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# **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Open to Public

		nue Service		<u>_</u>	Thay have to use a				orang roqu	an ciricino.	IIIspection	
<u>A</u> _	For th	ne 2009 ca	alendar	year, or tax yea			2009, and				, 20	
В	heck if	applicable	Please		zation THE INTER		KEEPERS	S SOCI	ETY, INC	D Employ	er identification number	
	ddress	s change	use IRS label or	Doing Business	AS SEAKEEPER	<b>S</b>				58	2385869	
		change	print or type.	Number and stree	t (or PO box if mail is no	t delivered to street add	ress) Ro	om/suite		E Telepho	ne number	
	nitial re		See	757 SE 17TH	STREET			51	14	(954)	766-7100	
	ermina		Specific Instruc-	City or town, st	ate or country, and ZI	P + 4						
		ed return	tions.	FORT LAUDI	ERDALE, FLORIC	DA 33316				G Gross re	ceipts \$ 701,364	
		on pending	F Nan	ne and address of	principal officer: JO	HN ENGLANDE	R		U(a) is the		for affiliates? Yes No	
^	фрисан	on pending	ļ				•				ncluded? Tyes No	
_	Тау-еу	cempt status	· 77 ·	501(c) ( <b>3</b> ) <b>◄</b> (inse	ert no ) 4947(a)(1	) or 527			li .		list (see instructions)	
_				AKEEPERS.C		7 01 027			1	exemption num		
				oration Trust			L Year of	formation			legal domicile: FL	
-			·	oration Irust	ASSOCIATION L. J Other	<u> </u>	L rear or	TOTTIALION	1990	M State Of	legal domicile. FL	
Ρê	rt I	Summ				<del></del>		<u> </u>	· · · · · · · · · · · · · · · · · · ·		. 46 - 414	
	1	Briefly de	escribe	the organization	on's mission or m	ost significant a	ctivities:	Seakee	pers is a	edicated i	o the development	
0											ability. It is based	
Š		on a str	ong co	ncern for the	rapidly deteriorat	ing ocean ecos	ystem wh	ich can	have a p	rofound	impact on life on	
Ë		earth.										
Activities & Governance	2	Check this	s box ►	☐ If the organiza	ition discontinued its o	perations or dispose	d of more tha	an 25% o	f its net ass	ets.		
<b>5</b>	3	Number	of votir	na members of	the governing bo	dv (Part VI, line	1a)			3	14	
8	ı			_	members of the	• •				4	12	
Ę	ı				art V, line 2a).		•			5	7	
ŧ	1				stimate if necessa					6	3	
٩				•	s revenue from Pa	• •				7a	0	
					e income from Fo					7b	0	
_	-	INCL UITE	ialed D	usiness taxabi	e micome moni i o	1111 330-1, 11116 0-	·	т.	Prior Ye		Current Year	
Revenue	_							$\vdash$		479,283	537,128	
		Contributions and grants (Part VIII, line 1h)									331,120	
		_		-				├─		2 470	<del></del>	
ě					column (A), lines 3					6,478		
_			Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						37,854			
	12	Total reve	enue-a	add lines 8 thro	ugh 11 (must equa	Part VIII, column	(A), line 12	2)		626,923	574,982	
	13	Grants a	ınd sim	ilar amounts p	aid (Part IX, colun	nn (A), lines 1-3)		🖵		100,000		
	14											
Expenses	15	Salaries,	other co	ompensation, ei	mployee benefits (F	Part IX, column (A)	, lines 5-1	0)		834,938	355,641	
Ë				•	Part IX, column (A),							
Ä				,	t IX, column (D), lin	•				]		
					nn (A), Imes Tra					753,577	377,083	
	18	Total eve	noneoe	Add lines 13	17 (must equal P	200000	\ line 25\			688,515	732,724	
					t line 18 from line	12 19	y, iiiie 20)	• •		(61,592)	(157,741)	
F 89		110101100	1000 01	poriodo. Cabara			· · · · · · · · · · · · · · · · · · ·	Be	ginning of C	• • •	End of Year	
Net Assets or Fund Balances		T-4-1	/D.	V ( 40)	12 NOV 2	8 5010 PS		1		050,170	723,448	
Bar	20			art X, line 16) .	1 35.			· ·	<del></del>	329,193	154,213	
돌	21	lotal liat	ollities (	Part X, line 26	Subtract Vine 2) fr	M illia ill		• • ⊢				
	22				Sopract And Sign	Orugille 20	• • •			726,977	569,25	
F	irt II			Block	the state of the s							
		and belie	enatties o ef. it is tru	r perjury, i deciare ue. correct. and co	tnat i nave examined ti mplete Declaration of	nis return, including a	ccompanying officer) is bas	schedule sed on all	es and state Information	nents, and to of which pr	o the best of my knowledge eparer has any knowledge	
			1.	•			,				_	
Sig			KIR	* * * * * * * * * * * * * * * * * * * *	uline					<u> </u>	2010	
He	re		nature of		Erro autimo	MD /CEO			Dat	e		
		R	osa I	Maulini	Executive	VP/CFO						
		Тур	e or pnnt	name and title								
		Preparer	·, \				Date	Chec	k if		dentifying number	
Α.		signature						self-	oyed ▶ 🔲	(see instruct	tions)	
Paid									, —			
	oarer's	Firm's na	ame (or y	ours L			<del></del>		EIN	<u>-</u>		
Use	Only	ıf setf-em	nployed),	<b>—</b> —		<del> </del>			Phone r		)	
<u> </u>	. A!		and ZIP		o proporer sherr	above? (see :	ota intina-\		rnone r	10 P 1		
мa	v ine	ino disc	เนธร เกเร	s return With th	ne preparer showr	i above! (See ins	su ucitoris)				. Yes L No	

