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Form

990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

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

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 10-01-2008 and ending 09-30-2009

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

C Name of organization
CONSORTIUM FOR OCEAN LEADERSHIP

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1201 New York Avenue NW No 420

City or town, state or country, and ZIP + 4
Washington, DC 20005

D Employer identification number

52-1892964

E Telephone number

(202) 332-0063

G Gross receipts \$ 103,916,804

F Name and address of principal officer
DR ROBERT GAGOSIAN
1201 NEW YORK AVE NW
WASHINGTON, DC 20005

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☒ 501(c) (3) ◀(Insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www.oceanleadership.org

K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation 1994 M State of legal domicile DE

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO SHAPE THE FUTURE OF OCEAN SCIENCE AND TECHNOLOGY THROUGH DISCOVERY, UNDERSTANDING AND ACTION

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets

3 Number of voting members of the governing body (Part VI, line 1a) 3 _____ 1

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 _____ 1

5 Total number of employees (Part V, line 2a) 5 _____ 7

6 Total number of volunteers (estimate if necessary) 6 _____ 5

7a Total gross unrelated business revenue from Part VIII, line 12, column (C) . . . 7a _____

b Net unrelated business taxable income from Form 990-T, line 34 . . . 7b _____

Revenue

8 Contributions and grants (Part VIII, line 1h)
9 Program service revenue (Part VIII, line 2g)
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Prior Year Current Year
91,223,482 103,145,435
642,100 627,739
83,093 22,064
0
91,948,675 103,795,238

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . .
14 Benefits paid to or for members (Part IX, column (A), line 4)
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)
16a Professional fundraising fees (Part IX, column (A), line 11e)
b Total fundraising expenses (Part IX, column (D), line 25) ▶5,651
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)
19 Revenue less expenses Subtract line 18 from line 12

Prior Year Current Year
39,740 502,494
0
6,831,977 6,168,107
0
85,538,710 96,959,862
92,410,427 103,630,463
-461,752 164,775

Net Assets or Fund Balances

20 Total assets (Part X, line 16)
21 Total liabilities (Part X, line 26)
22 Net assets or fund balances Subtract line 21 from line 20

Beginning of Year End of Year
7,852,067 12,598,155
6,032,944 10,587,702
1,819,123 2,010,453

Part II Signature Block

Sign Here

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

Signature of officer Date
YAN XING VP & CFO
Type or print name and title

Paid Preparer's Use Only
Preparer's signature JENNY E HERRERA CPA Date Check if self-employed ☐
Firm's name (or yours if self-employed), address, and ZIP + 4 RUBINO & MCGEEHIN CHARTERED 6903 ROCKLEDGE DRIVE SUITE 1200 BETHESDA, MD 20817 EIN Phone no (301) 564-3636

Part III Statement of Program Service Accomplishments (see instructions.)

1 Briefly describe the organization’s mission:

OCEAN LEADERSHIP SHAPES THE FUTURE OF OCEAN SCIENCE AND TECHNOLOGY THROUGH DISCOVERY, UNDERSTANDING AND ACTION. OCEAN LEADERSHIP PROVIDES EXPERTISE IN MANAGING, COORDINATING, AND FACILITATING SCIENTIFIC PROGRAMS AND PARTNERSHIPS, INFLUENCING SOUND OCEAN POLICY, AND EDUCATING THE NEXT GENERATION OF OCEAN LEADERS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ **Yes** ☒ **No**

If “Yes,” describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ **Yes** ☒ **No**

If “Yes,” describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code) (Expenses \$ 54,934,681 including grants of \$) (Revenue \$)
INTEGRATED OCEAN DRILLING PROGRAM - INTERNATIONAL PARTNERSHIP OF SCIENTISTS AND RESEARCH INSTITUTIONS ORGANIZED TO EXPLORE THE HISTORY AND STRUCTURE OF THE EARTH	

4b	(Code) (Expenses \$ 25,726,464 including grants of \$) (Revenue \$)
SCIENTIFIC OCEAN DRILLING VESSEL (SODV) - PROVIDES A STATE OF THE ART SCIENTIFIC OCEAN DRILLING VESSEL TO THE INTERNATIONAL RESEARCH COMMUNITY IN SUPPORT OF THE INTEGRATED OCEAN DRILLING PROGRAM	

