Form **990**

Department of the Treasury
Internal Revenue Service

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)

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning and ending

B Check if applicable: [ ] Address change [ ] Name change [X] Initial return [ ] Terminated [ ] Amended return [ ] Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
MICRONESIA CONSERVATION TRUST
Doing Business As

Number and street (or P O. box if mail is not delivered to street address) Room/suite
P.O. BOX 2177

City or town, state or country, and ZIP + 4
KOLONIA, POHNPEI, FM 96941

D Employer identification number
98-6062277

E Telephone number
691-320-5670

G Gross receipts $ 2,024,946.

F Name and address of principal officer: WILLIAM N. KOSTKA
P.O. BOX 2177, KOLONIA, POHNPEI, FM 96941

H(a) Is this a group return for affiliates? [ ] Yes [X] 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 [X] 501(c) (3) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.MCTCONSERVATION.ORG

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶ **L** Year of formation: 2002 **M** State of legal domicile: FM

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities OUR MICRONESIA: RESPECTING AND MANAGING OUR LAND, AIR, AND SEA, ENHANCING LIVELIHOODS, OUR QUALITY

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	9
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5	Total number of employees (Part V, line 2a)	5	8
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	278,932.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

ORIGINAL

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)		1,746,014.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		275,069.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,863.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,024,946.
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		532,774.
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)		179,552.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		117,281.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		829,607.
19	Revenue less expenses Subtract line 18 from line 12		1,195,339.
Net Assets or Fund Balances		**Beginning of Current Year**	**End of Year**
20	Total assets (Part X, line 16)		4,597,031.
21	Total liabilities (Part X, line 26)		194,659.
22	Net assets or fund balances. Subtract line 21 from line 20		4,402,372.

RECEIVED
JUL 14 2011
E1-64 IRS-OSC
OGDEN, UT

Part II Signature Block

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

Sign Here
▶ Signature of officer — Date 6/25/11
▶ WILLIAM N. KOSTKA, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ JENNIE L. CHIU — Date 6/23/11 — Check if self-employed ▶ [ ] — Preparer's identifying number (see instructions) P01437968

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ DELOITTE & TOUCHE LLP, 361 SOUTH MARINE CORPS DRIVE, TAMUNING, GUAM 96913-3911 — EIN ▶ 98-0047535 — Phone no. ▶ (671) 646-3884

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2009)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

SCANNED JUL 18 2011

9-14

Part III **Statement of Program Service Accomplishments**

1 Briefly describe the organization's mission:
TO SUPPORT BIODIVERSITY COSERVATION AND RELATED SUSTAINABLE DEVELOPMENT FOR THE PEOPLE OF MICRONESIA BY PROVIDING LONG TERM, SUSTAINED FUNDING.

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 $ 532,774. including grants of $ 567,812.) (Revenue $)
DURING THE YEAR, MCT REGRANTED 34 NON-GOVERNMENT ORGANIZATIONS WITH GOALS TO CONSERVE AND PROTECT MARINE, FORREST AND RELATED AREAS AROUND THE FEDERATED STATES OF MICRONESIA(FSM) AND IN SURROUNDING STATES IN MICRONESIA. EACH ORGANIZATION CONDUCTED A VARIETY OF ACTIVITIES INCLUDING WORKSHOPS OF FUNDING,DEVELOPMENT OF COOPERATIVE AGREEMENTS AND AWARENESS MATERIALS, CAPACITY BUILDING FOR COSERVATION AREAS, CORAL AND FISH MONITORING AND FINANCIAL MANAGEMENT TRAININGS.

4b (Code) (Expenses $ 75,836. including grants of $ 75,636.) (Revenue $)
MCT RECEIVED FUNDS FROM DONORS AND AWARDED 15 GRANTS TO INDIVIDUALS FOR VARIOUS CONSULTATIONS AND ASSESSMENTS SUCH AS TAX, MARKETING, FINANCIAL DEVELOPMENTS FOR THE MARSHAL ISLANDS, ECOLOGICAL ASSESSMENTS FOR CORAL REEF, WORKSHOPS FOR CLIMATE CHANGE ADAPTATION.