Par	Statement of Program Service Accomplishments									
1	Briefly describe the organization's mission:  An organization of international leaders which promote synergy among citizens, governments, educa institutions and corporations to restore and protect the world's oceans.									
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.  Did the organization cease conducting, or make significant changes in how it conducts, any program									
3	services?	✓ Yes □ No								
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 \$453,544 including grants of \$) (Revenue \$\$  See Schedule O, Page 1									
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$									
4-	(Code:) (Expenses \$including grants of \$) (Revenue \$	· · · · · · · · · · · · · · · · · · ·								
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$	/								
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )									
4e	Total program service expenses ► 453,544									

Par	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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<b>√</b>	
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		✓
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 similar funds or 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		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		✓
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		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	✓	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	<u>-</u>	1
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a		14a		<b>-</b>
b	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		✓
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		✓
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		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	✓	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		_ ₹

Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i>	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ļ	<b>✓</b>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 192 Note. All Form 990 filers are required to complete Schedule O.	20		

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
	Effect the number of Forms 44 24 mondadd in the fat. Effect of it flot applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a   7   1f at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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)?	<b>4</b> a		✓
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	<u> </u>	<b>✓</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		<b>✓</b>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	i _		
	and services provided to the payor?	7a	<b>√</b>	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<b>~</b>	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	ļ		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? NA	7g		-
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	l		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		
а	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:			1
a	initiation lees and capital contributions included on last vin, line 12	1	1	
	Gloss receipts, included on Form 990, Fait Vin, line 12, for public use of club facilities	1	Ì	
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a	Gross moome from memoris of shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b	12a		<b>  *</b>

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

<u>Sec</u>	tion A. Governing Body and Management			·
	1 1		Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent	1		
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	<b>V</b>	
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		1
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	1	-
5	Did the organization become aware during the year of a material diversion of the organization's assets?	<u>5</u>	<u> </u>	1
6	Does the organization have members or stockholders?	0		-
7a		7a		
	of the governing body?	7b		1
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7.0		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:	8a	1	
	The governing body?	8b	7	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	00	_	<b></b>
9	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
Sec	tion B. Policies (This Section B requests information about policies not required by the International Control of the International		L	<u> </u>
	enue Code.)	o.,,,,		
		-	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		<b>1</b>
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
U	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
••	form?	11	1	
114	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<b>1</b>
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
_	rise to conflicts?	12b		
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
C	describe in Schedule O how this is done	12c		l
13	Does the organization have a written whistleblower policy?	13		✓
14	Does the organization have a written document retention and destruction policy?	14		<b>✓</b>
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?			
а	The organization's CEO, Executive Director, or top management official	15a		✓
	Other officers or key employees of the organization	15b		1
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		[	
	with a taxable entity during the year?	16a		✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	Ì		
_	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	1	İ	
	the organization's exempt status with respect to such arrangements?	16b		<u> </u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ Florida			
18	Section 6104 requires an organization to make its Forms 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 int	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reconganization: ► ROSA MAULINI, 355 ALHAMBRA CIRCLE, SUITE 1100, CORAL GABLES, FL 33134	ords o	f the	

# 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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employees."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if the organization did not co	ompensate	any o	cum	ent	offic	cer, d	lirec	tor, or trustee.		
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Position (check all that apply)						Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Lee Anderson Board Director	.5	1						0	0	0
Brian Cobb Board Director	.5	1						0	0	0
Jean-Michel Cousteau  Board Director	.2	1						0	0	0
Patty Elkus Board Director	.5	1	<u> </u>					0	0	0
Michael T. Moore Board Director	4	1						0	0	0
Robert Fisher Board Director	.5	,						0	0	0
Jim Gilbert (Viewpoint Consulting)  Board Director	10	1						23,750	0	0
Mark Grosvenor Board Director	.5	1						0	0	0
Marilyn King Fisher Board Director	.5	/						0	0	0
Vee King Shaw Board Director	.2	<b>y</b>			-	. —		0	0	0
Don Tomlin  Board Director	1	<b>V</b>						0	0	0
Jay Wade  Board Director	.5	<b>y</b>						0	0	0
Frank Wlasek	.2	<b>y</b>						0	0	0
Board Director  John Englander	50	<b>*</b>		1	1		T	64,500		5,194
CEO Rosa Maulini	50		-	<b>▼</b>	1	✓		80,135	_	5,396
Executive VP/ CFO Geoff Morrison Vice President - Technology	50			<u> </u>	<b>*</b>	-	-	55,833		7,156