4c	(Code) (Expenses \$ 12,409,075 including grants of \$) (Revenue \$)
OCEAN RESEARCH INTERACTIVE OBSERVATORY NETWORK PROGRAM (OOI) - DEVELOPMENT OF THE PRELIMINARY NETWORK DESIGN, SYSTEM REQUIREMENTS, AND OTHER PLANNING DOCUMENTS	

	(Code) (Expenses \$ 6,824,919 including grants of \$ 502,494) (Revenue \$ 627,739)
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4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)

4e	Total program service expenses ▶ \$ 99,895,139 (Must equal Part IX, Line 25, column (B).)
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Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 	4	Yes
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any accounts where 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	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 	11	Yes
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the U S?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? If "Yes," complete Schedule F, Part I 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 	16	Yes
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 	21	Yes
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 	22	Yes
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J 	23	Yes
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 questions 24b–24d and complete Schedule K. If "No," go to question 25	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b	No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	No

Part IV **Checklist of Required Schedules** *(Continued)*

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	No

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a41		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a76		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
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).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	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			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		

Part VI

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

			Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.				
1a	Enter the number of voting members of the governing body	1a	14	
b	Enter the number of voting members that are independent	1b	14	
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		No

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
a	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☒ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. YAN XING 1201 NEW YORK AVE 4TH FL WASHINGTON, DC 20005 (202) 332-0063

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

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

- 1a Complete this table for all persons required to be listed Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations
- List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons
- ☐ Check this box if the organization did not compensate any officer, director, trustee or key employee
- | (A)
Name and Title | (B)
Average hours per week | (C)
Position (check all that apply) | | | | | | (D)
Reportable compensation from the organization (W- 2/1099-MISC) | (E)
Reportable compensation from related organizations (W- 2/1099-MISC) | (F)
Estimated amount of other compensation from the organization and related organizations |
|------------------------------------|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| | | ☒ Individual | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| SHIRLEY POMPONI CHAIR | 2 00 | X | | X | | | | 0 | 0 | 0 |
| STEVE LOHRENZ VICE CHAIR | 2 00 | X | | X | | | | 0 | 0 | 0 |
| BRIAN TAYLOR TREASURER | 2 00 | X | | X | | | | 0 | 0 | 0 |
| AMY CASTNER SEC /DIR OF BOARD REL | 40 00 | X | | X | | | | 78,533 | 0 | 14,058 |
| DR OTIS B BROWN GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR SUSAN K AVERY GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR ANTHONY DJ HAYMET GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR NANCY RABALAIS GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR JAMES G SANDERS GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR DONALD F BOESCH GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR ROBERT B DUNBAR GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR LARRY MAYER GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR ROBERT M OWEN GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR ROBERT W CORELL GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| FRANK M CUSHING GOVERNOR | 2 00 | X | | | | | | 0 | 0 | 0 |
| DR ROBERT GAGOSIAN PRESIDENT & CEO | 40 00 | | | X | | | | 325,287 | 0 | 31,448 |
| YAN XING VP & CFO | 40 00 | | | X | | | | 148,338 | 0 | 31,828 |
- Form 990 (2008)

Part VII

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		☒ Individual	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN BOHLEN PRESIDENT - JOI DIVISION	40 00				X			436,604	0	30,145
STUART WILLIAMS DIR ENGINEERING	40 00					X		163,391	0	24,163
WILLIAM BALL DIR SODV CONV	40 00					X		156,659	0	24,124
KEVIN WHEELER DIR EXTERNAL AFFAIRS	40 00					X		141,055	0	20,745
HOLLY GIVEN OOI DIRECTOR	40 00					X		146,635	0	32,144
REGINALD BEACH SCIENTIST	40 00					X		145,766	0	31,439
RICHARD WEST PRESIDENT- CORE DIVISION	40 00						X	154,715	0	0
1b Total								1,896,983	0	240,094