4c (Code:) (Expenses $ 203,453. including grants of $) (Revenue $)
MCT UTILIZED MANAGEMENT AND SUPPORT EXPENSES FOR SERVICES SUCH AS SUPPORTING COMMUNITY AWARENESS ON CONSERVATION, CAPACITY BUILDING THROUGH COMMUNITY NETWORK AND NON-GOVERNMENT ORGANIZATION DEVELOPMENT AND PROVIDING THE MANAGEMENT AND SUPPORT OF CONSERVATION FOR NATURAL RESOURCE AREAS.

4d Other program services. (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ $ 812,063.

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		X
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		X
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	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
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		X
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	X	
11	Is the organization's answer to any of the following questions "Yes"? *If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
•	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	X	
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* — 12A: Yes [ ] No [X]			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b	X	
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	X	
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	X	
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
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		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X

Part 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		X
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	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
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		X
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		X
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		X
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		X
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		X
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).			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	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		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
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		X
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		X
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38		X

Part 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	1a	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	8		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b		X
	Note. 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		X
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	X	
b	If "Yes," enter the name of the foreign country ▶ FED ST OF MICRONESIA 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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		X
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		X
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		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h		X
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		X
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
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 *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*

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body **1a** 9			
b	Enter the number of voting members that are independent **1b** 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	**2**		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	**3**		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	**4**		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	**5**		X
6	Does the organization have members or stockholders?	**6**		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	**7a**		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	**7b**		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	**8a**	X	
b	Each committee with authority to act on behalf of the governing body?	**8b**	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	**9**		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	**10a**		X
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?	**10b**		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	**11**		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	X	
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**	X	
13	Does the organization have a written whistleblower policy?	**13**		X
14	Does the organization have a written document retention and destruction policy?	**14**		X
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**	X	
b	Other officers or key employees of the organization	**15b**	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		X
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 ▶ NONE

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 interest 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 records of the organization. ▶

MEILEEN ALBERT - 691-320-5670
DEKEHTIK ROAD , KOLONIA, POHNPEI, FM 96941

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 employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
FRANK SHIMIZU, SR MEMBER	2.00	X						0.	0.	0.
ROBERT JONES MEMBER	2.00	X						0.	0.	0.
MARIE MADDISON MEMBER	2.00	X						0.	0.	0.
CHARLES CHIENG MEMBER	2.00	X						0.	0.	0.
LEE WEBBER MEMBER	2.00	X						0.	0.	0.
DONALD G. HORNOR MEMBER	2.00	X						0.	0.	0.
AREN PALIK CHAIRMAN	3.00			X				0.	0.	0.
SANDRA PIERANTOZZI VICE CHAIRWOMAN	3.00			X				0.	0.	0.
LORRIE JOHNSON ASHER SECRETARY	3.00			X				0.	0.	0.
WILLY KOSTKA EXECUTIVE DIRECTOR	40.00			X				52,109.	0.	0.
LISA R. ANDON DEPUTY EXECUTIVE DIRECTO	40.00			X				36,911.	0.	0.
MEILEEN ALBERT ADMIN OFFICER	40.00							17,395.	0.	0.
ISAO FRANK, JR. COORDINATOR	40.00							10,153.	0.	0.
LIHLA NOORI PROGRAM OFFICER	40.00							13,311.	0.	0.
MARY ROSE NAKAYAMA PROGRAM OFFICER	40.00							19,548.	0.	0.
CARLOS KUSTO GRANTS OFFICER	40.00							12,403.	0.	0.
CERISSA J. NANPEI ADMINISTRATIVE ASSISTANT	40.00							1,149.	0.	0.

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): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
1b Total ▶								162,979.	0.	0.