Pa	t VII Section A. Officers, Directors, Tru	ıstees, Key	/ Emp	loy	ees,	, an	d Hig	hes	t Compensate	d Employees (c	ontinue	d)	
	(A)						(F)						
	Name and title	Average hours per week	Pos Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fr org	stimated nount of other pensatior the janization d related anizations	1
												_	
											<u> </u>		
												·	
	· · · · · · · · · · · · · · · · · · ·										<u> </u>		
						-			:		<u> </u>		
1b 2	Total	not limited	to the	ose	liste	 ed a	bove	<b>▶</b>	224,218 ho received mo	ore than \$100,0	000 in	17,7	46
	reportable compensation from the organization	ation ► 0									<del></del>	T-	
3	Did the organization list any <b>former</b> office employee on line 1a? <i>If "Yes," complete S</i>							oye		compensated	3		<b>√</b>
4	For any individual listed on line 1a, is the sthe organization and related organizations individual.			50,0	00?	If "	Yes,"				4		/
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	comp olete	oen:	satio	on 1	rom	any any	unrelated org	anization for	5		<u>·</u> ✓
Se	ction B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization.	ompensate	d ind	epe	nde	ent o	ontra	acto	rs that receive	d more than \$1	00,000	) of	
	(A) Name and business add	iress							(B) Description of s	ervices	(C Compe		
NO	NE	<del></del>							<del> </del>				
_													
	· · · · · · · · · · · · · · · · · · ·	<del></del>			-			_				<del></del>	
2	Total number of independent contractors (i					to	those	list	ed above) who	received			

Par	VIII	Statement of Revenue			}			T
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns	1a					
gra	b	Membership dues	1b	537,128				1
ts, ar	С	Fundraising events	1c					
흹	d	Related organizations	1d					
ns,	e	Government grants (contributions).	1e					1
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, grants,						
들들		and similar amounts not included above	1f					
털		Noncash contributions included in lines 1a-						
O B	h	Total. Add lines 1a-1f			537,128			
9	ļ			Business Code				
Ne.	2a							
æ	b							
200	С							
Ser	d	•••••		,				ļ
Program Service Revenue	e							<del></del>
<u> </u>	f	All other program service revenu		L				<del> </del>
	g	Total. Add lines 2a-2f		▶				
	3	Investment income (including div						
		other similar amounts)					-	<u> </u>
	4	Income from investment of tax-exem	•		5.000	5.000		
	5	Royalties	· · ·		5,000	5,000		
		(i) Real		(ii) Personal				
	1	Gross Rents		<del></del>				Ì
		Less: rental expenses						
		Rental income or (loss)						•
	Ì	( , , , , , , , , , , , , , , , , , , ,		T				<u> </u>
	7a	Gross amount from sales of (i) Securit	ies	(ii) Other				
		assets other than inventory						
	Ь	Less: cost or other basis						
		and sales expenses .						
	d	Gain or (loss) L		<b>•</b>				
4	<u>"</u>	-		· · · · · · · ·				
enne	8a		ing					
		events (not including \$	٠٠٠					
Other Rev		See Part IV, line 18		35,000				
ē	h	Less: direct expenses		30,640				
\$	C	Net income or (loss) from fundra	isına e		4,360	4,360		
		, ,	_					
	ya	Gross income from gaming activities See Part IV, line 19						
	Ь	Less: direct expenses						
	c	Net income or (loss) from gaming	activ	ities ►				
	10a	Gross sales of inventory, le	200					
		returns and allowances		124,236				
	ь	Less: cost of goods sold		95,742				
	С	Net income or (loss) from sales of	invent	ory ▶	28,494	28,494		<u></u>
		Miscellaneous Revenue		Business Code				
	11a							
	b							
	C							
	d	All other revenue						
	t .	Total. Add lines 11a-11d		<del> •</del>				
		Total revenue. See instructions.			574,982	37,854		

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete col	umn (A) but are no	t required to comp	olete columns (B), (C	c), and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	231,506	148,508	54,669	28,329
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 salanes and wages	88,710	27,980	6,022	54,708
8	Pension plan contributions (include section 401(k)	<b>.</b>			P 4.4
_	and section 403(b) employer contributions)	541 12,186	6,870	670	541 4,646
9	Other employee benefits		<del></del>	4,492	5,196
10	Payroll taxes	22,698	13,010	4,492	5, 190
11	Fees for services (non-employees):				
	Management	3,873		3,873	
	Legal	0,0.0		0,010	
	Accounting				
	Lobbying				
f	Investment management fees		<u>.</u>		
	Other	11,886	4,125	1,184	6,576
12	Advertising and promotion	2,714		· · · · · · · · · · · · · · · · · · ·	2,714
13	Office expenses	68,232	36,401	22,824	9,007
14	Information technology	26,860	14,789	8,905	3,167
15	Royalties				
16	Occupancy	62,368	36,330	26,038	
17	Travel	26,556	12,185	11,143	3,228
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				<del></del>
19	Conferences, conventions, and meetings .	1,000	1,000		
20	Interest				
21	Payments to affiliates	440 505	420.050	2.007	
22	Depreciation, depletion, and amortization.	143,525	139,858	3,667	
23	Insurance	17,579		17,579	<del> </del>
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.)				
а	Calib Lab supplies & Engineering Svs	7,088	7,088		
b	Gain/Loss on Disposal of Assets	5,400	5,400		
c d					
e					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	732,724	453,544	161,067	118,113
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) Beginning of year (B) End of year 47,507 167.745 1 152,705 2 65,287 2 25,000 105.692 3 3,678 82,147 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 7 Assets 7 8 2,024 20,030 9 Prepaid expenses and deferred charges . . . . . Land, buildings, and equipment: cost or 10a 10a other basis. Complete Part VI of Schedule D b Less: accumulated depreciation . . . . 10b 1,426,018 382,827 10c 339,453 11 11 12 Investments—other securities. See Part IV. line 11 12 13 Investments—program-related. See Part IV, line 11 . . . . . . 13 14 14 217,493 15 162.030 15 Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) . 1,050,170 16 16 723,448 323,193 17 154,213 17 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities 21 Pavables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . . . . . . . . . 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities. Complete Part X of Schedule D . . . . . . . . 25 25 323,193 Total liabilities. Add lines 17 through 25 . . . 26 26 154,213 Balances complete lines 27 through 29, and lines 33 and 34. 726,977 27 569.235 27 28 28 Fund 29 29 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ŏ 30 Capital stock or trust principal, or current funds . . . . . . . . Assets 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds Š 726,977 33 569,235 33 723,448 1,050,170 34 Total liabilities and net assets/fund balances

_	-44	ŀ
Page	- 12	

Par	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<b>✓</b>
b	Were the organization's financial statements audited by an independent accountant?	2b		✓
C	If "Yes" to line 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		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			ļ
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	ĺ		
	the Single Audit Act and OMB Circular A-133?	3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

#### SCHEDULE A (Form 990 or 990-EZ)

THE INTERNATIONAL SEAKEEPERS SOCIETY, INC

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047
2009
Open to Public

2385869

58

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

See separate instructions.

Inspection

Employer identification number

Pa	rt I	Reason	for Public Ch	arity Status (All or	ganizatio	ns mus	t comple	ete this	part.) Se	e instruc	ctions.
The 1 2 3 4		A church, co A school des A hospital or A medical re hospital's na	onvention of chur scribed in section a cooperative has esearch organiza ime, city, and sta		of church ach Sche ization de unction v	nes desciedule E.) escribed with a hos	ribed in s in <b>sectio</b> spital de	n 170(b) scribed in	70(b)(1)(A (1)(A)(iii). n section	170(b)(1	
5		_	ion operated for (b)(1)(A)(iv). (Cor	the benefit of a collegent transplacement to the transplacement in the transplacement to	ge or univ	versity ov	vned or o	perated	by a gove	ernmenta	l unit described in
6				ernment or governme	ntal unit	describe	d in sect	ion 170(t	o)(1)(A)(v).	-	
7				receives a substantia 1)(A)(vi). (Complete P		its suppo	ort from a	governm	ental unit	or from	the general public
8 9		A community An organizat receipts from support from	y trust described ion that normally n activities relate n gross investment	d in section 170(b)(1) receives: (1) more that ed to its exempt funct ent income and unre after June 30, 1975.	(A)(vi). (Can 331/3 % tions—su lated bus	of its sup bject to d siness tax	pport fro certain ex xable inc	ceptions ome (les	s, and (2) o s section	no more	than 331/3 % of its
10 11 e		An organizate purposes of 509(a)(3). Cha Type By checking persons other	tion organized a one or more pulneck the box that I b	tify that the organization managers and other	rely for the nizations of supporting Type too is not to the notes of the new tension is not the new tension is new tension is new tension in the new tension is new tension in the new	ne benefi described rting orga ne III-Fund nt control	t of, to post of the post of t	perform to on 509(a) and com integrate tly or inc	he function (1) or secondlete line d directly by	ons of, o stion 509( s 11e thr d one or	(a)(2). See section ough 11h.  Type III-Other more disqualified
f g		organization	, check this box at 17, 2006, has	a written determinati  the organization acce							III supporting
		(i) A person and (iii) b (ii) A family	n who directly or below, the gover member of a pe	r indirectly controls, e ning body of the supp rson described in (i) a of a person described	oorted or above?	ganızatio	n? . 	th persor	ns describ	ed in (ii) 	Yes No 11g(i) ✓ 11g(ii) ✓ 11g(iii) ✓
h				ation about the suppo							· · · • · · · · · · · · · · · · · · · ·
		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the o	organization sted in your document?	(v) Did y the organ col. (i)	rou notify nization in of your port?	(vi) is organizati (i) organiz U.S	on in col ed in the	(vii) Amount of support
					Yes	No	Yes	No	Yes	No	
							ļ —				
						İ					
						,					
							-				
								_			
						<b></b>	-	<del> </del>			

