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Department of the Treasury Internal Revenue Service

## **PUBLIC INSPECTION COPY**

## **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. Go to www.irs.gov/Form990 for instructions and the latest information.



A	For th	e 2022 calendar year, or tax year beginning and	ending	_						
В	Check it applicat	DRIDIOD DAI REGIONAL SEAFOOD		D Employer identifie	cation number					
	Addr chan	DEVELOPMENT ASSOCIATION, INC.								
	Nam chan	ge Doing business as		20-26600	11					
	Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number									
	Final	$\gamma$ 1 3703 ARCITC DIVD "1100		(907) 67	7-2371					
	termi ated	<sup>n-</sup> City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	3,044,231.					
	Amer	ANCHORAGE, AR 99505		H(a) Is this a group re						
	Appl tion	F Name and address of principal officer: ANDI WINK		for subordinates	? Yes 🔀 No					
	pend	SAME AS C ABOVE		H(b) Are all subordinates in	icluded? Yes No					
<u> </u>	Tax-e>	Kempt status:         501(c)(3)         X         501(c) (         6         )         (insert no.)         4947(a)(1) (	or 🛄 527	If "No," attach a	list. See instructions					
-	Webs			H(c) Group exemption						
	_	f organization: 🗶 Corporation 🔄 Trust 🦲 Association 🔄 Other	L Year	of formation: 2005	State of legal domicile: AK					
P	art I	Summary	<u> </u>							
e	1	Briefly describe the organization's mission or most significant activities: TO M BRISTOL BAY FISHERY FOR THE BENEFIT OF I	AXIMI2	DEDG DY EOG	OF THE					
Activities & Governance										
verr	2	Check this box if the organization discontinued its operations or disposed by the second seco		1.1	sets. 7					
Ĝ	3				7					
<del>م</del>	4	Number of independent voting members of the governing body (Part VI, line 1b)			4					
itie	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		10						
ž	-	Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12			0.					
Ă		Net unrelated business taxable income from Form 990-T, Part I, line 12			0.					
	<u> </u>			Prior Year	Current Year					
<b>n</b>	8	Contributions and grants (Part VIII, line 1h)		1,799,045.	2,972,757.					
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.					
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		519.	71,474.					
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,799,564.	3,044,231.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,490,901.	2,205,081.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
Se	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		445,503.	474,958.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
ďx	b	Total fundraising expenses (Part IX, column (D), line 25)	0.							
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		354,181.	792,985.					
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,290,585.	3,473,024.					
	19	Revenue less expenses. Subtract line 18 from line 12		-491,021.	-428,793.					
Net Assets or Fund Balances			Be	eginning of Current Year	End of Year					
Sset	20	Total assets (Part X, line 16)	······	4,997,281.	4,589,183.					
et A	21	Total liabilities (Part X, line 26)		333,178.	353,873.					
		Net assets or fund balances. Subtract line 21 from line 20		4,664,103.	4,235,310.					
1 1 1	ar í fl	Signature Block								

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

	COPY									
Sign	Signature of officer	Date								
Here	Here ANDY WINK, EXECUTIVE DIRECTOR									
	Type or print name and title									
	Print/Type preparer's name Preparer's signature	Date Check PTIN								
Paid	AUDREY M. LANCE, CPA Oudry M.	Lahce, CPA 11/8/2023 Iself-employed P01381407								
Preparer	Firm's name THOMAS, HEAD & GREISEN, PC	Firm's EIN 92-0043874								
Use Only	Firm's address 1400 WEST BENSON BLVD., 400									
	ANCHORAGE, AK 99503-3683 Phone no. (907) 272-1571									
May the IF	May the IRS discuss this return with the preparer shown above? See instructions									
232001 12-1	232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)									
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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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Check I Schedule O contains a response or note to any line in this Part II. TO MAXINIZE THE VALUE OF THE BRISTOL BAY FISHERY FOR THE BENEFIT OF IT'S MEMBERS BY FOCUSING ON THE ECONOMIC WELLBEING OF DERSIDA MEMBERS. SUPPORTING A SUSTAINABLE BRISTOL BAY COMMERCIAL FISHERY, AND PROVIDING THE HIGHEST QUALITY WILD SALMON PRODUCTS. Do the organization undertake any significant program services during the year which were not listed on the proform 600 or 900-E27 Do the organization undertake any significant program services during the year which were not listed on the proform 600 or 900-E27 Do the organization case conducting, or make significant changes in how it conducts, any program services? Do the organization case conducting, or make significant changes in how it conducts, any program services, as measured by comments. Section 5010(2) and 5010(4) comparisations are required to report the annual ord grant and advactams to them, the total separese, and revenue, if any, for each program service accompletionments to each of its three largest program services, as measured by comments. Section 5010(2) and 5010(4) comparison and the program service accompletion method constant and advactams to them, the total separese, and revenue, if any, for each program service accompletion and the program services as the section of the total section of the total section of the total section of the total section of the section of the total section of the sect		· · · · · · · · · · · · · · · · · · ·
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BRISTOL BAY	REGIONAL SEA	FOOD
DEVELOPMENT	ASSOCIATION,	INC.

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		Х
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 Rev. Proc. 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5	х	
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? If "Yes," complete Schedule D, Part I	6		X
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	8		x
9	Schedule D, Part III	0		
5	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		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	<u> </u>		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
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		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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	11c		X
d	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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			x
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
IZd	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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> . See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
10	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		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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	Х	
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Form 990 (2022)

Part IV Checklist of Required Schedules

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# BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

			Yes	No			
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	X				
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current						
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete						
	Schedule J	23	X	<b> </b>			
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			
<b>b</b>	Schedule K. If "No," go to line 25a	24a					
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
C		24c					
Ь	any tax-exempt bonds?	240 24d					
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2 <del></del>					
Lou	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	200					
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete						
	Schedule L, Part I	25b					
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current						
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%						
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X			
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,						
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled						
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X			
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,						
	instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a		x			
	"Yes," complete Schedule L, Part IV						
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		X			
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f			x			
00	"Yes," complete Schedule L, Part IV	28c 29		X			
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29					
30	contributions? If "Yes," complete Schedule M	30		x			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			<u> </u>			
	Schedule N, Part II	32		x			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations						
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and						
	Part V, line 1	34		X			
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X			
b	If "Yes" to line 35a, 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					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?						
	If "Yes," complete Schedule R, Part V, line 2	36		<b> </b>			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v			
~~	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X			
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	00	x				
Pa	Note: All Form 990 filers are required to complete Schedule O           Statements Regarding Other IRS Filings and Tax Compliance	38					
	Check if Schedule O contains a response or note to any line in this Part V						
			Yes	No			
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 26		103				
b		_					
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
	(gambling) winnings to prize winners?	1c	Х				
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Form 990 (2022)

Part IV Checklist of Required Schedules (continued)

2022.05000 BRISTOL BAY REGIONAL SEAFOO 61080\_1

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#### BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				Yes	No
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	4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b		L
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).				37
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		Х
	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 soli	cit			v
	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		
7	Organizations that may receive deductible contributions under section 170(c).	novor0	7-		
a L	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the		7a 7h		
	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		
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d		70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require		7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 10		7h		
8	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?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12 10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders 11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
40	amounts due or received from them.)		40		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	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. Is the organization licensed to issue qualified health plans in more than one state?		13a		
a	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.		104		
h	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans 13b				
с	Enter the amount of reserves on hand 13c				
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?		15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		Х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				
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232005 12-13-22

Form 990 (2022)

17351101 759209 61080

5 2022.05000 BRISTOL BAY REGIONAL SEAFOO 61080\_1

**Section A. Governing Body and Management** 

20-2660011 Page 6 7b below, and for a "No" response

Χ

Form 990 (2022)	DEVELOPMENT	ASSOCIATION,	INC.	20-266
Part VI Governance,	Management, and	Disclosure. For each "	es" response to lines/	2 through 7b below, and fo