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

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
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? *If "Yes," complete Schedule J for such individual*	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

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. NONE

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

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	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1746014.				
	g Noncash contributions included in lines 1a-1f $						
	h Total. Add lines 1a-1f ▶			1746014.			
Program Service Revenue			Business Code				
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			275,069.		275,069.	
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6 a Gross Rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss) ▶						
	8 a 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 ▶						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10 a 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				
	11 a MISCELLANEOUS REVENUE		900000	3,863.		3,863.	
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d ▶			3,863.			
	12 Total revenue. See instructions. ▶			2024946.	0.	278,932.	0.

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				
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	532,774.	532,774.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	179,552.	179,552.		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	19,144.	19,144.		
12 Advertising and promotion	1,670.	1,670.		
13 Office expenses	12,831.	12,831.		
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	15,034.	15,034.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	27,164.	27,164.		
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,377.		4,377.	
23 Insurance	976.	976.		
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 RENT	9,100.		9,100.	
b COMMUNICATION	9,071.	9,071.		
c BOARD OF DIRECTORS EXPE	4,609.	4,609.		
d OTHER EXPENSES	4,214.	4,214.		
e UTILITIES	3,545.	3,450.	95.	
f All other expenses	5,546.	1,574.	3,972.	
25 Total functional expenses. Add lines 1 through 24f	829,607.	812,063.	17,544.	0.
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
Assets	1	Cash - non-interest-bearing		1	1,464,736.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	1,095,509.
	4	Accounts receivable, net		4	17,715.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 28,751.			
	b	Less accumulated depreciation — 10b: 15,255.	0.	10c	13,496.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	1,815,040.
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	190,535.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	0.	16	4,597,031.
Liabilities	17	Accounts payable and accrued expenses		17	194,659.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	0.	26	194,659.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets		27	-38,814.
	28	Temporarily restricted net assets		28	2,833,695.
	29	Permanently restricted net assets		29	1,607,491.
		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	0.	33	4,402,372.
	34	Total liabilities and net assets/fund balances	0.	34	4,597,031.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
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	X	
	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: [X] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2009
Open to Public Inspection

Name of the organization
MICRONESIA CONSERVATION TRUST

Employer identification number
98-6062277

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box)

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).**
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).**
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?

		Yes	No
(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 supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(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? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of support
Total									

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

Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Part II **Support Schedule for Organizations Described in Sections 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")					1,746,014.	1,746,014.
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					1,746,014.	1,746,014.
5 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)						
6 **Public support.** Subtract line 5 from line 4						1,746,014.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4					1,746,014.	1,746,014.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					278,932.	278,932.
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						2,024,946.

12 Gross receipts from related activities, etc. (see instructions) | 12 |

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ [X]

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) | 14 | %

15 Public support percentage from 2008 Schedule A, Part II, line 14 | 15 | %

16a **33 1/3% support test - 2009.** 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% support test - 2008.** If the organization did not check a 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 - 2009.** 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 - 2008.** 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 a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ [ ]

Part III **Support Schedule for Organizations Described in Section 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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants ")						
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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2009.** 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% support tests - 2008.** 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 ▶ ☐

Schedule D (Form 990)

Department of the Treasury Internal Revenue Service

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

Name of the organization: MICRONESIA CONSERVATION TRUST

Employer identification number: 98-6062277

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	19	1
2	Aggregate contributions to (during year)	1,746,014.	
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	1,746,014.	275,069.

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? [X] Yes [ ] No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [X] 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)
- [ ] Protection of natural habitat
- [ ] Preservation of open space
- [ ] Preservation of an historically important land area
- [ ] Preservation of a certified historic structure

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
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, handling of violations, and enforcement of the conservation easements it holds? [ ] Yes [ ] No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ____________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation 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 section 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 acquisition, 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 Escrow and Custodial Arrangements. Complete if 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 the arrangement in Part XIV and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	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	1607491.	50,000.			
b Contributions		1500000.			
c Net investment earnings, gains, and losses	83,044.	57,491.			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	1690535.	1607491.			