Total

Par	Support Schedule for Org (Complete only if you check					and 170(b)(	1)(A)(vi)
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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 lines 1 through 3					ļ.	
5 6	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4.						
	tion B. Total Support		<u> </u>	,			-
	lendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4		, ,	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	>-	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carned 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 .		l				
12	Gross receipts from related activities, etc	•	•			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u> </u>				
Sec	tion C. Computation of Public Su			<del> </del>		<del>, , , , , , , , , , , , , , , , , , , </del>	
14	Public support percentage for 2009 (line		· ·			14	<u>%</u>
15	Public support percentage from 2008 Sci					15	<u>%</u>
	33%% support test—2009. If the organization qualifies	as a publicly	supported orga	nization			▶ □
b	33% % support test—2008. If the organization qua						, check this
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum reganization meets the "facts-and-circum	acts-and-circui	mstances" test,	check this box	and stop here.	. Explain in Part	t IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumstances test—2008 private foundation. If the organization did	acts-and-circun inces" test. The	nstances" test, o organization qua	check this box alifies as a public	and <b>stop here.</b> cly supported or	Explain in Part ganization .	IV how the

Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you checke	ed the box or	line 9 of Par	<u>t I.)                                      </u>			
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	918,741	1,408,326	1,360,451	1,440,833	537,128	5,665,479
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						· · · · · · · · · · · · · · · · · · ·
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	918,741	1,408,326	1,360,451	1,440,833	537,128	5,665,479
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	328,320	349,214	543,736	362,379	259,992	1,843,641
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b	328,320	349,214	543,736	362,379	259,992	1,843,641
8	Public support (Subtract line 7c from line 6.)						3,821,838
Sec	tion B. Total Support			· -		· · · · · · · · · · · · · · · · · · ·	
Ca	alendar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	918,741	1,408,326	1,360,451	1,440,833	537,128	5,665,479
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,226	12,917	20,666	6,478	5,000	52,287
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	7,226	12,917	20,666	6,478	5,000	52,287
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	925,967	1,421,243	1,381,117	1,447,311	542,128	5,717,766
14	First five years. If the Form 990 is for organization, check this box and stop	here					
Sec	tion C. Computation of Public Su	<del>' •                                   </del>					67
15	Public support percentage for 2009 (lin					15	67 %
16 Sec	Public support percentage from 2008 Stion D. Computation of Investmen			· · · · · ·	<u> </u>	16	65 %
				I by line 12	dump (A)	17	1 %
17 18	Investment income percentage for 2009  Investment income percentage from 2009	•		-	. ((1) TIITIUK	18	1 %
19a					nd line 15 is m		
	17 is not more than 331/3 %, check this b	ox and <b>stop h</b> e	ere. The organiz	zation qualifies	as a publicly s	supported orga	nization 🕨 🗹
b	33% % support tests – 2008. If the organ line 18 is not more than 33% %, check this	s box and stop	here. The organ	ization qualifies	s as a publicly :	supported orga	nization 🕨 🗌
20	Private foundation. If the organization	did not check	a box on line 1	4, 19a, or 19b,	check this bo	x and see inst	ructions >

	orm 990 or 990-EZ) 2009 <b>Supplemental Information.</b> Complete this part II, line 17a or 17b; and Part III, line 12.	part to provide t	he explanations i	required by Part II, I
	Part II, line 17a or 17b; and Part III, line 12.	Provide any other	er additional info	mation. See instruc
_				
		·		
-				
		·		
				,
			·	
		••••••		
_				

# SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

**Employer identification number** THE INTERNATIONAL SEAKEEPERS SOCIETY, INC 2385869 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year . . . . 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Yes No funds are the organization's property, subject to the organization's exclusive legal control? . . . . . Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b 2c c Number of conservation easements on a certified historic structure included in (a) . . . 2d d Number of conservation easements included in (c) acquired after 8/17/06 . . . . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ..... Number of states where property subject to conservation easement is located ▶ ...... Does the organization have a written policy regarding the penodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 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. 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 . . . . . . . . . 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: 