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

			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 on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	7		
2	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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		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 appoint one or			
	more members of the governing body?	. 7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	. 7b		X
В	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	. 8a	X	
	Each committee with authority to act on behalf of the governing body?		X	
)	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	. 9		X
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		_	_
			Yes	_
)a	Did the organization have local chapters, branches, or affiliates?	. 10a		X
b	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?	. 10b	_	
а	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
а	Did the organization have a written conflict of interest policy? If "No," go to line 13	. 12a	_	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	. 12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	. 12c		
3	Did the organization have a written whistleblower policy?	13	X	
1	Did the organization have a written document retention and destruction policy?	. 14	X	
5	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?			
	The organization's CEO, Executive Director, or top management official	. <b>15</b> a	X	
b	Other officers or key employees of the organization	. 15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	. <b>16</b> a		X
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		
	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed <b>NONE</b>			
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)	(3)s onl	y) ava	ilable
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,	and fina	ancial	
	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 books and records			
	THE FORAKER GROUP - 907-743-1200			
	161 KLEVIN STREET, SUITE 101, ANCHORAGE, AK 99508			
2006	5 12-13-22	For	n <b>99(</b>	<b>)</b> (2022)
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51	101 759209 61080 2022.05000 BRISTOL BAY REGIONAL SEAFO	D 61	080	1

Form 990 (2	2022)	DEVELOPMENT	ASSOCIATION,	, INC.	20-2
Part VII	Compensation	of Officers, Direc	ctors, Trustees, Key	/ Employees,	, Highest Compensated
	Employees, an	d Independent Co	ontractors		

#### Check if Schedule O contains a response or note to any line 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.
 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer an	10 a 0 1	recto	or/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee	suadu		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	ual tr	ional		yolqr	t con /ee	_	1099-NEC)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) ANDREW WINK	45.00	_			×	1 0				
EXECUTIVE DIRECTOR				x				172,550.	Ο.	8,500.
(2) LILANI DUNN	40.00									
MARKETING DIRECTOR						X		108,160.	0.	3,483.
(3) MICHAEL JACKSON	2.00									
PRESIDENT		Х		Х				15,600.	0.	0.
(4) ERICK SABO	2.00									
VICE PRESIDENT		Х		Х				4,700.	0.	0.
(5) DOUG MORGAN	2.00								_	_
SECRETARY / TREASURER		Х		х				4,800.	0.	0.
(6) FRITZ JOHNSON	2.00									_
DIRECTOR		Х						7,600.	0.	0.
(7) MARK NIVER	2.00									-
DIRECTOR		Х						6,300.	0.	0.
(8) FRANZ SCHONBERG	2.00									
DIRECTOR		Х						4,300.	0.	0.
(9) PETER ANDREW	2.00							0 700		•
DIRECTOR		X						2,700.	0.	0.
(10) REBA TEMPLE	2.00							1 200	0	0
DIRECTOR, RESIGNED APRIL		X						1,300.	0.	0.
(11) NELS URE	2.00							1 400	0	0
DIRECTOR, RESIGNED APRIL		X						1,400.	0.	0.
(12) PATRICK O'NEILL	2.00							1 400	0	0
DIRECTOR, RESIGNED APRIL		X						1,400.	0.	0.
(13) GEORGE WILSON	2.00							4 500	0	0
DIRECTOR, RESIGNED SEPTEMBER		X						4,500.	0.	0.
				<u> </u>						
				├						
			-	-						
232007 12-13-22	I	I	I	I	I	I	I			Form <b>990</b> (2022)

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Form **990** (2022)

17351101 759209 61080

2022.05000 BRISTOL BAY REGIONAL SEAFOO 61080\_\_1

	990 (2022) DEVELOPM	ENT ASSO	C	ΓAΊ	'IC	ΟN	, -	EN	с.	20-20	<u>560</u>	011	Р	age <b>8</b>
Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	, and	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average			Pos				Reportable	Reportable		Es	timat	ed
		hours per	box	, unles	ss pe	rson	e than is bot	h an		compensatio		an	nount	of
		week	offi	cer an	d a d	irecto	or/trus	tee)	from	from related	1		other	
		(list any	ector						the	organization	s	com	pensa	ation
		hours for	Individual trustee or director				ted		organization	(W-2/1099-MIS	SC/	fr	om th	e
		related	stee c	rustee			ien sa		(W-2/1099-MISC/	1099-NEC)		•	aniza	
		organizations	al tru:	onal ti		loyee	e mb		1099-NEC)				d rela	
		below line)	ividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	anizat	ions
			ц.	lus	Off	Key	e <u>Fi</u> c	Ē			$\rightarrow$			
											$\rightarrow$			
											$\rightarrow$			
												- 1	1 0	0.2
	Subtotal								335,310.		0.	T	1,9	83.
	Total from continuation sheets to Part V								0.		0.			0.
d	Total (add lines 1b and 1c)								335,310.		0.	1	1,9	83.
2	Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bov	e) wł	no r	eceived more than \$100	,000 of reportab	e			_
	compensation from the organization													2
											_		Yes	No
3	Did the organization list any former officer,	director, trust	ee, ł	key e	emp	loye	e, o	r hig	ghest compensated emp	oloyee on				
	line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4	For any individual listed on line 1a, is the su													
	and related organizations greater than \$15									C C		4	Х	
5	Did any person listed on line 1a receive or a									idual for services				
-	rendered to the organization? If "Yes," com	-				-						5		x
Sec	tion B. Independent Contractors			0, 00		00.0						<u> </u>		
1	Complete this table for your five highest co	mnensated in	dene	ndo	nt c	ont	racto	nre t	that received more than	\$100.000 of com	nens	ation f	rom	
•	the organization. Report compensation for	-	-								pene		10111	
	(A)	the calendar y	car	enui	iy v	VILII	01 10		(B)	year.		(0	••	
	Name and business	address	N	ONE	5				Description of s	ervices	C	ompe		n
				/111					•			-		
								_						
								_						
2	Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se li	stec	d above) who received n	nore than				
	\$100,000 of compensation from the organi	zation				(	0							
											_	Form	990 (	(2022)

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Form 990 (2022)

#### BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Pa	rt V	/111	Statement of Revenue						
			Check if Schedule O contains a respo	nse	or note to any lir	ne in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue		<b>(D)</b> Revenue excluded from tax under sections 512 - 514
nts nts	1	а	Federated campaigns 1a						
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues 1b						
ts, ( Am		с	Fundraising events 1c						
Gif			Related organizations 11						
ns, Sim				2,	972,757.				
er S		f	All other contributions, gifts, grants, and						
Oth			similar amounts not included above 1f						
ont nd (		-	Noncash contributions included in lines 1a-1f						
a C		h	Total. Add lines 1a-1f			2,972,757.			
•	_				Business Code				
Program Service Revenue	2								
Ser		b							
ver.		c d							
Be		u e							
Pro			All other program service revenue						
			Total. Add lines 2a-2f						
	3	3	Investment income (including dividends, in						
			other similar amounts)			71,474.			71,474.
	4		Income from investment of tax-exempt bo						
	5		Royalties						
			(i) Real		(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
	7	а	Gross amount from sales of (i) Securit	ies	(ii) Other				
			assets other than inventory <b>7a</b>						
ø		b	Less: cost or other basis						
Revenue			and sales expenses 7b						
leve		C d	Gain or (loss) 7c						
	•	a	Net gain or (loss) Gross income from fundraising events (not						
Other	0		including \$ of						
Ŭ			contributions reported on line 1c). See						
			Part IV, line 18	8a					
		b	Less: direct expenses	8b					
			Net income or (loss) from fundraising ever	nts	•				
	9	а	Gross income from gaming activities. See						
			Part IV, line 19	9a					
		b	Less: direct expenses	9b					
		С	Net income or (loss) from gaming activities	s <u></u>					
	10	а	Gross sales of inventory, less returns						
			and allowances						
			Less: cost of goods sold	10b					
		С	Net income or (loss) from sales of inventor	ry					
sne	44	~			Business Code				
nec	11								<u> </u>
ella		b c							
Miscellaneous Revenue			All other revenue						
Σ			Total. Add lines 11a-11d						
	12	-	Total revenue. See instructions			3,044,231.	0.	0.	71,474.
23200		-13-						•	Form <b>990</b> (2022)

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### BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

Form 990 (2022) DEVELOPMENT A: Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to any line in this Part IX								
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)				
7b,	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			<b>3</b>					
	and domestic governments. See Part IV, line 21	2,168,318.	2,168,318.						
2	Grants and other assistance to domestic								
_	individuals. See Part IV, line 22	36,763.	36,763.						
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,								
Ŭ	trustees, and key employees	172,550.	156,821.	15,729.					
6	Compensation not included above to disqualified	,							
Ŭ	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages	245,739.	232,094.	13,645.					
8	Pension plan accruals and contributions (include								
0	section 401(k) and 403(b) employer contributions)	19,040.	15,715.	3,325.					
9	Other employee benefits	10,040.		5,525•					
9 10		37,629.	32,525.	5,104.					
11	Payroll taxes Fees for services (nonemployees):	57,025.	52,525.	5,1010					
	Management	157,317.	120,978.	36,339.					
		39,768.	120,570.	39,768.					
	Accounting	55,700.		55,700.					
	Lobbying Professional fundraising services. See Part IV, line 17								
	Investment management fees								
f									
g	column (A), amount, list line 11g expenses on Sch 0.)	20,409.	17,124.	3,285.					
10		39,731.	39,731.	5,205.					
12	Advertising and promotion	30,867.	25,818.	5,049.					
13	Office expenses	2,527.	25,010.	2,527.					
14 15	Information technology	2,52,•		2,527.					
15	Royalties	6,477.	100.	6,377.					
16 17		42,138.	42,138.	0,0,7,					
	Travel Payments of travel or entertainment expenses	12,1500	12/1500						
18	,								
19	for any federal, state, or local public officials Conferences, conventions, and meetings	142,821.	142,737.	84.					
19 20		,~	,						
20 21	Interest Payments to affiliates								
21	Depreciation, depletion, and amortization								
22		4,424.		4,424.					
23 24	Other expenses. Itemize expenses not covered	-,		_,					
27	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),								
-	amount, list line 24e expenses on Schedule 0.) POINT OF SALE / RETAIL	289,755.	289,755.						
a	PRINTING AND NEWSLETTER	16,751.	14,857.	1,894.					
b	TITING AND NEWSDELLER	10,751.	14,00/.	1,094.					
C									
d									
e	All other expenses	2 172 001	3 335 171	137,550.	0.				
25	Total functional expenses. Add lines 1 through 24e	3,473,024.	3,335,474.	137,330.	0.				
26	<b>Joint costs</b> . 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)								
					Form <b>990</b> (2022)				
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232010 12-13-22

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Form	990	(2022)
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#### BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

orm 990 Part X			20-	2000011 Page 11
	Check if Schedule O contains a response or note to any line in this Part X			
		<b>(A)</b> Beginning of year		(B) End of year
1	Cash - non-interest-bearing	932,208.	1	523,131.
2		4,064,893.	2	4,061,367.
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
<u>9</u> 7	Notes and loans receivable, net		7	
Assets	Inventories for sale or use		8	
∛   9	Prepaid expenses and deferred charges	180.	9	4,685.
10	a Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
	b Less: accumulated depreciation 10b		10c	
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 33)	4,997,281.	16	4,589,183.
17	Accounts payable and accrued expenses	90,248.	17	104,428.
18	Grants payable	242,930.	18	249,445.
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ซู 22	Loans and other payables to any current or former officer, director,			
Ē	trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities	controlled entity or family member of any of these persons		22	
┛   23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	333,178.	26	353,873.
ر د	Organizations that follow FASB ASC 958, check here $X$			
2Ce	and complete lines 27, 28, 32, and 33.			
<u>la</u> 27	Net assets without donor restrictions	4,664,103.	27	4,235,310.
<u>m</u> 28	Net assets with donor restrictions		28	
ň	Organizations that do not follow FASB ASC 958, check here			
2	and complete lines 29 through 33.			
<u>1</u> 9 ع	Capital stock or trust principal, or current funds		29	
8 30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances 8 2 2 7 1 0 6 8 2 2 7 2 2 8 2 2 2 2	Retained earnings, endowment, accumulated income, or other funds		31	
<b>e</b> 32	Total net assets or fund balances	4,664,103.	32	4,235,310.
33	Total liabilities and net assets/fund balances	4,997,281.	33	<b>4</b> ,589,183. Form <b>990</b> (2022)

Form **990** (2022)

232011 12-13-22

	BRISTOL BAY REGIONAL SEAFOOD						
-	DEVELOPMENT ASSOCIATION, INC.	20-26	60011	Pa	ge <b>12</b>		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
			~ ~ ^ /		~ 1		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,04				
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,47	<u>3,0</u>	24.		
3	Revenue less expenses. Subtract line 2 from line 1	3	-42				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,66	4,1	03.		
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			0.		
9							
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	4,23	<u>5,3</u>	10.		
Pa	rt XII 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: L Cash X Accrual Conter						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.					
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 reviewed	l 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 separat	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 th	e audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits						
			_	000	(0000)		

Form **990** (2022)

232012 12-13-22

SCHEDULE C	Pc	olitical Campaign a	and Lobbyin	g Activities	OMB No. 1545-0047
(Form 990)	For Org	anizations Exempt From Income	Tax Under section	501(c) and section 527	2022
		if the organization is described			Onen te Dublie
Department of the Treasury Internal Revenue Service	Go	o to www.irs.gov/Form990 for in	structions and the la	test information.	Inspection
		n Form 990, Part IV, line 3, or Fo		ne 46 (Political Campaign	Activities), then
	-	nplete Parts I-A and B. Do not con	-		
		01(c)(3)) organizations: Complete I	Parts I-A and C below.	. Do not complete Part I-B.	
<ul> <li>Section 527 organization and</li> </ul>	•	• Part I-A only. • Form 990, Part IV, line 4, or Foi	m 990_E7 Dort VI li	no 47 (Lobbying Activitio	c) than
		have filed Form 5768 (election und			
	-	have NOT filed Form 5768 (election			
	-	n Form 990, Part IV, line 5 (Proxy	-		
Tax) (See separate inst				,	, , ( <b>·</b>
<ul> <li>Section 501(c)(4), (5)</li> </ul>	), or (6) organizat	tions: Complete Part III.			
Name of organization		BAY REGIONAL SEA		Emp	loyer identification number
		MENT ASSOCIATION,			20-2660011
Part I-A Comple	ete if the org	anization is exempt unde	er section 501(c)	or is a section 527 o	organization.
		ation's direct and indirect politica			
		ures			
3 Volunteer hours for	political campai	gn activities			
Part I-B Comple	ete if the ord	anization is exempt unde	er section 501(c)(	3).	
		incurred by the organization unde			
		incurred by organization manager			
		n 4955 tax, did it file Form 4720 fo			
		·			
<b>b</b> If "Yes," describe ir	n Part IV.				
Part I-C Compl	ete if the org	anization is exempt unde	er section 501(c),	•	
		d by the filing organization for sec			ŝ
		ization's funds contributed to oth			
					S
	•	. Add lines 1 and 2. Enter here an			
		<b>1120-POL</b> for this year?			
		tion listed, enter the amount paid		-	
	-	omptly and directly delivered to a			· · · · · · · · · · · · · · · · · · ·
political action com	mittee (PAC). If	additional space is needed, provid	de information in Part	IV.	
(a) Name	e	(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	1
For Paperwork Reduct	ion Act Notice,	see the Instructions for Form 99	90 or 990-EZ.	:	Schedule C (Form 990) 2022