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ ______ %

b Permanent endowment ▶ 100.00 %

c Term endowment ▶ ______ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		X
(ii) related organizations	3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment	28,751.		15,255.	13,496.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				13,496.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(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		
Closely-held equity interests		
Other		
MORGANSTANLEY SMITHBARNEY	1,815,040.	END-OF-YEAR MARKET VALUE
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	1,815,040.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13

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

Part IX Other Assets. See Form 990, Part X, line 15

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

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

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

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,024,946.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	829,607.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	1,195,339.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	3,207,033.
9	Total adjustments (net) Add lines 4 through 8	9	3,207,033.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	4,402,372.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	2,024,946.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	2,024,946.
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 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12)*			5	2,024,946.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	829,607.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	829,607.
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 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	829,607.

Part XIV Supplemental Information

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

PART XI, LINE 8: THIS WAS THE REPORTING ENTITY'S NET ASSETS FROM THE PRIOR YEAR. THIS WAS NOT REPORTED ON PAGE 1, LINE 22, UNDER THE BEGINNING OF CURRENT YEAR COLUMN, AS 2009 WAS THE FIRST IRS REPORTING YEAR FOR FORM 990.

932054
02-01-10

Schedule F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: MICRONESIA CONSERVATION TRUST

Employer identification number: 98-6062277

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? [X] 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 Activities 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 for region
SEE STATEMENT 1 ATTACHED	1	8	SEE STATEMENT 1 ATTACHED	SEE STATEMENT 2 ATTACHED	610,738.
SEE STATEMENT 2 ATTACHED	0	0	SEE STATEMENT 2 ATTACHED	SEE STATEMENT 2 ATTACHED	8,160.
Totals ▶	1	8			618,898.

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

932071
02-01-10

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 (Form 990) if additional space is needed.

1 (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)
		FEDERATED STATE OF MICRONESIA & MARSHALL IS.	SEE STATEMENT 1 ATTACHED	567812.	CHECK DISBURSEMENTS	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, 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 ▶ 19

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)
SEE STATEMENT 2 ATTACHED	SEE STATEMENT 2 ATTACHED	7	42,926.	CHECK	0.		
SEE STATEMENT 2 ATTACHED	SEE STATEMENT 2 ATTACHED	2	8,160.	CHECK	0.		

Part IV Supplemental Information

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

SCHEDULE F, PART I, LINE 2: THE GRANTS PROVIDED TO ORGANIZATIONS AND THE CONSULTING CONTRACTS PROVIDED TO INDIVIDUALS OUTSIDE OF THE UNITED STATES ARE PART OF THE ENTITY'S CAPACITY BUILDING PROGRAM SERVICES. THE ENTITY HAS A PROGRAM COORDINATOR, WHO MANAGES AND MONITORS THE GRANTS AND RELATED CONSULTING CONTRACTS. THE PROGRAM COORDINATOR ALSO ASSISTS WITH REVIEWING AND APPROVIING THE GRANT PROPOSALS, BEFORE DISBURSEMENTS ARE MADE TO GRANTEES.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: MICRONESIA CONSERVATION TRUST

Employer identification number 98-6062277

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? [X] 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" to 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 (Form 990) 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

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" to Form 990, Part IV, line 22
Use Part IV and 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
SEE STATEMENT 3 ATTACHED.	5	24,550.	0.		

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

SCHEDULE I, PART I, LINE 2: THE GRANTS PROVIDED TO INDIVIDUALS IN THE UNITED STATES, UNDER PART III, ARE RELATED CONSULTING CONTRACTS. THESE CONTRACTS ARE PART OF THE ENTITY'S CAPACITY BUILDING PROGRAM SERVICES. THE ENTITY HAS A PROGRAM COORDINATOR, WHO MANAGES AND MONITORS THE GRANTS PROVIDED IN THESE CONTRACTS. THE PROGRAM COORDINATOR ALSO ASSISTS WITH REVIEWING AND APPROVIING THE GRANT PROPOSALS, BEFORE DISBURSEMENTS ARE MADE TO THE GRANTEES.