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization16

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
TEXAS A&M RESEARCH FOUNDATION PO BOX 201918 DALLAS, TX 753201918	IMPLEMENTATION OF OCEAN DRILLING	73,634,177
COLUMBIA UNIVERSITY 615 WEST 131ST STREET NEW YORK, NY 10027	IMPLEMENTATION OF OCEAN DRILLING	5,972,623
UNIVERSITY OF WASHINGTON 12455 COLLECTIONS DR CHICAGO, IL 606930001	IMPLEMENTATION OF OCEAN OBSERVING	3,176,684
WOODS HOLE OCEANOGRAPHIC INSTITUTE 569 WOODS HOLE RD WOODS HOLE, MA 02543	IMPLEMENTATION OF OCEAN OBSERVING	2,976,625
UNIVERSITY OF CALIFORNIA 9500 GILMAN DR LAJOLLA, CA 92093	IMPLEMENTATION OF OCEAN OBSERVING	2,571,848
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization26		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	101,810,296				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,335,139				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f		103,145,435				
Program Service Revenue	2a	MEMBERSHIP DUES	Business Code	604,175	604,175			
	b	OTHER PROGRAM REVENUE		23,564	23,564			
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		627,739				
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		59,808			59,808
4		Income from investment of tax-exempt bond proceeds . .						
5		Royalties						
6a		(i) Real						
		(ii) Personal						
b		Less rental expenses						
c		Rental income or (loss)						
d		Net rental income or (loss)						
7a		(i) Securities						
		(ii) Other						
		83,822						
b		Less cost or other basis and sales expenses		121,566				
c		Gain or (loss)		-37,744				
d		Net gain or (loss)		-37,744			-37,744	
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18		a				
b		Less direct expenses		b				
c		Net income or (loss) from fundraising events . .						
9a	Gross income from gaming activities See Part IV, line 19		a					
b	Less direct expenses		b					
c	Net income or (loss) from gaming activities . .							
10a	Gross sales of inventory, less returns and allowances		a					
b	Less cost of goods sold		b					
c	Net income or (loss) from sales of inventory . .							
	Miscellaneous Revenue		Business Code					
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			103,795,238	627,739	0	22,064	

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	443,969	443,969		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	37,525	37,525		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	21,000	21,000		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	676,956	293,792	383,164	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,112,653	3,474,558	633,779	4,316
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	564,887	479,550	84,770	567
9	Other employee benefits	476,493	394,885	81,152	456
10	Payroll taxes	337,118	268,397	68,416	305
11	Fees for services (non-employees)				
a	Management				
b	Legal	133,499	86,113	47,386	
c	Accounting	139,746		139,746	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	92,246,925	91,779,029	467,896	
12	Advertising and promotion	24,187	24,187		
13	Office expenses	393,086	175,673	217,406	7
14	Information technology	423,177	238,096	185,081	
15	Royalties				
16	Occupancy	1,098,031	83	1,097,948	
17	Travel	1,681,878	1,647,544	34,334	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	516,863	493,963	22,900	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	160,770		160,770	
23	Insurance	44,107		44,107	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	MISCELLANEOUS	97,593	36,775	60,818	
b					
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	103,630,463	99,895,139	3,729,673	5,651
26	Joint Costs. Check here ☒ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		900	1	440,398	
	2	Savings and temporary cash investments		1,532,953	2	5,712,613	
	3	Pledges and grants receivable, net		3,753,197	3	3,565,849	
	4	Accounts receivable, net		17,544	4	24,953	
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>			5		
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		292,576	9	596,790	
	10a	Land, buildings, and equipment cost basis	10a	770,173			
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	401,476	477,517	10c	368,697
	11	Investments—publicly traded securities		1,583,382	11	1,688,201	
	12	Investments—other securities See Part IV, line 11		193,998	12	200,654	
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11			15		
16	Total assets. Add lines 1 through 15 (must equal line 34)			7,852,067	16	12,598,155	
Liabilities	17	Accounts payable and accrued expenses		4,107,905	17	6,683,927	
	18	Grants payable			18		
	19	Deferred revenue		1,256,797	19	3,249,210	
	20	Tax-exempt bond liabilities			20		
	21	Escrow account liability <i>Complete Part IV of Schedule D</i>			21		
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>			22		
	23	Secured mortgages and notes payable to unrelated third parties		2,666	23	2,666	
	24	Unsecured notes and loans payable			24		
	25	Other liabilities <i>Complete Part X of Schedule D</i>		665,576	25	651,899	
	26	Total liabilities. Add lines 17 through 25			6,032,944	26	10,587,702
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets		1,819,123	27	2,010,453	
	28	Temporarily restricted net assets			28		
	29	Permanently restricted net assets			29		
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds			30		
	31	Paid-in or capital surplus, or land, building or equipment fund			31		
	32	Retained earnings, endowment, accumulated income, or other funds			32		
	33	Total net assets or fund balances		1,819,123	33	2,010,453	
	34	Total liabilities and net assets/fund balances		7,852,067	34	12,598,155	