Par	t III Organizations Maintain	ng Collections	of Art, Hist	torical	Treasures,	or Ot	her Similar As	sets (cor	ntinued)			
3	Using the organization's acquisition collection items (check all that appl	, accession, and o	other record	s, chec	k any of the f	ollow	ng that are a sig	nificant u	se of its			
а	Public exhibition		d [		an or exchan							
b	Scholarly research		e	_l Ot	her							
C	Preservation for future general											
4	Provide a description of the organiz Part XIV.	ation's collections	s and explai	in how	they further th	ne orç	ganızatıon's exer	npt purpo	ose in			
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											
Pai	Part IV 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.											
	Is the organization an agent, trusted included on Form 990, Part X? .					s or o	other assets not	☐ Yes	□ No			
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the fo	ollowing	table:		i					
						4-	Arr	ount				
C	Beginning balance					1c						
d	Additions during the year					1d						
e	Distributions during the year					1e 1f			· · ·			
f	Ending balance						<u> </u>					
	Did the organization include an amilf "Yes," explain the arrangement in	Part XIV.						∐ Yes	∐ No			
Pal	t V Endowment Funds. Co											
		(a) Current year	(b) Prior y	rear	(c) Two years ba	ECK (	d) Three years back	(e) Four y	ears back			
1a	Beginning of year balance		<del>                                     </del>			-			<del></del>			
b	Contributions				-			<del> </del>				
С	Net investment earnings, gains, and losses											
d	Grants or scholarships					-						
	Other expenditures for facilities and programs											
f g	Administrative expenses End of year balance											
2	Provide the estimated percentage of	of the year end ba	lance held a	as:								
а	Board designated or quasi-endown	nent ▶	%									
b	Permanent endowment ▶	%										
C	Term endowment ▶ 9	6										
3a	Are there endowment funds not in the organization by:	e possession of the	ne organizati	on that	are held and	admır	nistered for the	Y	es No			
	(i) unrelated organizations							3a(i)				
	(ii) related organizations							3a(ii)				
_	If "Yes" to 3a(II), are the related org							3b				
4	Describe in Part XIV the intended u											
Pai	t VI Investments—Land, Bu		· · · · · · · · · · · · · · · · · · ·	See Fo	rm 990, Parl	t X, li	ne 10.					
	Description of investment	(a) Cost or of (investment)			or other (other)		ccumulated reciation	(d) Book	value			
1a	Land											
b	Buildings											
C	Leasehold improvements											
d	Equipment Other Seakeeper Modul	<u>.</u>			14,070		11,029		3,041			
e T-4-		<del> </del>	00 De 4 V		.751,400		1,414,988		336,412			
lota	I. Add lines 1a through 1e. (Column (d)	must equal Form 9	90, Part X, co	oiumn (l	s), iine 10(c).)	<u>· · · · </u>	<u> P</u> .		<u>339,453</u>			

Part VII Investments—Other Securities	s See Form 990 Part Y	line 12	rage U
(a) Description of security or category	(b) Book value	(c) Method of valuat	on.
(including name of security)	(b) book value	Cost or end-of-year mark	
Financial derivatives			
Closely-held equity interests			
Other			
	-		
	-		
	-		
•••••			<del> </del>
	-		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Relate	ad Sac Form 000 Part V	line 12	· · · · · · · · · · · · · · · · · · ·
(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mar	tion. ket value
<del></del>		<u> </u>	
			<del> </del>
			·
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets. See Form 990, P	art X, line 15.		
	(a) Description		(b) Book value
Undeployed SeaKeeper 1000 Modules, Parts	and Components		162,030
			<del></del>
	<del></del>		<del></del>
	<del></del>		<del> </del>
		· · · · · · · · · · · · · · · · · · ·	·
Total. (Column (b) must equal Form 990, Part X, col	(B) line 15.)		162,030
Part X Other Liabilities. See Form 990			
1. (a) Description of liability	(b) Amount		
Federal income taxes			
		7	
		_	
		_	
		_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	· <u> </u>		

Sche	adie D (Form 990) 2009		Paç	ge →
Pai	TEXT Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	tate	ments	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior penod adjustments	7	Ĭ	
8	Other (Describe in Part XIV.)	8		
9	Total adjustments (net). Add lines 4 through 8	9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	<u> </u>	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenu	е ре	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments			
b	Donated services and use of facilities			
C	Recoveries of prior year grants			
d	Other (Describe in Part XIV.)			
е	Add lines 2a through 2d	2	e e	
3	Subtract line 2e from line 1	نــا	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4a	_		
b	Other (Describe in Part XIV.)	_		
C	Add lines 4a and 4b	ļ	С	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	ses	per Return	
1	Total expenses and losses per audited financial statements	<u> </u> -	1 1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	_		
b	Prior year adjustments	_	1	
C	Other losses	_	İ	
d	Other (Describe in Part XIV.)	_		
е	Add lines 2a through 2d	-	2e	
3	Subtract line 2e from line 1	<u>L</u> :	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIV.)	_		
C	Add lines 4a and 4b	4	le	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
Pai	rt XIV Supplemental Information		· · · · · · · · · · · · · · · · · · ·	
and	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d a part to provide any additional information.			
		<b>-</b>		

Schedule D (Form 990) 2009 Page 1									
Part XIV Supplemental Information (continued)									
	**								
	•••••								
	•••••								
<u></u>									

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Inspection

Employer identification number THE INTERNATIONAL SEAKEEPERS SOCIETY, INC 58 2385869 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants е Internet and email solicitations Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) fundraiser listed in col. (i) (iii) Did fundraiser have custody or control of contributions? (vi) Amount paid to (or retained by) (i) Name of individual (ii) Activity (iv) Gross receipts or entity (fundraiser) from activity organization Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Pa	irt li	Fundraising Events. Comore than \$15,000 on F					r repo	orted	I
			(a) Event #1	(b) Event #2	(c) Other events	(d) T	otal eve	ents	
			Founders Dinner	Sk Prof Soiree		(add ∞	ol (a) th col (c))		
m			(event type)	(event type)	(total number)	ļ	(c <sub>j</sub> )		
Revenue		_	20.000	5 000				25	000
ě	1	Gross receipts	30,000	5,000				35,	,000_
Œ	2	Less: Charitable							
	3	contributions				<del> </del>			
	•	minus line 2)	30,000	5,000				35	,000
	4	Cash prizes				ļ			
	5	Noncash prizes				├──			
Direct Expenses	6	Rent/facility costs				+			
ĕ	7	Food and beverages	20,164	7,025		ļ		27	,189
찣	<b>'</b>	rood and beverages	20,101	.,,		<u> </u>			,
ಭ	8	Entertainment	1,400	1,300		1		2	,700
۵									
	9	Other direct expenses	750	. ,		<u> </u>			750
		_				1,			\
	10 11	Direct expense summary. Ad	ld lines 4 through 9 in co	olumn (d)		<u> </u>			639) 364
D۶	art I	Net income summary. Comb  Gaming. Complete if	the organization anew	vered "Vee" to Form	990 Part IV line 10	or repu	orted		,361
نجيا		than \$15,000 on Form		vered res to roilli	Joo, rait iv, mic io,	, or repe	Jitca	11101	C
Ф.			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) To	otal gan	nıng (a	dd
Ĭ				bingo/progressive bingo		col (a)			
Revenue				·					
	1	Gross revenue				ļ <u>-</u>			
Ses	2	Cash prizes		· · · · · · · · · · · · · · · · · · ·		┼──			
Direct Expenses		Namanah mman							
Щ	3	Noncash prizes				†			
ect	4	Rent/facility costs							
۵	•	Tionolidoliky odoto						-	
	5	Other direct expenses .							
			☐ Yes%	☐ Yes%	☐ Yes%				
	6	Volunteer labor	∐ No	□ No	∐ No	<del> </del>			<del></del>
						1,			١.
	7	Direct expense summary. Ac	dd lines 2 through 5 in c	olumn (d)		<u>                                     </u>			
	8	Net gaming income summar	v. Combine line 1, colur	nn d, and line 7					
_	<u> </u>		· · · · · · · · · · · · · · · · · · ·			<u> </u>		Yes	No
9	Er	nter the state(s) in which the c	organization operates ga	aming activities:					
a		the organization licensed to d	-	_			9a		
b	lf '	"No," explain:							
									l
							40-		l
_		ere any of the organization's	gaming licenses revoke	d, suspended or termin	nated during the tax ye	ar?	10a		<del></del>
b	) If '	"Yes," explain:						:	ĺ
							l		ĺ
11	Dr	pes the organization operate of	aming activities with no	onmembers?	· · · · · · · ·		11		<u></u>
12	ls	the organization a grantor, be	eneficiary or trustee of			entity			
		rmed to administer charitable		,			12		l

Page	3
гаус	•

and records:  Name ▶				Yes	No
a The organization's facility	3	Indicate the percentage of gaming activity operated in:			
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:  Name ▶		The organization's facility			
and records:  Name ▶	<b>b</b> .	An outside facility			
Address ►					
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$		Name ▶			
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ c If "Yes," enter name and address of the third party:  Name ▶		Address ▶			
amount of gaming revenue retained by the third party ▶ \$  c If "Yes," enter name and address of the third party:  Name ▶			15a		
Name ►					
Address   Gaming manager information:  Name   Gaming manager compensation   Description of services provided   Director/officer   Employee   Independent contractor  Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations	С	If "Yes," enter name and address of the third party:			
Name ►		Name ▶			
Name ►		Address ▶			<b> </b> }
Gaming manager compensation ▶ \$	6	Gaming manager information:			
Description of services provided ▶		Name ▶			
Director/officer Employee Independent contractor  17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Gaming manager compensation ▶ \$			
17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations		Description of services provided ▶			
<ul> <li>a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</li> <li>b Enter the amount of distributions required under state law to be distributed to other exempt organizations</li> </ul>		☐ Director/officer ☐ Employee ☐ Independent contractor			
<ul> <li>a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</li> <li>b Enter the amount of distributions required under state law to be distributed to other exempt organizations</li> </ul>	7	Mandatory distributions:			
b Enter the amount of distributions required under state law to be distributed to other exempt organizations		•			
			17a		
of spent in the organization's own exempt activities during the tax year > \psi		Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$			