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

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
2009
Open to Public Inspection

Name of the organization	Employer identification number
MICRONESIA CONSERVATION TRUST	98-6062277

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OF LIFE AND THE ENVIRONMENTAL INTEGRITY OF OUR ISLANDS. MCT SUPPORTS CONSERVATION ACROSS MICRONESIA BY PROVIDING LONG-TERM, SUSTAINED FUNDING THROUGH GRANT PROGRAMS, BUILDING THE CAPACITY OF MICRONESIANS AND MICRONESIAN ORGANIZATIONS TO DESIGN AND MANAGE CONSERVATION PROGRAMS, AND PROVIDING A REGIONAL FORUM TO BRING PEOPLE FROM GOVERNMENT, PRIVATE ENTERPRISE AND COMMUNITY AND NON-PROFIT ORGANIZATIONS TOGETHER TO COLLECTIVELY ADDRESS THE CHALLENGES OF NATURAL RESOURCE MANAGEMENT IN MICRONESIA.

FORM 990, PART VI, SECTION B, LINE 12C: THE ENTITY'S TRUSTEES ARE REQUIRED TO VOLUNTARILY DISCLOSE ANY AND AND CONFLICTS OF INTEREST PRIOR TO THEIR MEETINGS AND VOTING PROCESS.

FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATIONS OF THE ENTITY'S KEY EMPLOYEES ARE DETERMINED ANNUALLY, THROUGH COMPLETING AN EVALUATION WITH THE TRUSTEES.

FORM 990, PART XI, LINE 2C

CHANGES IN INDEPENDENT ACCOUNTANT SELECTION

THERE WERE NO CHANGES NOTED IN THE ORGANIZATION'S OVERSIGHT OR SELECTION PROCESS FOR ITS INDEPENDENT ACCOUNTANT DURING THE YEAR.

FORM 990, PART VI, SECTION C, LINE 19

PUBLIC ACCESS OF DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STM

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

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
2009
Open to Public Inspection

Name of the organization	Employer identification number
MICRONESIA CONSERVATION TRUST	98-6062277

THE ENTITY'S GOVERNING DOCUMENTS ARE MADE AVAILABLE ON ITS WEBSITE.
ALTHOUGH THEIR CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE
NOT READILY DISCLOSED, THEY ARE MADE AVAILABLE UPON REQUEST, THROUGH
E-MAIL, FACSIMILES, TELEPHONE, OR LETTERS.

MICRONESIAN CONSERVATION TRUST
EIN: 98-6062277
DECEMBER 31, 2009

STATEMENT 1
FORM 990
SCHEDULE F
PAGE 1, PART I, GENERAL INFORMATION ON ACTIVITIES OUTSIDE OF THE UNITED STATES
PAGE 2, PART II, GRANTS AND OTHER ASSISTANCE TO ORGANIZATIONS AND ENTITIES OUTSIDE OF THE UNITED STATES

