/	·)(3)		
	t of any excise tax incurred				•	¢
	t of any excise tax incurred				-	⊅
	in incurred a section 4955 f			1955	F	<sup>⇒</sup> □ Yes □ No
		tax, ulu it ille Form 4720	for this year?			ΓYes ΓNo
4a Wasacorrection						i tes i no
b If "Yes," describ	te if the organization	is exempt under s	ection 501(c	r) excent	section 501	(c)(3)
	t directly expended by the f					
	t of the filing organization's					\$
<b>3</b> Total exempt fun	ction expenditures Add line	es 1 and 2 Enter here a	nd on Form 112	0-POL, line	17b 🕨	¢
4 Did the filing org	anızatıon file <b>Form 1120-PO</b>	I for this year?				<sup>⇒</sup> □ Yes □ No
5 Enter the names organization mad amount of politic	, addresses and employer ic le payments For each organ al contributions received th ated fund or a political actio	dentification number (EII nization listed, enter the at were promptly and dir	amount paid fro ectly delivered	m the filing to a separat	organızatıon's fu e political orgar	unds Also enter the nization, such as a
<b>(a)</b> Name	(	<b>b)</b> Address	<b>(c)</b> EIN	filing or	unt paid from ganization's ione, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

Scl	edule C (Form 990 or 990-EZ) 2011				Page <b>2</b>
P	rt II-A Complete if the organization under section 501(h)).	n is exempt under section 501(c)(3)	) and fil	ed Form 5768	(election
	expenses, and share of excess lo	) an affiliated group (and list in Part IV each aff bbying expenditures) ox A and "limited control" provisions apply	ılıated gro	up member's name	, address, EIN,
	Limits on Lobbying (The term "expenditures" means	Expenditures		<b>(a)</b> Filing Organization's Totals	<b>(b)</b> A ffiliated Group Totals
1a	Total lobbying expenditures to influence public	opinion (grass roots lobbying)			
b	Total lobbying expenditures to influence a legi	slatıve body (dırect lobbyıng)			
с	Total lobbying expenditures (add lines 1a and	1b)	Γ		
d	Other exempt purpose expenditures				
e	Total exempt purpose expenditures (add lines	1c and 1d)			
f	Lobbying nontaxable amount Enter the amoun columns	t from the following table in both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
g	Grassroots nontaxable amount (enter 25% of	ine 1f)			
h	Subtract line 1g from line 1a If zero or less, e	nter-0-			
i	Subtract line 1f from line 1c If zero or less, er	ter - 0 -			
j	If there is an amount other than zero on either section 4911 tax for this year?	line 1h or line 1i, did the organization file Form	4720 rep	orting	∏Yes ∏No

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

	Lobbying Expendit	ures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> Total
2a	Lobbying non-taxable amount					
Ь	Lobbying ceiling amount (150% of line 2a, column(e))					
с	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011

# 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)).

	(election under section 501(n)).	(;	a)		(b)	
		Yes	No	Þ	mour	ıt
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					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
с	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	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? If "Yes," describe in Part IV					
j	Total 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					
с	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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c	)(5), o	or se	ectio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		No
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		No
	tilleB Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	II-Ă,			ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a	Current year	2a				
Ь	Carryover from last year	2b				
	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	rt IV Supplemental Information					

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Ret urn Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	PART I-A, LINE 1	VARIOUS ELECTION CAMPAIGN DONATIONS

efile GRAPHIC p	rint - DO NOT PROCESS	As Filed Data -			DLN: 9	3493320	075942
CHEDULE D						DMBNo 15	45-0047
Form 990)		mental Financi				201	11
partment of the Treasury ernal Revenue Service	Part IV, line 6, 7		ered "Yes," to Form 990 11d, 11e, 11f, 12a, or 12 parate instructions.			Open to Inspec	
Name of the organi RECREATIONAL FISHING					l <b>oyer identif</b> i 3417550	icat ion numb	per
	zations Maintaining Dono			unds o	or Accoun	<b>ts.</b> Comple	ete if the
<u> </u>	ation answered "Yes" to Forr		o. radvised funds	(	<b>b)</b> Funds and	d other acco	unts
Total number at	end of year						
Aggregate cont	rıbutıons to (durıng year)						
Aggregate gran	ts from (during year)						
Aggregate valu	e at end of year						
-	ation inform all donors and donor rganization's property, subject to	-		nor advis	sed	∏ Yes	∏ No
used only for cl conferring impe	ation inform all grantees, donors, naritable purposes and not for the rmissible private benefit	benefit of the donor o	donor advisor, or for ai	ny othe	r purpose	<b>∏</b> Yes	∏ No
	vation Easements. Comp			ט רטרוז.	1 990, Part	1v, ime 7.	
Preservati Protection	onservation easements held by t on of land for public use (e g , rec of natural habitat on of open space		Preservation of an Preservation of a			-	ea
•	2a-2d if the organization held a e last day of the tax year	qualified conservation	contribution in the form	n of a co	nservation		
					Held at t	he End of th	e Year
Total number o	f conservation easements			2a			
Total acreage r	estricted by conservation easem	ents		2b			
Number of cons	ervation easements on a certifie	d historic structure ind	luded in (a)	2c			
Number of cons	ervation easements included in (	(c) acquired after 8/17	/06	2d			
	ervation easements modified, tra	ansferred, released, ex	tinguished, or terminate	ed by th	e organizatio	on during	
Number of stat	es where property subject to cons	servation easement is	located 🕨				
	ization have a written policy rega the conservation easements it h		itoring, inspection, hand	dlıng of	violations, a	nd <b>Yes</b>	∏ No
Staff and volun	teer hours devoted to monitoring,	inspecting and enforc	ing conservation easem	nents du	uring the yea	r 🕨	
A mount of expe ►\$	enses incurred in monitoring, insp	ecting, and enforcing o	conservation easements	s durıng	, the year		
Does each con	servation easement reported on l and 170(h)(4)(B)(II)?	ıne 2(d) above satısfy	the requirements of sec	ction		∏ Yes	∏ No
balance sheet,	scribe how the organization repoi and include, if applicable, the tex n's accounting for conservation e	t of the footnote to the					
art IIII Organi	zations Maintaining Colle	ctions of Art, Hist		or Oth	ner Simila	r Assets.	
art, historical t	ion elected, as permitted under S reasures, or other similar assets XIV, the text of the footnote to r	FAS 116, not to repor held for public exhibiti	on, education or researd	ch in fur			ce,
art, historical t provide, in Part If the organizat historical treas	reasures, or other similar assets	FAS 116, not to repor held for public exhibiti ts financial statements FAS 116, to report in I for public exhibition, o	on, education or researd that describes these if its revenue statement a	ch in fur tems and bala	rtherance of ance sheet w	public servio orks of art,	ce,
art, historical t provide, in Part If the organizat historical treas provide the foll	reasures, or other similar assets XIV, the text of the footnote to i ion elected, as permitted under S ures, or other similar assets held	FAS 116, not to repor held for public exhibiti ts financial statements FAS 116, to report in I for public exhibition, o tems	on, education or researd that describes these if its revenue statement a	ch in fur tems and bala	rtherance of ance sheet w rance of pub	public servio orks of art,	
art, historical t provide, in Part If the organizat historical treas provide the foll (i) Revenues in	reasures, or other similar assets XIV, the text of the footnote to in ion elected, as permitted under S ures, or other similar assets held owing amounts relating to these i included in Form 990, Part VIII, In	FAS 116, not to repor held for public exhibiti ts financial statements FAS 116, to report in I for public exhibition, o tems	on, education or researd that describes these if its revenue statement a	ch in fur tems and bala	rtherance of ince sheet w rance of pub	public servic orks of art, lic service,	
art, historical t provide, in Part lf the organizat historical treas provide the foll (i) Revenues ir (ii) Assets incl If the organizat	reasures, or other similar assets XIV, the text of the footnote to in ion elected, as permitted under S ures, or other similar assets held owing amounts relating to these i	FAS 116, not to repor held for public exhibiti ts financial statements FAS 116, to report in I for public exhibition, o tems ine 1 historical treasures, o	on, education or researd that describes these it its revenue statement a education, or research i r other similar assets fo	ch in fur tems and bala n furthe	rtherance of unce sheet w rance of pub ►\$ ►\$	public servic orks of art, lic service,	
art, historical t provide, in Part If the organizat historical treas provide the foll (i) Revenues in (ii) Assets incl If the organizat following amoun	reasures, or other similar assets XIV, the text of the footnote to it ion elected, as permitted under S ures, or other similar assets held owing amounts relating to these it included in Form 990, Part VIII, h uded in Form 990, Part X ion received or held works of art,	FAS 116, not to repor held for public exhibiti ts financial statements FAS 116, to report in I for public exhibition, o tems ne 1 historical treasures, o SFAS 116 relating to	on, education or researd that describes these it its revenue statement a education, or research i r other similar assets fo	ch in fur tems and bala n furthe	rtherance of ince sheet w rance of pub * \$ cial gain, pro	public servic orks of art, lic service,	

For Privacy Act and Paperwork Reduction Act N	otice, see the Intructions for Form 990	Cat No 52283D	Schedule D (Form 990) 2011

chedule D	(Form 990) 2011										Page <b>2</b>
art III	Organizations Maintaining Co	llections of Art, H	isto	rio	al Treasu	res, or C	the	r Similar	Asse	<b>ts</b> (co	ontinued)
	g the organization's accession and othe s (check all that apply)	r records, check any of	the f	follo	-	-		se of its co	llectior	ı	
<b>a</b>   P	Public exhibition	c	I F	_	Loan or excl	nange progi	rams				
b 🦵 s	Scholarly research	e	• Г	_	Other						
с Г Р	Preservation for future generations										
Provi Part >	de a description of the organization's co XIV	ollections and explain h	now th	hey	further the o	rganızatıor	ı's ex	empt purp	ose in		
	ng the year, dıd the organızatıon solıcıt o ts to be sold to raıse funds rather than t							ular	Г	Yes	∏ No
art IV	Escrow and Custodial Arrang Part IV, line 9, or reported an an					answere	d "Y	es" to For	m 990	,	
includ	e organization an agent, trustee, custod ded on Form 990, Part X?					or other ass	ets i	not	Г	Yes	∏ No
<b>b</b> If"Ye	es," explain the arrangement in Part XI\	/ and complete the foll	owing	g ta	ble	г					
_						F			A mou	nt	
	nning balance					ŀ	1c				
	tions during the year					ŀ	1d				
_	ributions during the year					ŀ	1e				
Endır	ng balance					L	1f				
Dıd th	he organization include an amount on Fo	orm 990, Part X, line 2	1?						Γ	Yes	∏ No
	es," explain the arrangement in Part XIV										
Part V	Endowment Funds. Complete		nswe (b)Prie			-orm 990, o Years Back		<u>t IV, line</u> Three Years E		Eour V	ears Back
a Begir	nnıng of year balance						(u)			JIOUIT	
	ributions										
	stment earnings or losses										
	ts or scholarships										
	r expenditures for facilities										
and p	programs										
Admı	inistrative expenses										
, Endo	ofyearbalance										
Provi	de the estimated percentage of the yea	r end balance held as									
Board	d designated or quasi-endowment 🕨										
Perm	anent endowment 🕨										
<b>c</b> Term	endowment 🕨										
	here endowment funds not in the posses nization by	ssion of the organizatio	n tha	at a	re held and a	dministere	d for	the		Yes	No
<b>(i)</b> un	nrelated organizations		•	•			•		3a(i)		
• •	elated organizations						•		3a(ii)		
	es" to $3a(ii)$ , are the related organizatio						•	• • •	3b		
	ribe in Part XIV the intended uses of th										
art VI	Land, Buildings, and Equipme	enτ. See Form 990,	Part								
	Description of property				) Cost or other is (investment)	(b)Cost or basis (otl		(c) Accum deprecia		( <b>d)</b> B	ook value
Land			L								
b Buildin	ngs										

. .

e Other . . .

. .

. . . . . . . . . .

 Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)
 11,521

Schedule D (Form 990) 2011

11,416

105

Part VII Investments-Other Securities. Se	e Form 990, Part X, line 12	
(a) Description of security or category	( <b>b)</b> Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•	-
Part VIII Investments—Program Related. S	See Form 990, Part X, line 1	
(a) Description of investment type	( <b>b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X,	line 15.	
	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Desc	line 15.	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a)       Desc         (a)       Desc         (a)       Desc         (a)       Desc         (b)       Should equal Form 990, Part X, col.(B) line	e 15.)	(b) Book value (b) Book value
Part IX       Other Assets. See Form 990, Part X,         (a) Desc             (a) Desc             Total. (Column (b) should equal Form 990, Part X, col.(B) lim             Part X       Other Liabilities. See Form 990, Part X, col.(B) lim	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	e 15.)	
Part IX       Other Assets. See Form 990, Part X,         (a) Desc             (a) Desc             Total. (Column (b) should equal Form 990, Part X, col.(B) lim             Part X       Other Liabilities. See Form 990, Part X, col.(B) lim	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	
Part IX       Other Assets. See Form 990, Part X, (a) Desc         (a) Desc         (a) Desc	<i>e 15.)</i>	

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Schedule D	(Form 990) 2011
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Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	Its	
1	Total revenue (Form 990, Part VIII, column (A ), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A ), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Ret	turn
1	Total revenue, gains, and other support per audited financial statements	1	
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Ь	Other (Describe in Part XIV)		
с	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per R	eturn
1	Total expenses and losses per audited financial statements	1	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments	1	
с	O ther losses		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	A mounts included on Form 990, Part IX, line 25, but not on line <b>1:</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Ь	Other (Describe in Part XIV)		
с	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)......	5	
Da	t XIV Supplemental Information		

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

Ident if ier Ret urn Reference Explanat ion

efile GRAPHIC print - DO NO	)T PRC	CESS	As File	ed Data	1 -			D	LN: 93	4933200	)75942
Schedule L (Form 990 or 990-EZ)	"Yes" o	► on Form o	Complete i 990, Part I r Form 990	f the org V, lines 2 -EZ, Part	nterested P anization answere 25a, 25b, 26, 27, 20 V lines 38a or 401	ed 8a, 28b, o.	or 28c,			<b>201</b>	1
Department of the Treasury nternal Revenue Service	► Atta	ich to Fo	orm 990 or I	Form 990	-EZ. ⊫See separat	e instru	ictions.		C	) pen to Inspec	
Name of the organization RECREATIONAL FISHING ALLIANCE INC							E	mployer id	lent if ica	tion numb	er
Part I Excess Benefit Tran			otion E01	(0)(2) 0	nd costion E01			2-34175			
Part I Excess Benefit Tran Complete of the organizat		•								ine 40b	
1 (a) Name of disqu	ualıfıed	person		(b) Description of transaction					<b>(c)</b> C	orrected	
											No
2 Enter the amount of tax impos section 4958	ed on th	ie organi	zation man	agers or	dısqualıfıed perso	ons duri • •	ng the y	ear undei	\$ ——		
<b>3</b> Enter the amount of tax, If any	, on line	2, abov	e, reimburs	ed by th	e organızatıon .			🕨	\$		
Part II Loans to and/or I	From 1	Interes	sted Per	sons.							
Complete if the organiz					, Part IV, line 26,	or Forn	n 990-E	Z, Part V	, lıne 38	а	
(b) Loan to (a) Name of interested person and or from the (c)Or		<b>(c)</b> O rig principal	gınal	(d)Balance due	<b>(e)</b> In ance due default?				<b>(g)</b> Written agreement?		
	Тο	From				Yes	No	Yes	No	Yes	No
(1) ROBERT T HEALEY					172 670		N	N		V	
WORKING CAPITAL ADVANCES	X				173,678		No	Yes	-	Yes	
	+							_	+		
Total	·			► \$	173,678						
Part IIII Grants or Assistar	ice Be	nefitti	ng Inter	ested F	Persons.						
Complete if the orga	inizatio					·	7.				
(a) Name of interested pers	on	(Ь	-	•	en interested per	son	<b>(c)</b> Am	iount of a	ant or tv	/pe of assi	stance
(_, of			ar	nd the org	ganization		x- <i>1</i>				

### **Part IV** Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	<b>(b)</b> Relationship between interested person and the	<b>(c)</b> A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No

### Part V

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Ident if ier	Return Reference	<b>Explanat</b> ion	
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Schedule L (Form 990 or 990-EZ) 2011

efile GRAPHIC pri	nt - DO NOT PROCESS	As Filed Data -		DLN: 93493320075942
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury Internal Revenue Service	Complete to provi			OMB No 1545-0047 <b>2011</b> Open to Public Inspection
Name of the organizatio RECREATIONAL FISHING ALLI			<b>Employe</b> 22-341	r identification number

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE BOARD TREASURER IS RESPONSIBLE FOR THE FORM 990 PREPARATION AND SUBMITS THE FORM TO MANAGEMENT FOR APPROVAL BEFORE FILING
	FORM 990, PART VI, SECTION C, LINE 19	AVAILABLE FOR INSPECTION UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	PRIOR PERIOD ADJUSTMENTS 3,139