Schedule G (Form 990 or 990-EZ) 2009

#### SCHEDULE O (Form 990)

### Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE INTERNATIONAL SEAKEEPERS SOCIETY, INC

Employer identification number 58 2385869

990 Part III. Line 4a. STATEMENT OF PROGRAM SERVICES AND ACCOMPLISHMENTS SeaKeepers is dedicated to the development and deployment of technologies to monitor the oceans in support of conservation and sustainability. Specifically, the Society designed and engineered an autonomous flow through modular monitoring system (the SeaKeeper 1000) that continuously measures meteorological and ocean data and then transmits via satellite every 1 to 3 hours, while gathering archival one-minute data stored onboard the units computers for periodic retrieval. The system was awarded patent #6,536,272. The SeaKeeper 1000 uses a standard suite of weather instruments combined with a specialized set of automated laboratory analytic devices to measure certain seawater parameters such as temp, salinity, pH, dissolved oxygen, etc. A key attribute of the system is that it is modular - new sensors can be added over time to measure such things as nutrients, chlorophyll, CO2, arsenic, and mercury, to name a few. The SeaKeeper System is positioned to become a "standard" for modular automated environmental monitoring that can address growing concerns over climate change, ocean acidification and water pollution in general. The SeaKeepers Fleet is made up of private yachts, cruise sihps, a yacht transport, research vessels, and piers. In 2009, SeaKeepers commissioned 5 new systems and at year end had 6 systems in various stage of install. Affected by the economic downturn, in 2009, SeaKeepers experienced a 60% drop in revenue from the prior year. SeaKeepers management took strategic steps to restructure its operations in a way to allow SeaKeepers to continue its ocean monitoring and data gathering mission, increase outreach & reduce costs. The first goal was to reduce overhead & to find a way to continue to have the SeaKeepers Systems built and maintained at reasonable costs that would not require capitalizing the systems during the building process. Maintenance of the Calibration Laboratory and personnel was also another expense that needed to be eliminated, while still affording SeaKeepers the ability to calibrate its ocean sensors. Being that the SeaKeeper System had now been deployed successfully on NOAA Sanctuary vessels and on the Univ of South Florida's Research vessel, the opportunity was right to license a company to build the system, to continue its development to meet new challenges, and to develop commercial markets for its wider distribution. In 2009, SeaKeepers extended an exclusive license to YSI to build the SeaKeeper Systems and to provide them to SeaKeepers at a preferred price so that SeaKeepers could continue to build its fleet and meet its commitments. YSI is also able to commission and and maintain the SeaKeepers Fleet as coordinated by SeaKeepers. Each commercial sale also provides SeaKeepers with

Name of the organization
THE INTERNATIONAL SEAKEEPERS SOCIETY, INC

Employer identification number
58: 2385869

a revenue stream not available before. Working with the University of South Florida, SeaKeepers was also able to release the overhead involved with the maintenance of the Calibration Laboratory by donating it to USF's College of Marine Science As such, YSI and USF work closely together and can provide calibration services as needed. These changes will allow SeaKeepers to continue operations as usual at reduced costs and will also expand the availability of the SeaKeepers System to other platforms it would not have been able to easily reach before. This provides validation to SeaKeepers founding members of their foresight many years ago when funding the development of this modular monitoring system.. Expanding our reach further into the yachting community, SeaKeepers and Yachts International magazine announced an exclusive high profile media partnership in 2009. There are many exciting plans for 2010 which will expand the SeaKeepers outreach and diversify its revenue streams. Also, in 2009 SeaKeepers with the collaborative assistance of the Nicholas Institute for Environmental Policy Solutions at Duke University, published the 2nd edition of its "Critical Ocean Issues" publication - introducing the "Action Framework: A Pathway for Change." Part I Line 6: Volunteers provide programming services and web interface for data acess to allow reporting of SeaKeepers Fleet transmissions. Part VI. Section A. Line 2. Board members Robert Fisher and Marilyn King Fisher are husband and wife. Part VI. Section A. Line 5. As a result of decreased funding in 2009, SeaKeepers management, and with board approval, strategically decided to outsource the building of the SeaKeepers Systems and the maintenance of the fleet. This would reduce overhead drastically. During the transition, the existing parts and equipment where moved to the YSI facilities in St. Petersburg, Florida where they will be utilized for SeaKeepers needs until exhausted. Any additional parts purchased would be paid for by SeaKeepers at preferred pricing. The Calibration Laboratory equipment, originally received as a donation, was in turn donated to the University of Florida and although not a financially material transfer of equipment, accessibility is maintained as calibrations are outsourced. This changes were necessary to markedly reduce overhead and eliminate the need for the physical space and the personnel needed to house these materials. These changes were completed at the end of 2009 and will be more materially reflected in 2010. Part VI. Section B. Line 11A. The executive committee of the Board has the authority to approve the 990. The 990 and underlying schedules are provided to the committee either electronically or by mail for review and approval. Approval is obtained via phone or email.