Part XI

Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes
c	If "Yes" to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization CONSORTIUM FOR OCEAN LEADERSHIP	Employer identification number 52-1892964
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Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

1	☐	A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(i).
2	☐	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)
3	☐	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)
4	☐	A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5	☐	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II)
6	☐	A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v).
7	☒	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II)
8	☐	A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II)
9	☐	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III)
10	☐	An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions)
11	☐	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a ☐ Type I b ☐ Type II c ☐ Type III - Functionally Integrated d ☐ Type III - Other
e	☐	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	☐	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g	☐	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?
h	☐	Provide the following information about the organizations the organization supports

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	4,710,061	5,319,919	40,439,895	91,223,482	103,145,435	244,838,792
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add line 1-3	4,710,061	5,319,919	40,439,895	91,223,482	103,145,435	244,838,792
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
6 Public Support subtract line 5 from line 4						244,838,792

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	4,710,061	63,316	40,439,895	91,223,482	103,145,435	244,838,792
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	35,876	63,316	121,038	83,093	59,808	363,131
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total Support (Add lines 7 through 10)						245,201,923
12 Gross receipts from related activities, etc (See instructions)					12	2,873,315

13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ☐

Computation of Public Support Percentage		
14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	99.850 %
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	94.330 %
16a 33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☒	
b 33 1/3% Test - 2007. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
17a 10% Facts and Circumstances Test - 2008. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	☐	
b 10% Facts and Circumstances Test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	☐	
18 Private Foundation. If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	☐	

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total Add lines 1-5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
cTotal of lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13Total Support (Add lines 9, 10c, 11 and 12)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Computation of Public Support Percentage			
15	Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16	Public Support Percentage for 2007 Schedule A, Part IV -A, line 27g	16	

Computation of Investment Income Percentage			
17	Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment Income Percentage from 2007 Schedule A, Part IV -A, line 27h	18	
19a	33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20	Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

OMB No 1545-0047

2008

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

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

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B
 - Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A
- If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax)
- Section 501(c)(4), (5), or (6) organizations complete Part III

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number

52-1892964

Part I-A

To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.)

- 1

Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2

Political expenditures

\$ _____
- 3

Volunteer hours

Part I-B

To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.)

- 1

Enter the amount of any excise tax incurred by the organization under section 4955

\$ _____
- 2

Enter the amount of any excise tax incurred by organization managers under section 4955

\$ _____
- 3

If the organization incurred in a section 4955 tax, did it file Form 4720 for this year?

☐ Yes

☐ No
- 4a

Was a correction made?

☐ Yes

☐ No
- b

If "Yes," describe in Part IV

Part I-C

To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.)

- 1

Enter the amount directly expended by the filing organization for section 527 exempt function activities

\$ _____
- 2

Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt funtion activities

\$ _____
- 3

Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b

\$ _____
- 4

Did the filing organization file **Form 1120-POL** for this year?

☐ Yes

☐ No
- 5

State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's internal funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

Part II-A

To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures— (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	29,305	
c	Total lobbying expenditures (add lines 1a and 1b)	29,305	
d	Other exempt purpose expenditures	103,601,158	
e	Total exempt purpose expenditures (add lines 1c and 1d)	103,630,463	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 The lobbying nontaxable amount is: 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000	1,000,000	
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h	Subtract line 1g from line 1a Enter -0- if line g is more than line a	0	
i	Subtract line 1f from line 1c Enter -0- if line f is more than line c	0	
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	440,096	1,000,000	1,000,000	1,000,000	3,440,096
b Lobbying ceiling amount (150% of line 2a, column(e))					5,160,144
c Total lobbying expenditures	33,902	106,100	110,902	29,305	280,209
d Grassroots non-taxable amount	110,024	250,000	250,000	250,000	860,024
e Grassroots ceiling amount (150% of line d, column (e))					1,290,036
f Grassroots lobbying expenditures					

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines c through i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i	Other activities If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes" enter the amount of any tax incurred under section 4912			
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

1	Dues, assessments and similar amounts from members	1 \$
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a	Current Year	2a \$
b	Carryover from last year	2b \$
c	Total	2c \$
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation

Supplemental Information

Identifier	Return Reference	Explanation
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SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization CONSORTIUM FOR OCEAN LEADERSHIP	Employer identification number 52-1892964
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Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate Contributions to (during year)	
3	Aggregate Grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes☐ No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply) ☐ Preservation of land for public use (e g , recreation or pleasure)☐ Preservation of an historically importantly land area ☐ Protection of natural habitat☐ Preservation of certified historic structure ☐ Preservation of open space											
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year											
		<table><tr><th></th><th>Held at the End of the Year</th></tr><tr><td>a</td><td>Total number of conservation easements</td></tr><tr><td>b</td><td>Total acreage restricted by conservation easements</td></tr><tr><td>c</td><td>Number of conservation easements on a certified historic structure included in (a)</td></tr><tr><td>d</td><td>Number of conservation easements included in (c) acquired after 8/17/06</td></tr></table>		Held at the End of the Year	a	Total number of conservation easements	b	Total acreage restricted by conservation easements	c	Number of conservation easements on a certified historic structure included in (a)	d	Number of conservation easements included in (c) acquired after 8/17/06
	Held at the End of the Year											
a	Total number of conservation easements											
b	Total acreage restricted by conservation easements											
c	Number of conservation easements on a certified historic structure included in (a)											
d	Number of conservation easements included in (c) acquired after 8/17/06											
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►											
4	Number of states where property subject to conservation easement is located ►											
5	Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes☐ No											
6	Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ►											
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$											
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes☐ No											
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements											

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1	► \$
	(ii) Assets included in Form 990, Part X	► \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	► \$
b	Assets included in Form 990, Part X	► \$

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain why in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

3a(i)

Yes

No

3a(ii)

3b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		243,714	94,541	149,173
d Equipment		309,118	231,324	77,794
e Other		217,341	75,611	141,730
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				368,697

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ▶		

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.)	

(a) Description of Liability	(b) Amount
Federal Income Taxes	
DEFERRED RENT	651,899
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	651,899

Schedule D (Form 990) 2008

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1103,795,238
2	Total expenses (Form 990, Part IX, column (A), line 25)	2103,630,463
3	Excess or (deficit) for the year Subtract line 2 from line 1	3164,775
4	Net unrealized gains (losses) on investments	426,555
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	926,555
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10191,330

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1103,821,793
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a26,555	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e26,555	3103,795,238
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c0	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)5103,795,238	

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	1103,630,463
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Losses reported on Form 990, Part IX, line 252c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e0	3103,630,463
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c0	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)5103,630,463	

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation

SCHEDULE F
(Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number
52-1892964

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance ☒ Yes ☐ No

2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	INTERNATIONAL CENSUS OF MARINE LIFE - CAPE TOWN MEETING	54,378
EUROPE	0	0	PROGRAM SERVICES	INTERNATIONAL CENSUS OF MARINE LIFE - SSC MEETING	92,710
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	SAS PANEL MEETING	14,557
EUROPE	0	0	PROGRAM SERVICES	SAS PANEL MEETING	18,465
EUROPE	0	0	PROGRAM SERVICES	USSSP WORKSHOP	86,848
EUROPE	0	0	PROGRAM SERVICES	SAS MEETING (KEIL) AND USSSP/IODP MEETING	200,729
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	CHIKYU EXPEDITIONS (SEA OF JAPAN) AND JOIDES BERING SEA EXPEDITION	63,046
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	JOIDES EXPEDITION	16,666
EUROPE	0	0	PROGRAM SERVICES	SAS PANEL MEETING	58,453
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	SAS MEETINGS	39,131
EUROPE	0	0	PROGRAM SERVICES	SCOTTISH ASSOCIATION OF MARINE SCIENCE - SUPPORT EUROPEAN COML SYNTHESES REPORT	5,630
Totals ►					650,613

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐ ☐
Use Schedule F-1 if additional space is needed.

[illegible]

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ► _____

3 Enter total number of other organizations or entities

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STIPEND FOR A CARIBBEAN NRIC ASSISTANT	CENTRAL AMERICAN AND THE CARIBBEAN	1	21,000	EFT			FMV

Complete this part to provide the information required in Part I, line 2, and any other additional information.

Schedule F (Form 990) 2008

Software ID:

Software Version:

EIN: 52-1892964

Name: CONSORTIUM FOR OCEAN LEADERSHIP

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Grants and Other Assistance to Organizations,
Governments and Individuals in the U.S.

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

OMB No 1545-0047

2008

Open to Public
Inspection

Employer identification number
52-1892964

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed.