MCT Project Summary List

Grantee Organization	Project Name	Award Amount	Adress	Funds amount disperse in 09	GOVERNMENT ORG/NGO	REGRANTING/CAPACITY BLDG
Packard Foundation Capacity-Building for Marine Protected Areas						
Yap Community Action Program (Yap CAP)	Building the capacity of Yap CAP's Environment Division to Assist with and Effectively Manage the Nimpal Channel Marine Conservation Area	$38,000	P O Box 426 Colonia, Yap, FM 96943	1,936 91	NGO	REGRANTING
Kosrae Conservation and Safety Organization (KCSO)	Building KCSO's Organizational Capacity to Effectively Manage MPA in Kosrae	$38,000	P O Box 1007 Tofol, Kosrae, FM 96944	9,573.19	NGO	REGRANTING
National Oceanic and Atmospheric Administration Coral Reef Monitoring in the Federated States of Micronesia						
KCSO	Coral and Fish Monitoring in the State of Kosrae	$18,000 to $19,000/yr	P O Box 1007 Tofol, Kosrae, FM 96944	4,202 84	NGO	REGRANTING
CCS	Coral and Fish Monitoring in the State of Chuuk	$18,000 to $19,000/yr	P O Box 222 Weno, Chuuk, FM 96942	12,419 00	NGO	REGRANTING
Conseravtion and Environmental Protection Program (European Union)						
TNC - Wallace Foundation Grant						
Kosrae Conservation and Safety Organzation	Watershed Partnership Project (funding for stakeholder workshop, development of cooperative agreements and awareness materials)	$14,300	P O Box 1007 Tofol, Kosrae, FM 96944	7,150 00	NGO	REGRANTING
Conservation Society of Pohnpei (CSP)	Watershed Partnership Project (funding for stakeholder workshop, development of cooperative agreements and awareness materials)	$14,300	P O Box 2461 Kolonia,Pohnpei FM 96941	7,150 00	NGO	REGRANTING
TNC - Invasive Species						
Palau Conservation Society	Removal of Rodents from Glabally Important Bird Colonies in Palau	$123,500	P O Box 1811 Koror, Palau PW 96940	38,883 00	NGO	REGRANTING
United States Forest Service - Intern Focus Projects						
Conservation Society of Pohnpei (CSP)	Pohnpei State Water Quality and Quantity in Nett Watershed- Focus Project, Assessment and Community Outreach	$10,000	P O Box 2461 Kolonia,Pohnpei FM 96941	1,875 00	NGO	REGRANTING
KCSO	Trail design and development for Yela and Olum forest reserves	$10,000	P O Box 1007 Tofol, Kosrae, FM 96944	1,810 90	NGO	REGRANTING
Federal Republic of Germany, Ministry of Environmental Conservation and Nuclear Safety (LifeWeb). Advancing the Micronesia Challenge						
Conservation Socieety of Pohnpei	And Atoll Biosphere Reserve		P O Box 2461 Kolonia,Pohnpei FM 96941	28,413 45	NGO	REGRANTING
Kosrae Conservation and Safety Orgranization	Yela Forest Reserve		P O Box 1007 Tofol, Kosrae, FM 96944	24,861 09	NGO	REGRANTING
YapCAP	Ngulu Atoll Marine Managed Area		P O Box 426 Colonia, Yap, FM 96943	11,774 59	NGO	CAPACITY BLDG
YapCAP	Nimpal Channet Marine Conservation Area		P O Box 426 Colonia, Yap, FM 96943	33,971 31	NGO	REGRANTING
RMI Envirnmental Protection Agency	Jaluit Atoll Conservation Area		P O Box 1322 Majuro, RMI 96960	42,593 19	GOVERNMENT ORG	REGRANTING
RMI Marine Resources Authority	Ailuk Marine Protected Area		P O Box 860 Majuro, RMI 96960	22711 5	GOVERNMENT ORG	REGRANTING
Marshall Islands Conservation Society	Woja Marine Conservation Area			12,500 00	NGO	REGRANTING
Palau International Coral Reef Center	Northern Reef Rapid Ecological Assessment		P O Box 7086 Koror, Palau PW 96940	2,060 71	NGO	REGRANTING
Hatohobei State Government	Helen Reef Resource Management Program			44,934 12	GOVERNMENT ORG	REGRANTING
Palau Conservation Society	Babeldaob Watershed Alliance		P O Box 1811 Koror, Palau PW 96940	1,200 00	NGO	REGRANTING

Grantee Organization	Project Name	Award Amount	Adress	Funds amount disperse in 09	GOVERNMENT ORG/NGO	REGRANTING/CAPACITY BLDG
Federal Republic of Germany, Ministry of Environmental Conservation and Nuclear Safety (LifeWeb): Advancing the Micronesia Challenge						
Yela Environment Landowners Association (YELA) based in Kosrae	Yela Conservation Easement			49,892 50	NGO	REGRANTING
College of the Marshall Islands	Climate Change Adaptation in Micronesia Workshop			32,981 00	NGO	REGRANTING
Conservation Society of Pohnpei (CSP)	Invasive Weed Management Training Workshop		P O Box 2461 Kolonia,Pohnpei FM 96941	5,478 14	NGO	REGRANTING
CSP	Grouper Spawning Aggregation Workshop		P O Box 2461 Kolonia,Pohnpei FM 96941	21,000 00	NGO	REGRANTING
The Nature Conservancy	Micronesians In Island Conservation Program and Learning Exchange		P O Box 216 Kolonia, Pohnpei FM 96941	1,095 13	NGO	REGRANTING
CSP	Geographic Information Systems Gap Analysis		P.O Box 2461 Kolonia,Pohnpei FM 96941	46,426 50	NGO	REGRANTING
CSP				31,102 14	NGO	REGRANTING
Chuuk Conservation Society			P O Box 222 Weno, Chuuk, FM 96942	28,401 30	NGO	REGRANTING
Chuuk Conservation Society			P.O Box 222 Weno, Chuuk, FM 96942	3,555 00	NGO	REGRANTING
Kosrae Conservation & Safety organization			P O Box 1007 Tofol, Kosrae, FM 96944	2,934 56	NGO	REGRANTING
Kosrae Conservation & Safety organization			P O Box 1007 Tofol, Kosrae, FM 96944	3,826 07	NGO	REGRANTING
Chuuk Conservation Society			P O Box 222 Weno, Chuuk, FM 96942	4,350 00	NGO	REGRANTING
Belau National Museum				1,000 00	NGO	REGRANTING
Hatohobei State Government				4,903 33	GOV'T ORG	REGRANTING
RMI Marine Resources Authority			P O Box 860 Majuro, RMI 96960	12,326 69	GOV'T ORG	CAPACITY BLDG
RMI Envirnmental Protection Agency			P O Box 1322 Majuro, RMI 96960	8,518 64	GOV'T ORG	REGRANTING

TOTAL 567,811.80

MICRONESIAN CONSERVATION TRUST
EIN: 98-6062277
DECEMBER 31, 2009

STATEMENT 2
FORM 990
SCHEDULE F
PAGE 1, PART I, GENERAL INFORMATION ON ACTIVITIES OUTSIDE OF THE UNITED STATES
PAGE 3, PART III, GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS OUTSIDE OF THE UNITED STATES

NAME	ADDRESS	DISBURSEMENT GIVEN IN 2009	PURPOSE OF CONTRACT	REGRANTING/CAPACITY BLDG
REGION 2				
DAO NGUYEN	UNIT 42/101 COUTTS STR. BULIMBA, QLD 4171 BRISBANE, AUSTRALIA	8,914.38	CONSULTANT TO PROVIDE PROFESSIONAL SERVICES FOR SEYCHELLES AND MICRONESIA LEARNING EXCHANGE EXPORTATING THE CHALLENGE	CAPACITY BLDG
PETER HOUK	P.O.BOX 10003 SAIPAN, MP 96950	3,500.00	FOR CONDUCTING AN ASSESSMENT OF THE CURRENT DATASETS AND MONITORING METHODS THAT ARE AVAILABLE FOR ASSESSING THE EFFECTIVENESS OF EACH JURISDICTION IN ACHIEVING THE GOALS OF THE MICRONESIA CHALLENGE.	CAPACITY BLDG
MARK LANDER	169 BENG BING STREET DEDEDO, GU 96929	3,589.20	CONSULTANT TO CONDUCT PREPARATORY WORKSHOP TOWARDS CLIMATE CHANGE ADAPTATION IN MICRONESIA	CAPACITY BLDG

NAME	ADDRESS	DISBURSEMENT GIVEN IN 2009	PURPOSE OF CONTRACT	REGRANTING/CAPACITY BLDG
NICOLE BAKER	19 BRIDGE STREET NOTHCOTE VIC 3070 AUSTRALIA	9,200.00	SCIENTIST TO CONTACT RAPID ECOLOGICAL ASSESSMENT	CAPACITY BLDG
THOMAS LEE	P.O. BOX 251 HALL 2618 A.C.T AUSTRALIA	8,815.00	CONSULTANT TO PROVIDE PROFESSIONAL SERVICES FOR DEVELOPMENT OF A SUSTAINABLE FINANCING PLAN FOR THE MARSHALL ISLANDS PROTECTED AREAS NETWORK	CAPACITY BLDG
Pacific Environment Consultant Ltd	2ND FLOOR LEWELL/MEREDITH BLDG, SAVALALO, APIA SAMOA	4,375.00	Technical Assistance with the Development of Global Environment Fund project proposal	CAPACITY BLDG
Fish N Fins	P.O. BOX 142 KOROR, PALAU 96940	4,532.95	THIS CONTRACT IS FOR PRVISION OF DIVING CYLINDERS FOR THE SCIENTISTS PARTICIPATING IN THE LAND BASED PART OF THE RAPID ECOLOGICAL ASSESSMENT OF THE NORTHERN REEFS, KAYANGEL AND VELASCO/NGERUANGEL IN PALAU	CAPACITY BLDG
REGION 3				
Emre Turak	1 RUE FRANCOiS VILLON 9500, CERGY FRANCE	5,750.90	CORAL REEF ECOLOGIST FOR A RAPiD ECOLOGICAL ASSESSMENT OF THE NOTHERN REEFS OF PALAU, iNCLUDING KAYANGEL, NGERUANGEL AND VELASCO REEF	CAPACITY BLDG

NAME	ADDRESS	DISBURSEMENT GIVEN IN 2009	PURPOSE OF CONTRACT	REGRANTING/CAPACITY BLDG
Williem Prud Homme Van Reine	P.O. BOX 9514, 2300 RA LEIDEN, THE NETHERLANDS	2,408.55	CORAL REEF PHYCOLOGIST FOR A RAPID ECOLOGICAL ASSESSMENT OF THE NORTHERN REEFS OF PALAU, INCLUDING KAYANGEL, NGERUANGEL AND VELASCO REEF	CAPACITY BLDG

TOTAL **51,085.98**

MICRONESIAN CONSERVATION TRUST
EIN: 98-6062277
DECEMBER 31, 2009

STATEMENT 3
FORM 990
SCHEDULE I
PAGE 2, PART III, GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS IN THE UNITED STATES

NAME	ADDRESS	DISBURSEMENT GIVEN IN 2009	PURPOSE OF CONTRACT	REGRANTING/CAPACITY BLDG
Swift River Consulting	PO Box 70532 Seattle, WA 98127	4,500.00	Saleforce Online Customer Resource Management Configuration	CAPACITY BLDG
Cheryl Anderson	3636 LEAHI AVENUE HONOLULU, HI 96815	2,751.44	CONSULTANT TO CONDUCT PREPARATORY WORKSHOP TOWARDS CLIMATE CHANGE ADAPTATION IN MICRONESIA	CAPACITY BLDG
Goodsill Anderson	1099 Alakea Street, Suite 1800 / Honolulu, HI 96813	5,000.00	IRS TAX CONSULTATION	CAPACITY BLDG
Craig Musburger	68-1025 N. KANIKA DR. # 331 KAMUELA HI 96743	7,388.40	CORAL REEF PHYCOLOGIST FOR A RAPID ECOLOGICAL ASSESSMENT OF THE NORTHERN REEFS OF PALAU, INCLUDING KAYANGEL, NGERUANGEL AND VELASCO REEF	CAPACITY BLDG
Ellen Grant	30 CIDER HILL LANE CUMBERLAND ME 0402	4,910.00	MCT BOARD OF TRUSTEES STRATEGIC PLANNING	CAPACITY BLDG
	Total	**24,549.84**		