232041 11-08-22

	BRISTOL BAY	REGIONAL S	EAFOOD				
Schedule C (Form 990) 2022	DEVELOPMENI	' ASSOCIATIC	N, INC.		2660011 Page 2		
Part II-A Complete if the org section 501(h)).	anization is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (e	election under		
	tion bolongs to an aff	iliatod aroup (and list i	n Part IV each affiliated	aroup mombor's par	no addross EIN		
	e of excess lobbying		TT art IV each anniated	group member s na	ne, address, Env,		
	, ,	nd "limited control" pro	ovisions apply.				
	ts on Lobbying Expe litures" means amou	nditures unts paid or incurred.	)	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals		
1a Total lobbying expenditures to influ	uence public opinion (	grassroots lobbying)					
<b>b</b> Total lobbying expenditures to influ	uence a legislative bo	dy (direct lobbying)					
c Total lobbying expenditures (add li	nes 1a and 1b)						
	d Other exempt purpose expenditures						
e Total exempt purpose expenditure							
f Lobbying nontaxable amount. Ente			11				
If the amount on line 1e, column (a) o	.,	bying nontaxable am					
. ,	Not over \$500,000     20% of the amount on line 1e.						
Over \$500,000 but not over \$1,000 Over \$1,000,000 but not over \$1,5	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 \$1,5							
	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 (en							
<b>h</b> Subtract line 1g from line 1a. If zero	,						
i Subtract line 1f from line 1c. If zero							
j If there is an amount other than ze reporting section 4911 tax for this	ro on either line 1h or	line 1i, did the organiz			Yes No		
(Some organizations th	nat made a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns I	below.		
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period				
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	( <b>d)</b> 2022	(e) Total		
<b>2a</b> Lobbying nontaxable amount							
<b>b</b> Lobbying ceiling amount							
(150% of line 2a, column(e))							
c Total lobbying expenditures							
d Grassroots pentsysble smarret							
d Grassroots nontaxable amount e Grassroots ceiling amount							
(150% of line 2d, column (e))							
<b>f</b> Grassroots lobbying expenditures							

Schedule C (Form 990) 2022

232042 11-08-22

# BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.

# 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 on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	ying activity.	Yes	No	Amo	ount
local or re <b>a</b> Volu	ng the year, did the filing organization attempt to influence foreign, national, state, or legislation, including any attempt to influence public opinion on a legislative matter ferendum, through the use of: nteers? staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	ia advertisements?				
d Maili	ngs to members, legislators, or the public?				
	ications, or published or broadcast statements?				
	its to other organizations for lobbying purposes?				
	ct contact with legislators, their staffs, government officials, or a legislative body?				
	es, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Othe	er activities?				
j Tota	I. Add lines 1c through 1i				
	he activities in line 1 cause the organization to be not described in section 501(c)(3)?				
<b>b</b> If "Ye	es," enter the amount of any tax incurred under section 4912				
	es," enter the amount of any tax incurred by organization managers under section 4912				
d If the	e 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), section 501(c)(6).	on 501(c)	(5), or se	ection	
	001(0)(0).			Yes	No
1 Were	e substantially all (90% or more) dues received nondeductible by members?		1		X
	he organization make only in-house lobbying expenditures of \$2,000 or less?			X	
	the organization agree to carry over lobbying and political campaign activity expenditures from the				X
Part III-			-	ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	• •			e 3, is
1 Dues	s, assessments and similar amounts from members		1		
	ion 162(e) nondeductible lobbying and political expenditures (do not include amounts of polition				
expe	enses for which the section 527(f) tax was paid).				
a Curr	ent year		2a		
<b>b</b> Carr	yover from last year		2b		
<b>c</b> Tota			2c		
3 Aggr	regate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
	tices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
does	$\mathfrak s$ the organization agree to carryover to the reasonable estimate of nondeductible lobbying and $\mathfrak p$	olitical			
	enditures next year?				
	ble amount of lobbying and political expenditures. See instructions		5		
Part IV					
instruction	e descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group s); and Part II-B, line 1. Also, complete this part for any additional information. ULE C , PART III-A, LINE	) list); Part I	I-A, lines 1 a	and 2 (See	
AS DI	SCLOSED ON SCHEDULE B PART I BBRSDA RECEIVED FUN	DS FRO	OM THE	STATI	E OF
ALASK	A. PURSUANT TO REV. PROC. 98-19, FOR THE PURPOSE	OF MI	EETING	THE	
REQUI	REMENTS OF IRC SECTION 6033(E)(3) THE AMOUNTS RE	PORTEI	O ON S	CHEDUI	LE B
PART	1, LINES 1 AND 2 ARE CONSIDERED (SIMILAR AMOUNTS	) AS A	A RESU	LT OF	
MEETI	NG THE 90% TEST SET FORTH IN SECTION 4.03 OF THE	REVE			
232043 11-08	3-22		Schedu	ie C (Form	990) 2022

	BRISTOL BAY DEVELOPMENT nation (continued)			20-2660011 Page 4
BBRSDA CONSIDERS THE	FUNDS RECE	VED FROM TH	IE STATE OF ALAS	KA AS
AUTHORIZED, BUT NOT	MANDATED BY	ALASKA STAT	UTE 43.76.380(D	) AND REPORTED
ON SCHEDULE B, TO BE	WITHIN THE	DEFINITION	OF (SIMILAR AMO	UNTS) CONTAINED
IN SECTION 5.01 OF R	EV. PROX. 98	8-19.		
ACCORDINGLY QUESTION	1 IN PART	II-A HAS BE	EEN ANSWERED YES	•
232044 11-08-22				Schedule C (Form 990) 2022
351101 759209 61080	2022	20 .05000 BRIS	TOL BAY REGIONAI	SEAFOO 610801

(Forr	CHEDULE D orm 990) partment of the Treasury ernal Revenue Service Serv				OMB No. 1545-0047 <b>2022</b> Open to Public Inspection			
-				ation.				
Nam	e of the organizati	DEVELOPMENT ASSOCI			Employer	identificat ) – 2660		
Pa	t I Organiza	ations Maintaining Donor Advise		s or A				
Fai		n answered "Yes" on Form 990, Part IV, lin		5 UI A	ccounts.	Jompiete ir	the	
	organizatio		(a) Donor advised funds	()	) Funds and	l other acco	ounts	
				(,			Junio	
1		nd of year						
2		f contributions to (during year)						
3		f grants from (during year)						
4		t end of year						
5	-	on inform all donors and donor advisors in	-					
~		on's property, subject to the organization's				Ves		_ No
6	0	on inform all grantees, donors, and donor a						
		ooses and not for the benefit of the donor o	, , , , , ,		0			٦.,
Pa	impermissible priv	ation Easements. Complete if the org	ranization analysis of "Voo" on Form 000			Ves		_ No
				Part IV,	line 7.			
1		servation easements held by the organizat						
		of land for public use (for example, recrea	·				ea	
		f natural habitat	Preservation o	f a certif	ied historic s	structure		
•		n of open space						
2		through 2d if the organization held a quali	fied conservation contribution in the form	i of a coi ۲		asement or It the End of		
	day of the tax yea			ł			line raz	( i cai
		onservation easements			2a			
b		ricted by conservation easements			2b			
		vation easements on a certified historic str		·····	2c			
d		vation easements included in (c) acquired	•					
-	historic structure listed in the National Register							
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax							
	year							
4		where property subject to conservation ea						
5	0	tion have a written policy regarding the pe						٦.,
~	,	orcement of the conservation easements i				└── Yes		_ No
0	Stan and voluntee	er hours devoted to monitoring, inspecting,	nandling of violations, and enforcing cor	iservatio	n easement	s during th	e year	
-				-+:				
7	Amount of expens	ses incurred in monitoring, inspecting, hand	aling of violations, and enforcing conserva	ation eas	sements dur	ing the yea	Ir	
•			a action the requirements of eaction 17		(1)			
8		vation easement reported on line 2(d) abov				Yes		No
•		)(4)(B)(ii)? be how the organization reports conservati						
9		•	•			the		
	,	d include, if applicable, the text of the foot	note to the organization's infancial staten	nems ma	at describes	une		
Pa		ounting for conservation easements. ations Maintaining Collections o	f Art Historical Treasures or (	)ther S	Similar As	sets		
		f the organization answered "Yes" on Form						
10	· · · · · · · · · · · · · · · · · · ·	elected, as permitted under FASB ASC 95		and hal	noo ohoot y			
Ia	0	, 1	, 1					
	-	easures, or other similar assets held for pul			ice of public			
h	· •	Part XIII the text of the footnote to its final			a baat wark	o of		
b	-	elected, as permitted under FASB ASC 95						
		sures, or other similar assets held for public	exhibition, education, or research in fun	inerance	of public se	ervice,		
	•	ing amounts relating to these items:			¢			
		ded on Form 990, Part VIII, line 1			<b>^</b>			
•	.,		anuran, ar othar similar aposto far finansi					
2		received or held works of art, historical tre		ai yain, p	JUOVIDE			
-	-	unts required to be reported under FASB A	-		¢			
		on Form 990, Part VIII, line 1						
		Form 990, Part X					m 000	1 2000
	-	eduction Act Notice, see the Instruction	3 IVI FUIII 330.		Sched	lule D (For	111 990	, 2022
23205	09-01-22		21					
			-					

17351101 759209 61080 2022.05000 BRISTOL BAY REGIONAL SEAFOO 61080\_\_1

			NAL SEAFOO					_	
		MENT ASSOC					60011		
Par	t III   Organizations Maintaining C	ollections of A	rt, Historical Tr	easures, or Oth	ier Si	imilar Asse	ts(continue	əd)	
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	following that make	signifi	icant use of its			
	collection items (check all that apply):								
а	Public exhibition	d	I Loan or exc	hange program					
b	Scholarly research	e	Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organization's ex	empt p	purpose in Par	t XIII.		
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	sures, or other simil	ar asse	ets			
	to be sold to raise funds rather than to be ma						Yes	No No	
Par	t IV Escrow and Custodial Arran								
	reported an amount on Form 990, Par		<b>-</b>			,			
1a	Is the organization an agent, trustee, custod		liary for contribution	s or other assets no	t inclu	Ided			
	on Form 990, Part X?		•				Yes	No No	
h	If "Yes," explain the arrangement in Part XIII					······	_ 100		
, N			nowing table.		Г		Amount		
•	Paginning balance					1c			
	Beginning balance								
	Additions during the year					1d			
	Distributions during the year				····  -	1e			
	Ending balance				L	1f			
	Did the organization include an amount on Fe				-	····· ــــ	Yes		
	b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.								
Par	t V Endowment Funds. Complete i						() [		
		(a) Current year	<b>(b)</b> Prior year	(c) Two years back	. ,		.,		
1a	Beginning of year balance	2,817,236.	2,816,947.	3,373,946.		2,814,470.		96,424.	
b	Contributions	1,000,000.	1,000,000. 746,284. 5						
с	Net investment earnings, gains, and losses	51,524.	289.	14,813.		61,574.		45,225.	
d	Grants or scholarships	1,000,000.							
е	Other expenditures for facilities								
	and programs			571,812.		248,382.	3	70,000.	
f	Administrative expenses								
	End of year balance	2,868,760.	2,817,236.	2,816,947.		3,373,946.	2,8	14,470.	
2	Provide the estimated percentage of the curr	rent vear end baland							
	Board designated or quasi-endowment	100	%	.,,					
b	Permanent endowment	%							
č		/°							
Ŭ	The percentages on lines 2a, 2b, and 2c sho								
30	Are there endowment funds not in the posse		ation that are hold a	nd administored for	tho				
Jd		ssion of the organiz	alion lhat are heiù a	ind administered for	uie		<b>v</b>	es No	
	organization by:							X	
	(i) Unrelated organizations						3a(i)		
	(ii) Related organizations						3a(ii)		
	If "Yes" on line 3a(ii), are the related organiza						3b		
4	Describe in Part XIII the intended uses of the		owment funds.						
Par	t VI Land, Buildings, and Equipm					10			
	Complete if the organization answere		<u> </u>						
	Description of property	<b>(a)</b> Cost or o basis (investr	• •	• • •	Accum eprecia	nulated ation	<b>(d)</b> Book v	alue	
1a	Land								
	Buildings								
	Leasehold improvements								
	Equipment								
	Other								
	Add lines 1a through 1e. (Column (d) must e		X. column (R) line 1	/0c.)				0.	
Total		gaari onni 000, i alt				<u> I</u>	D (Farma 0	-	

Schedule D (Form 990) 2022

232052 09-01-22

	ASSOCIATION,	INC.	20-2660011 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val	uation: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of val	uation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, P	
	Description		(b) Book value
(1)			
<u>(2)</u>			
<u>(3)</u>			
<u>(4)</u>			
(5)			
(6)			
(7)			
(8)			
(9)	- 15 \		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities.	e 15.)	<u></u>	
Complete if the organization answered "Yes"	on Form 000 Part IV line	110 or 11f Soo Form	990 Part X lino 25
	on ronn 990, Fait IV, line		(b) Book value
<u> </u>			
(1) Federal income taxes			
(2)			
(3)			
<u>(4)</u>			
(5)			
<u>(6)</u>			
(7)			
(8)			
(9) Tatal (Column (b) must actual Form 000, Port V, col. (D) (in			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin			
2. Liability for uncertain tax positions. In Part XIII, provide	e the text of the foothote to	o the organization's fin	ancial statements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

Schedule D (Form 990) 2022

232053 09-01-22

	BRISTOL BAY REGIONAL SEAFC	DOD		
Sche	dule D (Form 990) 2022 DEVELOPMENT ASSOCIATION, I	INC.	20-2	2660011 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Reve	nue per Return	) <b>.</b>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.		
1	Total revenue, gains, and other support per audited financial statements		1	3,044,231.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	. 2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		_
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			3,044,231.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a		
b	Other (Describe in Part XIII.)	. 4b		
С	Add lines 4a and 4b			0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	3,044,231.
			•	
	t XII Reconciliation of Expenses per Audited Financial Staten	nents With Expo	•	
	t XII         Reconciliation of Expenses per Audited Financial Staten           Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	nents With Expo a.	enses per Retu	rn.
	t XII Reconciliation of Expenses per Audited Financial Staten	nents With Expo a.	enses per Retu	
Pa	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With Expo	enses per Retu	rn.
Pa 1	t XII         Reconciliation of Expenses per Audited Financial Staten           Complete if the organization answered "Yes" on Form 990, Part IV, line 12a           Total expenses and losses per audited financial statements	nents With Expo	enses per Retu	rn.
Pa 1 2	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With Expo a. 2a	enses per Retu	rn.
Pa 1 2 a	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses	2a         2b           2c         2c	enses per Retu	rn.
Pa 1 2 a b c d	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a         2a           2b         2c           2c         2d	enses per Retu	rn.
Pa 1 2 a b c d	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d	2a         2a           2b         2c           2c         2d	enses per Retu	rn. 3,473,024. 0.
Pa 1 2 a b c d	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a         2a           2b         2c           2c         2d	enses per Retu	rn.
Pa 1 2 a b c d e	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a         2a           2b         2c           2c         2d	enses per Retu	rn. 3,473,024. 0.
Pa 1 2 a b c d e 3	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a         2b           2b         2c           2d         2d	enses per Retu	rn. 3,473,024. 0.
Pa 1 2 a b c d e 3 4	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a         2b           2b         2c           2d         2d	enses per Retu	rn. 3,473,024. 0.
Pa 1 2 a b c d e 3 4 a	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a         2b           2b         2c           2d         2d           2d         2d	enses per Retu 1 2e 3 4c	rn. 3,473,024. 0. 3,473,024. 0.
<b>Pa</b> 1 2 a b c d e 3 4 a b c 5	t XII       Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a         2b           2b         2c           2d         2d           2d         2d	enses per Retu 1 2e 3 4c	rn. 3,473,024. 0.

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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART V, LINE 4:

THE BOARD HAS ESTABLISHED A DESIGNATED FUND FOR THE PURPOSE OF ENSURING
THAT THE ASSOCIATION HAS OPTIONS IRRESPECTIVE OF THE OUTCOME OF ANY ONE
SEASON. THE BASELINE RESERVE AMOUNT IS SET AT \$2,500,000. THIS AMOUNT MAY
BE REVISED BY THE BOARD VIA ACTION AT A BOARD MEETING OR AN EMAIL VOTE.
PRIOR TO EACH FISCAL YEAR, THE BOARD WILL IDENTIFY RESERVE FUNDS NEEDED
FOR SPECIFIC FUTURE NEEDS. THIS RESERVE COMPONENT IS INTENDED TO HOLD BACK
FUNDS FOR FORESEEABLE ORGANIZATIONAL NEEDS. INVESTMENT RESERVE FUNDS ARE
INTENDED TO BE SPENT ON MISSION-APPROPRIATE ACTIVITIES AS THEY ARISE AND
CAN BE DRAWN UPON WITH APPROVAL OF THE BOARD.

232054 09-01-22

hedule D	(Form 990)	) 2022	]

# BRISTOL BAY REGIONAL SEAFOOD Schedule D (Form 990) 2022 DEVELOPMENT ASSOCIATION, INC. Part XIII Supplemental Information (continued)

32055 09-01-22 51101 759209 61080	20	22.05000	25 BRISTOL	BAY	REGIONA	L SEAFOO	610801
						Schedule I	D (Form 990) 202

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Go	Grants and Oth overnments, ar lete if the organizatio	nd Individual	l <b>s in the Ŭni</b> ' on Form 990, Pa n 990.	ted States rt IV, line 21 or 22.		OMB No. 1545-0047 2022 Open to Public Inspection
Name of the organization BRISTOL B	AY REGION	NAL SEAFOOD					Employer identification number
		ATION, INC.					20-2660011
Part I General Information on Grants a							
<ol> <li>Does the organization maintain records a criteria used to award the grants or assis</li> <li>Describe in Part IV the organization's pro-</li> </ol>	stance?						
Part II Grants and Other Assistance to recipient that received more than a	-			• •	anization answered "א	/es" on Form 990, Par	t IV, line 21, for any
<b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACTION MARY							
1902 E ALOHA STREET							VARIOUS MARKETING
SEATTLE, WA 98112	81-3656036		15,450.	0.			ASSISTANCE
ALASKA LONGLINE FISHERMEN'S ASSOCIATION - PO BOX 1229 - SITKA,							FOR VARIOUS
AK 99835	01-0951115	501(C)(6)	10,000.	0.			SUSTAINABILITY PROJECTS
BRISTOL BAY NATIVE CORPORATION 111 W 16TH AVENUE #400 ANCHORAGE, AK 99501	92-0141709		50,000.	0.			SEATTLE ARENA PARTNERSHIP
BRISTOL BAY SCIENCE & RESEARCH INSTITUTE - P.O. BOX 1464 - DILLINGHAM, AK 99576	92-0168036	501(C)(3)	97,425.	0.			VARIOUS SALMON RESEARCH AND SUSTAINABILITY PROJECTS
CENTRAL PENINSULA REFRIGERATION 47130 HARVARD AVENUE SOLDOTNA, AK 99669	26-0278094		15,000.	0.			RSW APPRENTICE PROGRAM
COASTWISE PRESS, LLC P.O. BOX 11609 OLYMPIA, WA 98508	02-2460381		17,500.	0.			CAPT'N JACK'S TIDE AND CURRENT ALMANAC
<ul> <li>2 Enter total number of section 501(c)(3) a</li> <li>3 Enter total number of other organization</li> </ul>							

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

Schedule I (Form 990) 2022

Schedule I (Form 990)

DEVELOPMENT ASSOCIATION, INC.

		ATION, INC.					D-2000011 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANIEL EDELMAN, INC							
21992 NETWORK PLACE							VARIOUS MARKETING
CHICAGO, IL 60673	36-2368817		90,400.	٥.			ASSISTANCE
KDLG							
P.O. BOX 670							
DILLINGHAM, AK 99576	99-0031132		50,000.	0.			FISHERIES REPORT PROJECT
MARINE REFIGERATION SOLUTIONS 6240 OAK BAY ROAD							
PORT LUDLOW, WA 98365	46-3803731		15,000.	0.			RSW APPRENTICE PROGRAM
MODERN CAREER WOMAN							
4545 W 31ST AVENUE							VARIOUS MARKETING
DENVER, CO 80212	85-4288836		14,500.	0.			ASSISTANCE
MRJ AND ASSOCIATES 2313 ORELANS DRIVE							
TALLAHASSEE, FL 32308	65-0731908		66,000.	0.			RETAIL CHAIN PROMOTIONS
OCEAN BEAUTY SEAFOODS P.O. BOX 70739							
SEATTLE, WA 98127	20-8899430		20,000.	0.			ICE BARGE PROJECTS
OCEAN STRATEGIES 1122 EAST PIKE STREET #761							GOVERNMENT COMMUNICATION
SEATTLE, WA 98122	46-3781584		27,808.	٥.			PROJECT
RISING TIDE COMMUNICATIONS							
430 W. 7TH AVENUE SUITE 21							VARIOUS MARKETING
ANCHORAGE, AK 99501	47-2620897		531,694.	0.			PROJECTS
SALMON STATE	ļ						CFBB HABITAT PROTECTION
1201 CONNECTICUT AVENUE NW, SUITE : WASHINGTON, DC 20036	20-5806345		60,000.	0.			OUTREACH AND COMMUNICATION
MADITINGTON, DC 20030	20-3000343		00,000.	U.			COMMUNICATION

Schedule I (Form 990)

Schedule I (Form 990)

DEVELOPMENT ASSOCIATION, INC.

		AITON, INC.					D-2000011 Page
Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TENEDOD ANALYMICA DDA GO ECODA							
SEAFOOD ANALYTICS DBA CQ FOODS, INC - 6857 S STAPLES #219 - CORPUS							
CHRISTI, TX 78413	46-5090218		17,500.	0.			CQR PROJECT
2011011, 12 /0415	40-3090210		17,500.	0.			CQK FROBECI
THE CONSERVATION FUND							SUSTAINABILITY RESEARCH
700 W 2ND AVENUE							AND PRESERVATION OF PED
ANCHORAGE, AK 99501	52-1388917	501(C)(3)	1,000,000.	0.			BAY
	51 1000517	501(0)(0)	1,000,000.				
TRIDENT SEAFOODS							
5303 SHILSHOLE AVENUE NW							ICE BARGE TO IMPROVE
SEATTLE, WA 98107	47-0702463		20,000.	0.			QUALITY OF SALMON
,			,				

Schedule I (Form 990)

#### Schedule I (Form 990) 2022

#### DEVELOPMENT ASSOCIATION, INC.

20-2660011

Page 2

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

_

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ORGANIZATION MAY PUBLICIZE A GRANT PROJECT AND SOLICIT APPLICATIONS.

GRANTEE IDEAS MAY ALSO BE BROUGHT FORWARD BY INDIVIDUAL PROPOSAL OR

REQUEST. ALL GRANTS ARE APPROVED BY THE BOARD OF DIRECTORS, (CURRENTLY NO

SEPARATE GRANT COMMITTEE). ALL GRANTEES SIGN A GRANT AGREEMENT, WHICH

INCLUDES REPORTING REQUIREMENTS.

A GRANT MAY INCLUDE INTERIM AND FINAL REPORTING, OR ONLY FINAL REPORTING.

THE GRANT AGREEMENT DESCRIBES THE EXEMPT PURPOSE AND INCLUDES A LIMITATION

BRISTOL BAY REGIONAL SEAFOOD	
Schedule I (Form 990) DEVELOPMENT ASSOCIATION, INC.	20-2660011 Page 2
Part IV Supplemental Information	
ON THE USE OF FUNDS TO THE PURPOSE. IN ORDER TO FACILITATE	MORE TIMELY
REPORTING THE ORGANIZATION MAY HOLD BACK 20% TO 50% OF THE	TOTAL GRANT
AMOUNT UNTIL A PROGRESS REPORT IS RECEIVED. IF THE REPORT	SHOWS APPROPRIATE
PROGRESS THE REMAINDER OF THE GRANT WILL BE REMITTED.	

Schedule I (Form 990)

232291 04-01-22

SC	SCHEDULE J Compensation Information		1	OMB No. 1545-0047				
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	22	)		
•		Compensated Employees		ZU	<b>_</b> _	-		
Dono	rtmont of the Treesury			Open to	Publ	ic		
		Go to www.irs.gov/Form990 for instructions and the latest information.		•	ction			
Nan	ne of the organization		Employer ide			mber		
		· · · · · · · · · · · · · · · · · · ·	20-26	<u>6001</u>	1			
Pa	rt I Question	s Regarding Compensation						
					Yes	No		
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	ı 990,					
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or c	harter travel Housing allowance or residence for perso	nal use					
	Travel for com							
	Discretionary s	spending account Personal services (such as maid, chauffer	ur, chef)					
b	•							
				1b				
2								
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2				
-								
3								
			ion to					
	·							
	Form 990 of o	ther organizations	ommittee					
	During the upon dia	any never listed on Form 000. Doubly!! Costion A line to with respect to the filing						
4								
~	•			4a		x		
						X		
						X		
C				+0				
	Only section 501(c	)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5			on					
-								
а	•			5a				
b	Any related organiz	ation?		5b				
6			on					
а				6a				
b	Any related organiz	ation?		6b				
7	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	s					
				7				
8								
				8				
9	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. <u>Attach to Form 990.</u> <u>Go to www.irs.gov/Form690 for instructions and the latest information.</u> Name of the organization         REISTOL BAY REGIONAL SEAFODD         Employer 1 20 - 2            Part II. Questions Regarding Compensation         Employer 1 20 - 2          Complete Part III to provide any relevant information regarding these items.           Part II. Section A, line 1a. Complete Part III to provide any relevant information regarding these items.         Part VI. Section A, line 1a. Complete Part III to provide any relevant information regarding these items.           Part VI. Section A, line 1a. Complete Part III to provide any relevant information regarding these items.         Part VI. Section A, line 1a. Complete Part III to provide any relevant information regarding these items.           Discretionary spending account         Personal services (such as maid, chauffeur, chef)           D if the organization require substantiation prior to embursing or allowing persones incured by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?           3         Indicate which, if any, of the following the organization used to estabilish the compensation of the organization to estabilish compensation study to ECO/Executive Director, but explain in Part III.           Compensation committee         Xi Written employment contract           Indicate which, if any, of the following the organization arelated vaganization require the explanization arrangeme							
	<ul> <li>Discretionary spending account</li> <li>Personal services (such as maid, chauffeur, chef)</li> <li>If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</li> <li>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?</li> <li>Indicate which, if any, of the following the organization used to establish the compensation of the organization to establish compensation of the CEO/Executive Director, but explain in Part III.</li> <li>Compensation committee</li> <li>Compensation committee</li> <li>Written employment contract</li> <li>Independent compensation consultant</li> <li>Form 990 of other organizations</li> <li>Approval by the board or compensation committee</li> <li>During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</li> <li>Receive a severance payment from a supplemental nonqualified retirement plan?</li> <li>Participate in or receive payment from a supplemental nonqualified retirement plan?</li> <li>Participate in or receive payment from a supplemental nonqualified mounts for each item in Part III.</li> <li>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</li> <li>For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the retenues of:</li> <li>The organization?</li> <li>May related organization?</li> <li>May related organization?</li> <li>May related organization?</li> <li>Any related organization?</li> <li>May related organization?</li> <li>May related organization?</li> <li>May r</li></ul>			9				
LHA			Schedule	J (Forr	n 990	) 2022		

232111 10-18-22

Schedule J (Form 990) 2022

DEVELOPMENT ASSOCIATION, INC.

20-2660011

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) ANDREW WINK	(i)	157,289.	15,261.	0.	8,500.	0.	181,050.	0.	
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

THE BOARD OF DIRECTORS APPROVES EXECUTIVE DIRECTOR COMPENSATION AGREEMENT.

Schedule J (Form 990) 2022

SCHEDULE O

(Form 990)

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

OMB No 1545-0047

Open to Public

Inspection

Employer identification number 20-2660011

Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

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

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 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

CLINGS, ICE SPEARS, INFORMATIONAL CARDS, AND BRANDED APRONS;

DEVELOPMENT OF CO-BRANDED PR ASSETS; AND SOCIAL MEDIA SUPPORT.

-ATTENDED 4 TRADE SHOWS: SENA (SEAFOOD EXPO NORTH AMERICA), PACIFIC

MARINE EXPO (PME), LOCAL CATCH NETWORK SUMMIT, GSE (GLOBAL SEAFOOD

EXPO)

-ATTENDED 2 INDUSTRY CONFERENCES: ASMI'S ANNUAL ALL-HANDS & NFI'S

GLOBAL SEAFOOD MARKET CONFERENCE

-SPONSORED/PARTICIPATED IN 3 MARKETING EVENTS: ALASKA SYMPHONY OF

SEAFOODS, SEAFOOD 101, LOCAL CATCH NETWORK

-ADDED DIGITAL ASSETS TO ONLINE MEDIA LIBRARY.

-SUPPORTED A CONSUMER FACING WEBSITE, AS WELL AS A BBSS

FACEBOOK, INSTAGRAM, TIKTOK, AND YOUTUBE PAGES.

-COMMISSIONED SOCKEYE MARKET AND CONSUMER REPORTS AND PRESENTATIONS AT

MEMBER MEETINGS

-CREATION OF NEW VIDEO AND PHOTOGRAPHY ASSETS HIGHLIGHTING THE FISHERY

AND PRODUCT ATTRIBUTES OF BRISTOL BAY SOCKEYE SALMON.

-THE MARKETING COMMITTEE MET 10 TIMES IN SUPPORT OF THE MARKETING

PROGRAM.

-OVER 300 CONTACTS ARE SUBSCRIBED TO OUR QUARTERLY NEWSLETTERS.

-5 PRESS RELEASES HIT THE WIRE: RECORD-BREAKING HARVEST, FRESH BRISTOL

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Schedule O (Form 990) 2022 Name of the organization BRISTOL BAY REGIONAL SEAFOOD	Page 2 Employer identification number
DEVELOPMENT ASSOCIATION, INC.	20-2660011
BAY SOCKEYE PROMOTIONS, BRISTOL BAY SOCKEYE SALMON WEEK I	N DC, BRISTOL
BAY SOCKEYE SALMON WEEK IN SEATTLE, AND BRISTOL BAY CHOIC	E AT SYMPHONY
OF SEAFOOD	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHME	ENTS:
OWNED BY THE PEDRO BAY NATIVE CORPORATION. THIS CONSERVAT	ION EASEMENT
WILL PREVENT INDUSTRIAL DEVELOPMENTS, SUCH AS TRANSPORTAT	ION CORRIDORS
FOR LARGE-SCALE MINING OPERATIONS, BUT ALLOW THE LAND TO	STILL BE USED
FOR RECREATION, CULTURAL, AND SUBSISTENCE ACTIVITIES.	
-THE BOARD SUPPORTED CFBB IN DOING STAKEHOLDER OUTREACH A	ND
COMMUNICATION SUPPORT FOR THE PEBBLE MINE EFFORTS.	
-THE BOARD COMMITTED \$40,983 TO THE BRISTOL BAY FISHING C	OLLABORATIVE,
A GROUP THAT ASSISTS THE ALASKA DEPT OF FISH & GAME TO CO	NDUCT SALMON
ASSESSMENT PROJECTS AND OTHER SCIENTIFIC RESEARCH IN BRIS	TOL BAY,
INCLUDING THE FIRST YEAR OF ON-BOARD GENETICS ANALYSIS.	FISHERY
MANAGEMENT WAS ALSO SUPPORTED BY PROVIDING \$56,442 FOR EX	PANDED
OPERATIONS IN THE PORT MOLLER TEST FISHERY. THESE PROJECT	S RESULTED IN
BETTER INFORMATION ABOUT THE SALMON RUN TIMING AND DESTIN	IATION, AS WELL
AS PROVIDING SUPPORT FOR FISHERY MANAGEMENT AND RESOURCE	
SUSTAINABILITY.	
-BOARD APPROVED FUNDING IN THE AMOUNT OF \$1,342,153 FOR T	'HE
SUSTAINABILITY PROGRAM IN 2022.	
-THE SUSTAINABILITY COMMITTEE MET 6 TIMES IN SUPPORT OF T	'HE
SUSTAINABILITY PROGRAM.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHME	INTS:
-PUBLISHED 10 ELECTRONIC NEWSLETTERS AND DISTRIBUTED TO M	IEMBERS.

-SURVEYED MEMBERSHIP ABOUT WHAT WERE THE BIGGEST PRIORITIES FOR THE Schedule O (Form 990) 2022 232212 10-28-22 35

<sup>2022.05000</sup> BRISTOL BAY REGIONAL SEAFOO 61080\_1

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

#### FLEET.

-THE OUTREACH COMMITTEE MET 4 TIMES IN SUPPORT OF THE OUTREACH PROGRAM.

-HOSTED TWO MEMBER MEETINGS, ONE IN DILLINGHAM, AK IN THE SPRING AND

ONE IN SEATTLE, WA IN THE FALL.

-CONDUCTED OUTREACH TO THE SETNET FISHING FLEET REGARDING JOINING THE

ORGANIZATION.

-HOSTED A PRESENTATION BY FISHING BUSINESS TAX PROFESSIONALS FOR

MEMBERS.

-PROVIDED INFORMATION FOR MEMBERS TO ACCESS INFORMATION ABOUT APPLYING

FOR VARIOUS COVID AID OPPORTUNITIES AND PROGRAMS. ADVOCATED FOR

MEMBERS' ELIGIBILITY IN THESE PROGRAMS.

-BOARD APPROVED \$148,165 IN FUNDING FOR ORGANIZATION AND OUTREACH

PROJECTS IN 2022 AND \$97,444 WAS ACTUALLY EXPENDED.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

QUALITY: TO IMPROVE FISH QUALITY BY: BUILDING THE CAPACITY AND DESIRE

IN THE FLEET TO CHILL FISH AT THE POINT OF HARVEST, SUPPORTING

MAINTENANCE OF THE MACHINERY THAT ALLOWS THE FLEET TO DO SO, AND

INVESTING IN TECHNOLOGY THAT CAN ACCURATELY MEASURE FISH QUALITY SO

FISHERMEN ARE PAID FOR THEIR EFFORTS, THE BBRSDA UNDERTOOK THE

FOLLOWING EFFORTS FROM 1/1/22 TO 12/31/22:

-THE BOARD REVIEWED AND APPROVED FUNDING FOR 7 QUALITY PROJECTS AND

RELATED EXPENSES IN 2022 TOTALING \$130,999, INCLUDING PROJECTS TO

FURTHER ICE PRODUCTION AND IMPROVE REFRIGERATED SEAWATER (RSW) SYSTEM

SERVICE AND INCREASE AWARENESS OF BEST HANDLING PRACTICES SUCH AS:

--ADDITIONAL ICE PRODUCTION ON ICE BARGES IN TWO FISHING DISTRICTS,

--FISH QUALITY BEST PRACTICES INFORMATION SHARED WITH THE FLEET, 232212 10-28-22

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36 2022.05000 BRISTOL BAY REGIONAL SEAFOO 61080 1

Schedule O (Form 990) 2022

 Schedule O (Form 990) 2022
 Page 2

 Name of the organization
 BRISTOL BAY REGIONAL SEAFOOD
 Employer identification number

 DEVELOPMENT ASSOCIATION, INC.
 20-2660011

--FUNDING FOR RSW TRAINING FOR MEMBERS,

--FISH QUALITY MONITORING AT THE POINT OF DELIVERY AND IN THE FISH

PROCESSING PLANT USING A NEW TECHNOLOGY.

-THE ACTUAL TOTAL PAYMENTS MADE FOR THE 7 QUALITY PROJECTS WAS

\$130,999.

-THE QUALITY COMMITTEE MET 4 TIMES IN SUPPORT OF THE QUALITY PROGRAM.

EXPENSES \$ 171,899. INCLUDING GRANTS OF \$ 125,299. REVENUE \$ 0.

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

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

(OTHER THAN THE SETNET FISHERMEN) PAY A SELF-IMPOSED TAX COLLECTED BY THE

STATE OF ALASKA, 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 ANNUALLY.

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

STAFF AND TREASURER REVIEW THE DRAFT FORM 990 AND RECOMMEND ANY REVISIONS.

CPA FIRM PRESENTS TO THE FULL BOARD OF DIRECTORS FOR REVIEW AND APPROVAL

PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS AND THE EXECUTUVE 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 232212 10-28-22 37

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 Name of the organization
 BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.
 Employer identification number 20-2660011

 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.

FORM 990, PART VI, SECTION B, LINE 15A:

BOARD DISCUSSES THE COMPENSATION OF THE EXECUTIVE DIRECTOR. THE

COMPENSATION DELIBERATION AND DECISION IS DOCUMENTED IN THE BOARD MINUTES.

FORM 990, PART VI, SECTION C, LINE 19:

BBRSDA POSTS ON ITS WEBSITE (OPEN TO THE PUBLIC) ITS ARTICLES OF INCORPORATION, ENABLING STATUTE, BYLAWS, BOARD MINUTES, APPROVED AUDITS, AND SUMMARY BUDGETS. IT CURRENTLY VIEWS ITS POLICIES AND PROCEDURES AS ITS OPERATIONAL POLICIES SO DOESN'T POST THOSE TO PUBLIC VIEW, THOUGH MEMBERS ARE PROVIDED THEM UPON REQUEST.

PART VIII LINE 1E:

IN MAY 2006 BRISTOL BAY DRIFTNET PERMIT HOLDERS VOTED PURSUANT TO ALASKA STATUTE 43.76.370 TO APPROVE A 1% SEAFOOD DEVELOPMENT TAX ON THE EX-VESSEL PRICE OF SEAFOOD SOLD, THE "ASSESSMENT", ON THEIR HARVESTS TO SUPPORT BBRSDA. THE TAX IS COLLECTED BY THE STATE AND DISTRIBUTED TO BBRSDA. THE COLLECTION AND DISBURSEMENT PROCESS, FROM THE SALMON SEASON IN WHICH THE TAX IS COLLECTED UNTIL THE ASSESSMENT AMOUNT IS RECEIVED BY BBRSDA, TAKES A YEAR TO COMPLETE. BECAUSE THE FUNDS ARE CONSIDERED 232212 10-28-22 38 17351101 759209 61080 2022.05000 BRISTOL BAY REGIONAL SEAFOO 61080 1

lame of the organization BRISTOL BAY REGIONAL SEAFOOD DEVELOPMENT ASSOCIATION, INC.	Employer identification number 20-2660011
DEVELOPMENT ASSOCIATION, INC.	20-2000011
PART OF THE STATE'S GENERAL FUND PRIOR TO DISTRIBUTION, B	BRSDA DOES NOT
RECOGNIZE THEM AS SUPPORT UNTIL THE BEGINNING OF THE STAT	E FISCAL YEAR
IN WHICH THEY WILL BE DISTRIBUTED TO BBRSDA.	

LOCAL OPTION TAX REVENUES APPROPRIATED FROM THE GENERAL FUND BY THE

LEGISLATURE (SALMON DEVELOPMENT TAX) IS CONSIDERED FINANCIAL ASSISTANCE

FOR PURPOSES OF PRESENTATION IN THE SCHEDULE OF STATE FINANCIAL

ASSISTANCE AS REQUIRED BY THE STATE OF ALASKA AUDIT GUIDE AND

COMPLIANCE SUPPLEMENT FOR STATE SINGLE AUDITS. HOWEVER, THE DEPARTMENT

OF COMMERCE, COMMUNITY AND ECONOMIC DEVELOPMENT (DCCED) HAS PROVIDED

BBRSDA WITH WRITTEN GUIDANCE ON THE NATURE OF ITS REVENUES. DCCED, IN

CONSULTATION WITH THE ALASKA DEPARTMENT OF LAW, CONSIDERS BBRSDA

ASSESSMENT TO BE "GENERATED TAX REVENUE". THE WRITTEN GUIDANCE FROM

DCCED STATES THAT THE SEAFOOD DEVELOPMENT TAX IS NOT CONSDERED STATE

FINANCIAL ASSISTANCE AND THREFORE NOT SUBJECT TO THE REGULARTORY

PROHIBITIONS PROVIDED BY 3 AAC 149.080.

IN PREPARING THIS RETURN, BBRSDA HAS CLASSIFIED THE ASSESSMENT 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 39 OF THE INSTRUCTIONS FOR THE 2022 FORM 990.

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