☒

1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations

3

Enter total number of other organizations

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
TEACHER AT SEA STIPENDS	1	6,400	0	FMV	
SOR STIPEND	11	17,600	0	FMV	
NOSB STIPENDS	2	550	0	FMV	
OCEAN LEADERSHIP INTERNSHIP	2	6,975	0	FMV	
COMMUNICATIONS INTERNSHIP	2	6,000	0	FMV	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.
See Additional Data Table

[illegible]

Software ID:

Software Version:

EIN: 52-1892964

Name: CONSORTIUM FOR OCEAN LEADERSHIP

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRCH AQUARIUM AT SCRIPPS9500 GILMAN DR LAJOLLA,CA 92093	95-6006144	501(C)(3)	15,700		FMV		SUBSIDY FOR NOSB COMPETITION
CIRES216 UCB BOULDER,CO 80309	84-6000555	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
JL SCOTT MARINE EDUCATION CENTER703 EAST BEACH DR OCEAN SPRINGS,MS 39564	64-6000818	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
MASSACHUSSETS INSTITUTE OF TECHNOLOGYPO BOX 3972 BOSTON,MA 022413972	04-2103594	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
PROJECT OCEAN TECHNOLOGY1084 SHENNESSOSSETT RD GROTON,CT 063406048	06-0896672	501(C)(3)	14,860		FMV		SUBSIDY FOR NOSB COMPETITION
RUTGERS UNIVERSITY71 DUDLEY RD NEW BRUNSWICK,NJ 08901	22-6001086	501(C)(3)	14,653		FMV		SUBSIDY FOR NOSB COMPETITION
TEXAS A&M UNIVERSITY 2700 EARL RUDDER FWY S 1800 COLLEGE STATION,TX 77845	17-4600531	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
TEXAS A&M UNIVERSITY CORPUS CHRISTI6300 OCEAN DR NRC UNIT 5866 CORPUS CHRISTI,TX 78412	74-1760663	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF ALASKA FAIRBANKSPO BOX 730 SEWARD,AK 99664	92-6001470	501(C)(3)	7,500		FMV		SUBSIDY FOR NOSB COMPETITION
SAN FRANCISCO STATE UNIVERSITY3152 PARADISE DR TIBURAON,CA 94920	94-1384645	501(C)(3)	15,700		FMV		SUBSIDY FOR NOSB COMPETITION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STONY BROOK UNIVERSITY155 DISCOVERY HALL STONY BROOK, NY 117945880	11-6077945	501(C)(3)	14,530		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF MIAMI SLAB 107 MIAMI, FL 331025405	59-0624458	501(C)(3)	14,830		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF NORTH CAROLINA - WILMINGTON5600 MARVIN K MOSS LANE WILMINGTON, NC 28409	56-1258660	115	14,778		FMV		SUBSIDY FOR NOSB COMPETITION
COOPERATIVE INSTITUTE FOR LIMNOLOGY ECOSYSTEM RESEARCH 2205 COMMONWEALTH BLVD ANN ARBOR, MI 48103	38-6006309	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
UAF GRANT & CONTRACT SERVICESPO BOX 757880 FAIRBANKS, AK 99775	92-6001470	501(C)(3)	7,500		FMV		SUBSIDY FOR NOSB COMPETITION
UOREGST104 COAS ADMIN CORVALLIS, OR 97331	48-1278540	STATE PUBLIC INST	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
USC WRIGLEY INSTITUTE3616 TROUSDALE PKWY AHF 410 LOS ANGELES, CA 900890371	95-1642394	501(C)(3)	15,700		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF SOUTH FLORIDA140 SEVENTH AVE SOUTH KRC 2111 ST PETERSBURG, FL 33701	59-3102112	115	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
VIRGINIA INSTITUTE OF MARINE SCIENCEPO BOX 1346 GLOUCESTER POINT, VA 230621340	54-6001802		14,395		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF WISCONSIN MILWAUKEE 600 E GREENFIELD AVE MILWAUKEE, WI 53204	39-1805963	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON SEA GRANT3716 BROOKLYN AVE NE SEATTLE, WA 981056716	91-6001537	115	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF HAWAII 1680 EAST WEST RD POST 802 HONOLULU, HI 96822	99-6000354	115	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF MAINE 5706 AUBERT HALL RM 360 ORONO, ME 04469	01-6000769	501(C)(3)	10,030		FMV		SUBSIDY FOR NOSB COMPETITION
YOUNGSTOWN STATE UNIVERSITYONE UNIVERSITY PLAZA YOUNGSTOWN, OH 44555	34-1011998	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF SOUTH CAROLINA607 EWS BLDG COLUMBIA, SC 29208	57-6001153	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number
52-1892964

Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☐ First class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account	☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	☒ Compensation committee ☒ Independent compensation consultant ☐ Form 990 of other organizations	☒ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
DR ROBERT GAGOSIAN	(i) (ii)	300,287	25,000		23,000	8,448	356,735	250,790
YAN XING	(i) (ii)	146,338	2,000		23,000	8,828	180,166	140,747
STEVEN BOHLEN	(i) (ii)	157,754		278,850	23,000	7,145	466,749	444,980
STUART WILLIAMS	(i) (ii)	162,391	1,000		23,000	1,163	187,554	141,601
WILLIAM BALL	(i) (ii)	154,659	2,000		23,000	1,124	180,783	136,123
KEVIN WHEELER	(i) (ii)	139,055	2,000		14,143	6,602	161,800	123,037
HOLLY GIVEN	(i) (ii)	144,635	2,000		22,206	9,938	178,779	142,811
REGINALD BEACH	(i) (ii)	145,766			22,573	8,866	177,205	130,637
RICHARD WEST	(i) (ii)	6,471		148,244			154,715	148,244
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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

Schedule J (Form 990) 2008

Software ID:

Software Version:

EIN: 52-1892964

Name: CONSORTIUM FOR OCEAN LEADERSHIP

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
DR ROBERT GAGOSIAN	(i) (ii)	300,287	25,000		23,000	8,448	356,735	250,790
YAN XING	(i) (ii)	146,338	2,000		23,000	8,828	180,166	140,747
STEVEN BOHLEN	(i) (ii)	157,754		278,850	23,000	7,145	466,749	444,980
STUART WILLIAMS	(i) (ii)	162,391	1,000		23,000	1,163	187,554	141,601
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REGINALD BEACH	(i) (ii)	145,766			22,573	8,866	177,205	130,637
RICHARD WEST	(i) (ii)	6,471		148,244			154,715	148,244

SCHEDULE O

(Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990

► **Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number

52-1892964

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	PUBLIC POLICY AND ADVOCACY Expenses \$ 388567 including grants of \$ 502494 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	INTERNATIONAL CENSUS OF MARINE LIFE PROGRAM Expenses \$ 813347 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	NATIONAL OCEANOGRAPHIC PARTNERSHIP PROGRAM Expenses \$ 554549 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	U.S. SCIENCE SUPPORT PROGRAM Expenses \$ 3230613 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	NATIONAL OCEAN SCIENCES BOWL Expenses \$ 1072961 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	OTHER RESEARCH & EDUCATION Expenses \$ 764882 including grants of \$ 0 Revenue \$ 627739

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		THE ORGANIZATION HAS FORTY-FIVE VOTING MEMBERS, THIRTY ONE ASSOCIATE MEMBERS, AND SEVEN AFFILIATE MEMBERS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		THE ORGANIZATION'S FORTY-FIVE VOTING MEMBERS ELECT REPRESENTATIVES TO THE BOARD OF TRUSTEES

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7b		THE BYLAWS OF THE CORPORATION ARE SUBJECT TO ADOPTION, AMENDMENT OR REPEAL BY (A) A VOTE OF TWO-THIRDS OF THE FULL MEMBERS PRESENT IN PERSON OR BY PROXY AT THE MEETING AT WHICH THE VOTE IS TAKEN, OR (B) A VOTE OF TWO-THIRDS OF THE TRUSTEES, AT ANY ANNUAL OR SPECIAL MEETING, THE NOTICE OR WAIVER OF NOTICE OF WHICH WILL SPECIFY OR SUMMARIZE THE PROPOSED ADOPTION, AMENDMENT OR REPEAL

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		THE FORM 990 WAS PROVIDED TO THE AUDIT COMMITTEE FOR REVIEW AND COMMENTS PRIOR TO FILING THE RETURN THE FORM WAS ALSO PROVIDED TO THE REST OF THE BOARD FOR REVIEW THE RETURN WAS THEN REVIEWED BY THE CFO AND SUBMITTED TO THE COGNIZANT AGENCY

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		OCEAN LEADERSHIP MAINTAINS A CONFLICT OF INTEREST POLICY THE POLICY IS PART OF THE EMPLOYEE HANDBOOK WHICH NEW HIRES RECEIVE AS PART OF THE ORIENTATION PROCESS THE HUMAN RESOURCES CONSULTANT DISCUSSES THE CONFLICT OF INTEREST POLICY AS WELL AS ALL OTHER KEY OCEAN LEADERSHIP POLICIES WITH ALL NEW HIRES DURING NEW HIRE ORIENTATION ALL EMPLOYEES ARE REQUIRED TO SIGN A RECEIPT OF THE EMPLOYEE HANDBOOK AN EMPLOYEE WHO VIOLATES THE CONFLICT OF INTEREST POLICY WOULD BE SUBJECT TO DISCIPLINARY ACTION PER THE ORGANIZATION'S DISCIPLINARY ACTION POLICY SUCH DISCIPLINARY ACTION COULD INCLUDE TERMINATION OF EMPLOYMENT, DEPENDING ON THE NATURE OF THE SITUATION ALL MEMBERS AND TRUSTEES ARE REQUIRED TO SUBMIT AN ANNUAL CONFLICT OF INTEREST DISCLOSURE FORM WITH THE SECRETARY OF THE BOARD THE COLLECTION PROCESS BEGINS AT THE ANNUAL MEETING OF THE MEMBERS EACH YEAR AND CONTINUES UNTIL ALL MEMBER REPRESENTATIVES AND TRUSTEES HAVE A FORM ON FILE ANY POTENTIAL CONFLICTS ARE NOTED, STORED IN THE CORPORATE RECORD, AND SHARED WITH THE EXECUTIVE COMMITTEE

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		FOR THE PRESIDENT/CEO - AN ASSESSMENT IS CONDUCTED AT THE REQUEST OF THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES THE ASSESSMENT INCLUDES A COMPREHENSIVE MARKET SALARY REVIEW CONDUCTED BY NONPROFIT HR SOLUTIONS, AN INDEPENDENT HUMAN RESOURCES CONSULTING FIRM THE INDEPENDENT STUDY ALSO INCLUDES A REVIEW OF BENEFITS PROVIDED TO OTHER NON-PROFIT CHIEF EXECUTIVES WITH COMPARABLE BUDGET, STAFF SIZE, SCOPE AND MISSION RESULTS OF THESE MARKET REVIEWS ARE PRESENTED BY NPHRS TO THE EXECUTIVE COMMITTEE, WHICH DISCUSSES THE DATA COLLECTED, CONSIDERS THE PERFORMANCE OF THE PRESIDENT/CEO, AND SETS A SALARY ALIGNED TO A FIGURE THEY DEEM TO BE REASONABLE AND APPROPRIATE, TAKING INTO CONSIDERATION THE REPORTED MEAN OF THE MARKET EXECUTIVE COMPENSATION BETWEEN THE EXECUTIVE COMMITTEE AND THE PRESIDENT/CEO IS ESTABLISHED BY CONTRACT BETWEEN THE EXECUTIVE COMMITTEE AND THE PRESIDENT/CEO AND IS RENEGOTIATED UPON PLACEMENT OF A NEW INCUMBENT THE PROCESS FOR DETERMINING COMPENSATION FOR VICE PRESIDENTS INCLUDES COMPREHENSIVE MARKET SALARY REVIEWS FOR VICE PRESIDENT LEVEL POSITIONS AS NECESSARY TO ENSURE THAT SALARIES ARE APPROPRIATELY ALIGNED WITH THE MEAN OF THE MARKET SALARY ADJUSTMENTS ARE APPROVED BY THE PRESIDENT/CEO ALL DATA USED IN DETERMINING COMPENSATION IS REVIEWED AND RANGES ARE SHIFTED EVERY TWO TO THREE YEARS FOR POSITIONS BELOW VICE PRESIDENT LEVEL - SALARIES ARE ALIGNED WITH ESTABLISHED INTERNAL SALARY RANGES FOR ALL CAREER LEVELS AS NECESSARY, NEW POSITIONS ARE BENCHMARKED AGAINST THE MARKET TO ENSURE MARKET ALIGNMENT AND INTERNAL EQUITY SALARIES ARE APPROVED BY THE PRESIDENT/CEO

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC BOTH ON THE ORGANIZATION'S WEBSITE AND UPON REQUEST THE FORM 990 IS AVAILABLE ON GUIDESTAR AND UPON REQUEST

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		THE FINANCE COMMITTEE, WHICH SERVES AS THE AUDIT COMMITTEE, OVERSEES THE AUDIT AND SELECTION OF THE AUDIT FIRM THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR