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Form **990**

Return of Organization Exempt From Income Tax

Jolola OMB No. 1545-0047

2010

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

Depa	ertment of t	he Treasury	benefit trust or private foundation)			Open to	
_	nal Revenue		► The organization may have to use a copy of this return to satisfy state		equirements.	Inspec	lion
A	For the 2	2010 cate	ndar year, or tax year beginning , 2010, and en		-1	, 20 `	
	Check if a		C Name of organization THE INTERNATIONAL SEAKEEPERS SOCIETY, INC	<u> </u>	D Empt	oyer identification (number
☑	Address c	hange	Doing Business As SEAKEEPERS SOCIETY			58-2385869	
	Name cha	nge	Number and street (or P.O. box if mail is not delivered to street address)	/suite	E Telep	hone number	
	Initial retur	m	355 ALHAMBRA CIRCLE	1100		786-221-0600	
	Terminate	d 1	City or town, state or country, and ZIP + 4				
	Amended	return	CORAL GABLES, FL 33134		G Gross	receipts \$	
	Application	n cendina	F Name and address of principal officer: DEAN C KLEVAN	H(a)	Is this a circuio retu	m for affiliates? 🔲 Ye	s 🗸 No
_			355 ALHAMBRA CIRCLE, CORAL GABLES, FL 33134			included? Ye	-
	Tax-exem	nt status:	√ 501(c)(3)			a list. (see instruction	
			W.SEAKEEPERS.ORG		Group exempti	ion number > 5	37,500
			☑ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of for			te of legal domicile:	FL
	art I	Summ		III AUGUST.		no or age comeso.	
			scribe the organization's mission or most significant activities: Sea	Kaanare ie	dedicated to	the developmen	t and
		-	ent of technologies to monitor the oceans in support of conservation and				
8					<i></i>	sed on a solony c	Oncent
Ĕ		or tre ra	pidly deteriorating ocean ecosystem which can have a profound im pact	on life on t	:artn.		
Activities & Governance		No1 - Ale:		FN -6			
é			is box Diff the organization discontinued its operations or disposed of more than 2	376 OF ITS THEIL 2	RECE	IVED	
*			of voting members of the governing body (Part VI, line 1a)	.: -{ : -	. INFLA		14
8			of independent voting members of the governing body (Part VI, line 1		4	S	13
₹.	5 T	otal nun	nber of individuals employed in calendar year 2010 (Part V, line 2a)	·	. NO 1/2	± 2011 S	4
ᅗ	6 T	otal nun	nber of volunteers (estimate if necessary)	8	. NON B	100	3
•	7a T	otal unre	elated business revenue from Part VIII, column (C), line 12	بينا	7.9		0
	b N	let unrek	ated business taxable income from Form 990-T, line 34		OGD	יט .א⊑	0
				· Pri	or Year	Current Ye	ear .
	8 (Contribut	tions and grants (Part VIII, line 1h)		537,128	3	399,578
Ę.			service revenue (Part VIII, line 2g)			<u> </u>	
Ве чепце		•	nt income (Part VIII, column (A), lines 3, 4, and 7d)				
Re	i		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	37,854	<u> </u>	68,084
	i i				574,982		467,662
			enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	 	374,302	-	407,002
	*		nd similar amounts paid (Part IX, column (A), lines 1–3)				
ĺ		•	paid to or for members (Part IX, column (A), line 4)		255.045	. 	202.000
8		-	other compensation, employee benefits (Part IX, column (A), lines 5-10)		355,641		282,998
Expenses			nal fundraising fees (Part IX, column (A), line 11e)			ļ	
Ř	ьт	otal fund	draising expenses (Part IX, column (D), line 25) ▶			_	
ш	17 C	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24f)		377,083		448,682
1	18 T	otal exp	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		732,724	<u> </u>	731,679
i	19 F	Revenue	less expenses. Subtract line 18 from line 12		(157,741)		264,017)
5 8				Beginning	of Current Year	End of Ye	87
Not Assets or Fund Batences	20 T	otal asse	ets (Part X, line 16)		723,448	3	514,422
碧	21 T		ilities (Part X, line 26)		154,213	<u> </u>	209,204
到	22 N		s or fund balances. Subtract line 21 from line 20		569,235	5	305,218
	rt II		ure Block				
			y, I declare that I have examined this return, including accompanying schedules and sta	atements, and	to the best of	my knowledge and	belief, it is
true	, correct, i	and comple	ete. Declaration of preparer (other than officer) is based on all information of which preparer	erer has any k	nowledge.	,	
	· — Т				1		
Sig	_	Signs	ature of officer		Date		
_		y Sagile	KASA, K Mareline		11	/15/2011	
łe	9	—	2/0/20 / 0 / 1 / 1 / 1				
	L	<u> </u>	or print name and title ROSA MAULINI EVP/CFO	D-1-		I make t	
Pai	d	Print/Typ	pe preparer's name Preparer's signature	Date	Check		
	parer				setf-en	ployed	
	e Only	Firm's na	ame ►		Firm's EIN ▶		
<i>-</i> J	Uilly	Firm's ac	idress >		Phone no		
/lay	the IRS		this return with the preparer shown above? (see instructions)			🔲 Ye	oN 🗌 e
_				. No. 11282Y			90 (2010)

For Paperwork Reduction Act Notice, see the separate instructions.

Form 99	(2010) Pa	ge 2
Part I		
	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission:	
	An organizaction of international leaders which promote synergy among citizens, governments, eduational 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?	No
	f "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?	Νo
	f "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. Sec	tion
	501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocation	s to
	others, the total expenses, and revenue, if any, for each program service reported.	
4a	Code: (Expenses \$ 380,219 including grants of \$) (Revenue \$)	
	See Schedule O, Page 1	
	·	
	······································	
4b	Code:) (Expenses \$ including grants of \$) (Revenue \$)	_
	······································	

4c	Code:) (Expenses \$ including grants of \$) (Revenue \$)	
•	Code	
		•••••
,		
	Other program services. (Describe in Schedule O.)	
	Expenses \$ including grants of \$) (Revenue \$)	
40	otal program service expenses ► 380,219	

Part	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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	1	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8_		1
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		1
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	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	\	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110		1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		✓
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		1
14 a b	Did the organization maintain an office, employees, or agents outside of the United States? 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, Parts I and IV	148 14b		1
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, Parts II and IV.	15		<u>·</u>
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, Parts III and IV	16		<u>·</u>
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 (see instructions)	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		1
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 a		20a		✓
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20ъ		
		Form	ı 99 0	(2010)

Part	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		/
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		,
24-		23		
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
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		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		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
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		√
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		1
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
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		✓
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 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

Did the organization receive any payments for indoor tanning services during the tax year? .

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form **990** (2010)

14a

14b

Form 9	90 (2010)		1	Page 6
Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b b "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang O. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI		•	. 🗆
Sect	ion A. Governing Body and Management			T 44-
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14		Yes	No
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b 13	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1	_	<u> </u>
_	any other officer, director, trustee, or key employee?	2	1	
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?			١,
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6	Does the organization have members or stockholders?	6		1
7 a	Does the organization have members, stockholders, or other persons who may elect one or more members			
.	of the governing body?	7a		1
8 8	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		-
_	the year by the following:			
a	The governing body?	8a	1	**** '
ь	Each committee with authority to act on behalf of the governing body?	8b	1	
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	i	1
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		√
•	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?.	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	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		/
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
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		
13	Does the organization have a written whistleblower policy?	13		1
14 15	Does the organization have a written document retention and destruction policy?	14		V
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-		.:
a b	The organization's CEO, Executive Director, or top management official	15a 15b		1
~	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			-
16a		16a		
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		•
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► FLORIDA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) for public inspection. Indicate how you make these available. Check all that apply.	is only) ava	ilable
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict o and financial statements available to the public.			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ROSA MAULINI, 10023 14TH STREET, NORTH, #22-103, ST PETERSBURG, FLORIDA 33716	of the		

Form 990 (2010	n	Page 7
Part VII	Compensation of Officers, Directors, Trustees	, Key Employees, Highest Compensated Employees,
	and Independent Contractors	
	Check if Schedule O contains a response to any que	estion in this Part VII

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

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

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

(A)	(B)			-	C)			(D)	(E)	(F)
Name and Title	Average	Posit	ion (d	chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	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
(1) LEE ANDERSON	.5							0	0	
BOARD DIRECTOR] .3	✓			<u> </u>			"		_
(2) BRIAN COBB	.5							0	٥	c
BOARD DIRECTOR							$ldsymbol{ld}}}}}}$, i	
(3) PATTY ELKUS	1 1				l			0	0	c
BOARD DIRECTOR		1					<u> </u>			
(4) MICHAEL T MOORE	4							o	0	d
BOARD DIRECTOR	<u> </u>	<u> </u>			L		L	<u> </u>		
(5) ROBERT FISHER	.5			ŀ			1	۰ ا	i o	c
BOARD DIRECTOR		✓	L		_		_			
(6) JIM GILBERT	5							٥	l o	C
BOARD DIRECTOR		_	L.,	L	L	<u> </u>	ļ			
(7) MARK GROSVENOR	.5						l	l o	lo	C
BOARD DIRECTOR		_	Щ	_	_		<u> </u>			
(8) MARILYN KING FISHER	.5				l	İ		l 0	o	l d
BOARD DIRECTOR	1	<u> </u>		_	<u> </u>		<u> </u>		ļ	
(9) VEE KING SHAW	.2							l o	o	C
BOARD DIRECTOR		✓		_	<u> </u>		_			
(10) DON TOMLIN	1				l		1	٥	o	C
BOARD DIRECTOR		-	L.,		<u> </u>		<u> </u>			
(11) JAY WADE	.5						İ	0	j o	d
BOARD DIRECTOR	<u> </u>	/	ļ		<u> </u>		_		ļ	
(12) FRANK WLASEK	.5					1		1 0	l o	C
BOARD DIRECTOR		✓	Ш	_			_			
(13) JEAN VICTOR PASTOR	.2	_						۰ ا	اه	O
BOARD DIRECTOR		✓		L	L		L			· · · · · · · · · · · · · · · ·
(14) DEAN KLEVAN	50			١.,			1	92,432	اه	15,552
PRESIDENT AND CEO			Ш	✓	1	✓	ļ		ļ	
(15) ROSA MAULINI	50						ļ	89,520		8,523
EXECUTIVE VP/CFO				✓	✓		_			
(16)			1		ı	1		Ī		

Part	VII Section A. Officers, Directors, Trus	stees, Key	Emple	руе	99, 8	and	High	est	Compensated	Employees (con	tinued)		
•	W	(B) (C) Average Position (check all that							(D)	(E)	i _	(F)	_
	Name and title	Average hours per	├ ──	On (e		k all	<u> </u>	1	Reportable compensation	Reportable compensation from		stimated nount of	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	蠶	Former	from	related	1	other	
		(describe hours for	<u>8</u> 5	鬞	₩	93	S S	릴	the organization	organizations (W-2/1099-MISC)		pensati rom the	on
		related	9 2	좚		ğ	P		(W-2/1099-MISC)		one	anizatio	
		organizations in Schedule	1 5	ş		8	9					d relate: enizatio	
		0)	•	8			Highest compensated employee				-		-
(17)					\vdash		-	⊢			 		
								_			-		
(18)													
(19)	***************************************												
(20)													
(21)						\vdash		-				-	
(22)					-			-			-	•	
					_	_							
(23)													
(24)													
(25)													
(26)													
(27)					-	-		-			 		
				_	-								
(28)								L					
1b	Sub-total			•	•		•		101.050		 		0 24,218
C	Total from continuation sheets to Part			•	•		•		181,952 181,952		 		24,216 24,075
d	Total (add lines 1b and 1c)									ore then \$100.00	00 in		24,073
_	reportable compensation from the organi			1036	ıısı	.60	BOOVE	3) 44	110 10001400 111	010 that \$100,0	50 III		
												Yes	No
3	Did the organization list any former of	ficer, direc	tor o	r tr	uste	90 ,	key e	mp	loyee, or high	est compensate			الــــــا
	employee on line 1a? If "Yes," complete s										3	↓	✓
4	For any individual listed on line 1a, is the	sum of re	portal	ble (com	per	nsatic	n a	nd other comp	ensation from t	he]	1 !
	organization and related organizations	greater tha	an \$1	150,	UUU	re n	r -ye	s, -	complete Sch	equie J for su			١,
_	individual			•		 		• •	mlatad arganis		<u>4</u>	4	 ,
5	for services rendered to the organization:	n accine co 7 If "Yes " c	omoi	ete 'ete	Sch	no: aedi	ile J f	or s	uch person		"" š	-	·/
Section	n B. Independent Contractors											1	<u> </u>
1	Complete this table for your five highest	compensate	ed inc	dep	end	ent	contr	acto	ors that receive	ed more than \$1	00,000	of	
	compensation from the organization.	•		-									
	(A) Name and business add	TRES							(B) Description of s	ervices	(Compe		
-	· van no sa na sensem neste sense		-					\vdash					
	The state of the s			<u> </u>		i24	ad 4-	<u></u>	one listed sha	way was			
2	Total number of independent contractor received more than \$100,000 in compens	rs (INCIUOII) Pation from t	iy DU the o	ngan Man	ul l iizat	រហេវ រលា	#U [() ▶ ^	• ហា	iuse iisted add	AS) MUO			1
	TOOMYOU THOSE REEL WITCH 1000 III COMPONE	ALLON WORLD	J.U	9							Fo	m 99 ((2010)

Section Part Paderated campaigns 18 388,329 18 18 18 18 18 18 18 1		Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Business Code Description 18	Federated campaigns 1a 386,329					
Business Code Business Code	b	Membership dues 1b]			
Business Code Part	С	*]			
Business Code Part	d	<u> </u>]		İ	
Business Code Part	e]			
Business Code Description f						
Business Gode Business Code	9	*************	399 578			
Investment innorms (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) from fundraising events Income or (loss) from fundraising events Income or (loss) from fundraising events Income or (loss) from fundraising events Income or (loss) from fundraising events Income or (loss) from gaming activities.	 "		300,070			
Treestment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds ▶ Royalties	28		1	-	İ	
d						
Trivestment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceds ▶ Froyalties Income from investment of tax-exempt bond proceds ▶ Froyalties Income from investment of tax-exempt bond proceds ▶ Froyalties Income or (loss) Income	6		· · · · · · · · · · · · · · · · · · ·			
Trivestment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceds ▶ Froyalties Income from investment of tax-exempt bond proceds ▶ Froyalties Income from investment of tax-exempt bond proceds ▶ Froyalties Income or (loss) Income	d		· · · · · · · · · · · · · · · · · · ·			
Treestment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds ▶ Royalties						
Investment innorms (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income from investment of tax-exempt bond proceeds Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) Income or (loss) from fundraising events Income or (loss) from fundraising events Income or (loss) from fundraising events Income or (loss) from fundraising events Income or (loss) from fundraising events Income or (loss) from gaming activities.	1	All other program service revenue.				<u> </u>
and other similar amounts) Income from investment of tax-exempt bond proceeds ► Royalties (i) Peau (ii) Personal (iii) Pe	9		0			· · · · · · · · · · · · · · · · · · ·
4 Income from investment of tax-exempt bond proceeds ► Royalties	3	Investment income (including dividends, interest,				
Section Sec	1	· ·				
(i) Personal (ii) Personal (iii)	4	Income from investment of tax-exempt bond proceeds ▶				
Ba Gross Rents	5	· · · · · · · · · · · · · · · · · · ·	18,731	18,731		
b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7a Gress amount from sales of assets other than inventory b Less: cost or other basis and safes expenses c Gain or (loss) d Net gain or (loss) Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a 119,190 b Less: direct expenses b 59,837 c Net income or (loss) from fundraising events See Part IV, line 19 a Less: direct expenses b c Net income or (loss) from fundraising events See Part IV, line 19 a Less: direct expenses b c Net income or (loss) from garning activities returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenus Business Code		(i) Real (ii) Personal				
C Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a 119,190 b Less: direct expenses b 69,837 c Net income or (loss) from fundraising events See Part IV, line 19 b Less: direct expenses See Part IV, line 19 c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: direct expenses b C Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances returns and allowances Business Code 11a b Miscellaneous Revenue Business Code	6a	Gross Rents]			
d Net rental income or (loss)	Ь	· · · · · · · · · · · · · · · · · · ·]			
7a Gross amount from sales of assets offer than inventory b Less: cost or other basis and safes expenses c Gain or (loss)	C					
assets other than inventory b Less: cost or other basis and sales expenses . c Gain or (loss)	_					
b Less: cost or other basis and sales expenses . c Gain or (loss)	7a					
and sales expenses . c Gain or (loss) . d Net gain or (loss) . 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	١.					
c Gain or (loss)	þ					İ
d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	I -					
events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a	Net gain or (loss)				
of contributions reported on line 1c). See Part IV, line 18	8a					
See Part IV, line 18						ľ
b Less: direct expenses b 69,837 c Net income or (loss) from fundraising events . ▶ 49,353 9a Gross Income from gaming activities. See Part IV, line 19						
c Net income or (loss) from fundraising events . 9a Gross Income from gaming activities. See Part IV, line 19	1					
9a Gross Income from gaming activities. See Part IV, line 19		• • • • • • • • • • • • • • • • • • • •				
See Part IV, line 19			49,353			49,35
b Less: direct expenses b c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory . ▶ Miscellaneous Revenue Business Code 11a b c d All other revenue	92					
C Net income or (loss) from gaming activities . 10a Gross sales of inventory, less returns and allowances	l _					
10a Gross sales of inventory, less returns and allowances	I				~	
returns and allowances	1 -	· · · · · · · · · · · · · · · · · · ·				
b Less: cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a b c All other revenue	100	A was and all accompany				
C Net income or (loss) from sales of inventory . Miscellaneous Revenue	۱ ـ	· · · · · · · · · · · · · · · · · · ·			•	
Miscellaneous Revenue Business Code 11a b c d All other revenue					-	
11a b c d All other revenue						
b c d All other revenue	110					
c d All other revenue	1 .			···		
d All other revenue	_		 			
		All other revenue				
- 1	_					
12 Total revenue. See instructions	t	- · · · · · · · · · · · · · · · · · · ·	467 662	18 721		49,35

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	lumn (A) but are not	required to comple	te columns (B), (C), al	nd (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	(D) Fundrasing 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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	206,027	83,603	63,753	58,672
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	51,124			51,124
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	4,418			4,418
10	Payroll taxes	21,429	6,725	6,324	8,380
11	Fees for services (non-employees):				
a	Management				
b	Legal L	13,626		13,626	
C	Accounting				<u> </u>
d	Lobbying				
8	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	80,230	19,057	42,821	18,350
12	Advertising and promotion	19,683		40.004	19,683
13	Office expenses	29,442	5,669	19,661	4,112
14	Information technology	21,467	14,053	6,274	1,141
15 46	Royalties	12,050 4,587	12,050	4,587	
16 17	Occupancy	22,852	2,138	4,226	16,488
18	Travel		2,130	4,220	10,400
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	237,582	236,924	658	
23	Insurance	4,780		4,780	
24	Other expenses, Itemize expenses not covered				. 1
	above (List miscellaneous expenses in line 24f. If	i			•
	line 24f amount exceeds 10% of line 25, column		j		
	(A) amount, list line 24f expenses on Schedule O.)				
8	Gain/Loss Disposal of Assets	2,384		2,384	
Ь					
C					
•					
8	All other expenses				
ae T	All other expenses Total functional expenses. Add lines 1 through 24f	731,679	380,219	169,093	182,367
<u>25</u> 26	Joint costs. Check here ▶ ☐ if following	/31,0/9	360,219	103,033	104,307
<i>2</i> 0	SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

_		(A)		(B)
1-4	Out to the second secon	Beginning of year		End of year
1 2	Cash—non-interest-bearing	47,507 65,287	1	58,39
3	Savings and temporary cash investments		2	50,39
4	Accounts receivable, net	25,000 82,147	3	42.42
5	Receivables from current and former officers, directors, trustees, key	82,147	4	42,47
3	employees, and highest compensated employees. Complete Part II of			
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section	·	3	
"	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
. [employees' beneficiary organizations (see instructions)		6	-
7	Notes and loans receivable, net		7	
a	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	2,024	9	4,70
10a		2,024	9	4,70
100	other basis. Complete Part VI of Schedule D 1,716,298			
Ь		339,453	10c	184,552
11	Investments—publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	162,030	15	173,90
16	Total assets. Add lines 1 through 15 (must equal line 34)	723,448	16	514,42
17	Accounts payable and accrued expenses	154,213	17	164,20
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	
21 22	Payables to current and former officers, directors, trustees, key	1		
]	employees, highest compensated employees, and disqualified persons.		_	
1	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	154,213	26	209,204
	Organizations that follow SFAS 117, check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.		ł	
	Į·		~	305,210
27	Unrestricted net assets , ,	569,235	27	303,210
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
27 28 29 30 31 32 33	complete lines 30 through 34.	,		-
30	Capital stock or trust principal, or current funds	-	30 T	<u> </u>
31	Paid-in or capital surplus, or land, building, or equipment fund	-	31	
32	Retained earnings, endowment, accumulated income, or other funds .		32	
مما	Total net assets or fund balances	569,235	33	305,218
33				

Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI	· · C
1 Total revenue (must equal Part VIII column (A) line 19)	
	467,66
2 Total expenses (must equal Part IX, column (A), line 25)	731,68
	(264,018
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4	569,23
5 Other changes in net assets or fund balances (explain in Schedule O)	
Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	305,21
Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII	[
	es 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	1
b Were the organization's financial statements audited by an independent accountant?	1
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?	
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 separate basis, consolidated basis, or both:	
☐ 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?	
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	Ť
	990 201

SCHEDULE A (Form 990 or 990-EZ)

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.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

am	e of the organization			-		· · · · · ·		Employer is	dentification	n number	
THE	THE INTERNATIONAL SEAKEEPERS SOCIETY, INC							58-2385869			
Pa	rtt Reason	for Public Cha	rity Status (All orga	nization	s must c	omplete	this par	rt.) See i	nstructio	ons.	
ηе	<u> </u>	~	ntion because it is: (Fo		•	-	-	-			
1	== :		hes, or association of			ed in sec	tion 170	(b)(1)(A)(i) .		
2	A school desc	cribed in section	170(b)(1)(A)(ii). (Attac	th Sched	ule E.)						
3		-	spital service organiza								
4		-	on operated in conjun	ction with	n a hospit	tal descri	bed in se	ction 17	0(b)(1)(A)	(iii). Enter	the
		ne, city, and stat									
5		on operated for op)(1)(A)(iv). (Com	the benefit of a colle- plete Part II.)	ge or uni	iversity o	wned or	operated	by a go	vernment	tal unit de	scribed in
6	A federal, stat	te, or local gover	nment or government	al unit de	scribed is	n sectior	170(b)(1)(A)(v).	•		
7	_ •	•	receives a substantia	-	its suppo	ort from a	a govern	nental ur	nit or from	n the gen	eral public
	described in s	section 170(b)(1)	(A)(vi). (Complete Par	rt ().)							
8	☐ A community	trust described i	n section 170(b)(1)(A)(vi). (Cor	nplete Pa	art II.)					
9	An organization	on that normally	receives: (1) more that	an 331/59	6 of its si	upport fr	om contri	butions,	members	ship fees,	and gross
			d to its exempt funct								
		_	nt income and unrel				-		n 511 ta	x) from b	usinesses
	acquired by the	ne organization a	fter June 30, 1975. Se	e sectio	ก 509(a)((2). (Com	plete Pari	t III.)			
10	An organization	on organized and	operated exclusively	to test fo	or public :	safety. So	e sectio	n 509(a)((4).		
11			d operated exclusive								
		•	licly supported organ								e section
	509(a)(3). Che	ck the box that	describes the type of	supportin	ng organi:	zation an	d comple	te lines 1	1e throug	gh 11h.	
	a 🗌 Type		Type II c			-	integrate		d [II-Other
€			that the organization								
		_	ers and other than one	e or more	publicly	support	ed organi	izations o	described	in sectio	n 509(a)(1)
	or section 509			_			_	_			
f			written determination	on from 1	the IRS	that it is	а Туре	I, Type	il, or Typ	e III supp	corting
	•	check this box .									\cdot \cdot \sqcup
8		' <u> </u>	he organization accep	pted any	gift or ca	ontributio	n from a	ny of the	•		
	following pers									ء د.	Van I Na
		-	ndirectly controls, eith		-			describe	o in (ii) ai		Yes No
	• •		ody of the supported	-	ion?					11g()	
			on described in (i) abo							11g(ii)	- /
			a person described in							11g(iii)	
<u>!</u>	Provide the fo	llowing informati	on about the support	T						r	
(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization stact in your		rou notify nization in			(vii) Amount of support	
	Organization:		above or IRC section		document?	COL (I)	of your	(i) organi	zed in the		
			(see instructions))				port?	Yes	S.7	l	
				Yes	No	Yes	No	163	No	ļ	
A)								l	1	1	
		ļ		 -	 		 	 	 		
B)						[ł	
		 			·					<u> </u>	
C)							ŀ	1			
D)				<u> </u>							
-) 									ļ		
E)											
_		 							 		

Schedule A (Form 990 or 990-EZ) 2010

Part	(Complete only if you checked the Part III. If the organization fails to	ne box on line	5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
Sect	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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						
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.			<u></u>	l	l	L <u></u> .
	on B. Total Support	4-1.0000	#1 0007	(-) 0000	(-0.0000	(-) 0010	(A Total
	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 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				<u> </u>		L
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for th	-			, or titth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her						· · ·
	on C. Computation of Public Suppor			14		144	%
14	Public support percentage for 2010 (line 6 Public support percentage from 2009 Sch					15	
15 16a	331/3% support test—2010. If the organiz	ration did not	check the box	on line 13, and	 d line 14 is 33¹		
	box and stop here. The organization qual						. ▶ ┌
b	331/3% support test-2009. If the organ					15 is 331/a%	or more,
_	check this box and stop here. The organi						. ▶ □
17a	10 40 40 and the 44 in						
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization me supported organization	ion meets the	"facts-and-ci -and-circums	rcumstances" tances" test. T	test, check th	is box and st	op here. publicly
18	Private foundation. If the organization did	d not chack a l	 hox on line 13		 Lar 17h chec	k this box and	. ▶ [] see
10	instructions						_

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees 1,408,326 1,360,451 1,440,833 537.128 399,578 5,146,316 received. (Do not include any "unusual grants.") 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 . . . Gross receipts from activities that are not an unrelated trade or business under section 513 revenues levied for organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total, Add lines 1 through 5. . . . 1,408,326 1,360,541 1,440,833 399,578 537,128 5,146,316 7a Amounts included on lines 1, 2, and 3 349,214 362,379 259,992 140,700 543,736 1,656,021 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 259,992 543.736 362.379 140.700 1,656,021 349.214 Public support (Subtract line 7c from 3,490,295 Section B. Total Support (f) Total Calendar year (or fiscal year beginning in) ▶ (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 1,360,451 Amounts from line 6 1,408,326 1,440,833 537,128 399,578 5,416,316 10a Gross income from interest, dividends. payments received on securities loans, rents. 12.917 20,666 6,478 5,000 18,731 63,792 royalties and income from similar sources . b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 12.917 20,666 6,478 5,000 18.731 63,792 c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, 13 1,381,117 1,421,243 1,447,311 542,128 418,309 5,210,108 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) 14 Section C. Computation of Public Support Percentage 67 % Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f) 16 Public support percentage from 2009 Schedule A, Part III, line 15 67 % Section D. Computation of Investment Income Percentage Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f) . . . <1 % <1 % Investment income percentage from 2009 Schedule A, Part III, line 17 331/a% support tests-2010. If the organization did not check the box on line 14, and line 15 is more than 331/a%, and line

17 is not more than 331/x, check this box and stop here. The organization qualifies as a publicly supported organization .

33¹/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33¹/3%, and line 18 is not more than 33¹/3%, check this box and stop here. The organization qualifies as a publicity supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

	Form 990 or 990-EZ) 2010	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	

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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047 2010

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Department of the Treasury ► Attach to Form 990. ► See separate instructions. Internal Revenue Service

Open to Public Inspection

Name of the organization Employer Identification number THE INTERNATIONAL SEAKEEPERS SOCIETY, INC 58-2385869 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) . 2 Aggregate grants from (during year) . . . Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space 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 20 b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) . 2¢ Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ß 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) ☐ Yes ☐ No 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. If the organization elected, as permitted under SFAS 116 (ASC 958), 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. If the organization elected, as permitted under SFAS 116 (ASC 958), 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: 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 (ASC 958) relating to these items: **b** Assets included in Form 990, Part X .

Cat. No. 52283D

Schedule D (Form 990) 2010

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

Schedu	le D (Form 990) 2010							Page 2
Par		ollections of	Art. His	torical 1	reasures	or Ott	ner Similar A	
3	Using the organization's acquisition, accollection items (check all that apply):							
8	☐ Public exhibition		d	☐ Loa	n or excha	nae prod	arams	
ь	☐ Scholarty research		-	Oth				
C	Preservation for future generations							
4	Provide a description of the organization XIV.	n's collections	and expl	ain how t	hey further	the orga	anization's exe	empt purpose in Part
5	During the year, did the organization so assets to be sold to raise funds rather th							
Part	line 9, or reported an amount of				anization	answer	ed "Yes" to F	orm 990, Part IV,
1a	Is the organization an agent, trustee, c				or contribut	tions or	other assets r	not
				-				☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part							
_								Amount
С	Beginning balance					10	<u> </u>	
d						1d		
e	Distributions during the year					10		
f	Ending balance					1f		
2a	Did the organization include an amount of		art X, line	21? .	. .			Yes No
	If "Yes," explain the arrangement in Part	XIV.						
Par	V Endowment Funds. Complete	if the organi	zation ar	swered	"Yes" to F	orm 99	0, Part IV, lin	ie 10.
	•	(a) Current year	(b) Pn	or year	(c) Two year	rs back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance							
b	Contributions							
C	Net investment earnings, gains, and							
	losses		Ĺ					
đ	Grants or scholarships							
0	Other expenditures for facilities and programs							1
f	Administrative expenses							
g	End of year balance		L					
2	Provide the estimated percentage of the		nce held a	is:				
a	Board designated or quasi-endowment	-	<u></u> %					
b	Permanent endowment	.%						
C	Term endowment ►%							
3a	Are there endowment funds not in the p	ossession of t	ne organi	zation tha	at are held	and adn	ninistered for t	
	organization by:							Yes No
	(i) unrelated organizations							3a(i)
	(m)							3a(ii)
ь	If "Yes" to 3a(ii), are the related organization							3b
4	Describe in Part XIV the intended uses or							
Part								/A Papla reliva
	Description of Investment	(a) Cost or o			r other basis ther)		ocumulated preciation	(d) Book value
1a	Land							
b	Buildings							
C	Leasehold improvements			L				
đ	Equipment				10,340		10,340	0
Ð	Other SeaKeeper Modules	1			1,705,958		1,521,406	184,552

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

184,552

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Schedule D (F	om 990) 2010			Page 3
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 va Cost or end-of-year	
(1) Financia	al derivatives			
	held equity interests			
(3) Other				
(A)			ì	
(B)				
(C)	*************************			
(D)				
(E)	***************************************			
(F) (G)		 		
(H)	***************************************		-	
(0)		·		
	(b) must equal Form 990, Part X, col. (B) line 12.)	 		
Part VIII	· · · · · · · · · · · · · · · · · · ·	l Can Farm OOO Book V	tion 12	
Part VIII		T	7	1
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year r	
(1)				
(2)				
<u>(3)</u>		l		
(4)				
_(5)				
(6)		· · · · · · · · · · · · · · · · · · ·		
<u>(7)</u>				
(8)			 	
(9)				
(10)	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	rt X line 15		·
Tarrix		a) Description		(b) Book value
(1) SeaKee	eper 1000 Modules, Parts and component	s not yet deployed or In Pro	oress	173,904
(2)	<u> </u>		<u> </u>	
(3)				
(4)				
(5)				
(6)				
(7)	· · · · · · · · · · · · · · · · · · ·			,
(8)			· · · · · · · · · · · · · · · · · · ·	
(9)		····		
(10)				
	ımn (b) must equal Form 990, Part X, o		<u> </u>	173,904
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Amount	4	
	income taxes		4	
(2)			4	
(3)			4	
(4)	· · · · · · · · · · · · · · · · · · ·		-	
(5)			-	
<u>(6)</u> <u>(7)</u>			1	
(8)			4	
(9)	•		-	
(10)			1	
(11)			1	
	(b) must equal Form 990, Part X, col. (B) line 25.)		4	
TOTAL (COMMIN)	p) must citual rum sau, rat A, tut p) ale 23.)			

Schedu	de D (Form 990) 2010			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Staten	nents	B
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments	.	4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine	lines 3 and 9	10	
Part	XII Reconciliation of Revenue per Audited Financial Stateme		r Ret	um
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	ヿ	
C	Recoveries of prior year grants		1	
ď	Other (Describe in Part XIV.)		┪	
	Add lines 2a through 2d		2	<u>. </u>
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		<u>-</u>	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1	
b	Other (Describe in Part XIV.)		┨	
C	Add lines 4a and 4b		40	.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
	XIII Reconciliation of Expenses per Audited Financial Statem			
1			_	
-	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:		<u> </u>	.
2	·	امدا	f	
a	Donated services and use of facilities	2a 2b		
D .	Prior year adjustments		┥	
c	Other losses		-	
d	Other (Describe in Part XIV.)		┥ᇎ	- 1
е	Add lines 2a through 2d		2	
3	Subtract line 2e from line 1		<u> 3</u>	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			1
a		48	4	
b	Other (Describe in Part XIV.)	4b		
C				
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 1 <i>8.)</i>	5	
Part				
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and	9; Part III, lines 1a and 4;	Part i	V, lines 1b and 2b;
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII,	lines 2d and 4b. Also con	npleto	e this part to provide
any ac	ditional information.			
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Schedule D (Form 990) 2010 Part XIV Supplemental Information (continued)						
Part XIV	Supplemental Information (continued)					

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		Schedule D (Form 990) 2010				

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization ensemed "Yes" to Form 980, Part N, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 980-EZ. Inn 69.

OMB No. 1545-0047 2010

Internal	Revenue Service		Attach to Form 9			e separate instruction		Inspection
	of the organization			<u>-</u>			Employer identific	
THE		SEAKEEPERS SO				1.104		2385869
Par	Y I	i sing Activities. 90-EZ filers are n	•	•		vered "Yes" to F	orm 990, Part IV,	line 17.
1						owing activities C	Check all that apply.	
a	☐ Mail solicit	_	ii iaiseo iuitos t			ion of non-govern		
b		id email solicitation	ns	fΓ		ion of government		
c	☐ Phone soli			g [fundraising events		
d	n-person	solicitations		•	•			
2a							ficers, directors, trus	
	• -			-		•	fundraising services	
ь		e ten highest paid at least \$5,000 by			draisers) p	ursuant to agreen	nents under which th	ne fundraiser is to be
	(i) Name and addre or entity (fur		(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundreiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
				Yes	No	1		
1								
2								
3	·							
4		 						
5	,							
6								
7			<u> </u>					
8			<u> </u>					
9					<u> </u>			
10							.,	
				I	L			
Total 3	List all states	in which the orga	nization is regis	tered or lic	ensed to s	olicit contribution	s or has been notifie	ed it is exempt from
	registration or							-
					,			

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•••••								
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Schedule G (Form 990 or 990-EZ) 2010

, Pá	art II	Fundraising Events. Com than \$15,000 of fundraisin	g event contributions			
		gross receipts greater tha	(a) Event #1 NAPLES DINNER (event type)	(b) Event #2 CANNES 2010 (event type)	(c) Other events 3 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 2	Gross receipts Less: Charitable contributions	29,900	24,000	65,290	119,190
	3	Gross income (line 1 minus line 2)	29,900	24,000	65,290	119,190
	4	Cash prizes	0			
,	5	Noncash prizes	0			
Sesu.	6	Rent/facility costs	0	2,689	27,600	30,289
Direct Expenses	7	Food and beverages	0	6,023	16,374	22,397
Direc	8	Entertainment	0	3,300	1,050	4,350
	9	Other direct expenses .	0	3,729	9,072	12,801
	10 11	Direct expense summary. Ad- Net income summary. Combi				(69,837 <u>)</u> 49,353
Pa	rt III	Gaming. Complete if the than \$15,000 on Form 99	organization answer			eported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
<u>ê</u>	1_	Gross revenue				
ses	2	Cash prizes				· · · · · · · · · · · · · · · · · · ·
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
_	5	Other direct expenses .			W 0/	
	6	Volunteer labor	☐ Yes%	☐ Yes %	☐ Yes % ☐ No	
	7	Direct expense summary. Add	d lines 2 through 5 in co	(b) nmuk	•	()
	8	Net gaming income summary	. Combine line 1, colun	nn d, and line 7	<i>.</i> .	
9	a İşt	V	erate gaming activities	in each of these states		
10		ere any of the organization's ga		•	ed during the tax year?	

Schedu	ile G (Form 990 or 990-EZ) 2010	Page 3
11	Does the organization operate gaming activities with nonmembers?	s 🔲 No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	s 🗌 No
13	Indicate the percentage of gaming activity operated in:	
8	The organization's facility	%
b	An outside facility	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
	Name ►	
	Address ►	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	s 🗌 No
ь	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	_
	amount of garning revenue retained by the third party ► \$	
	Name ►	
	Address ▶	
16	Gaming manager information:	
	Name ►	
	Gaming manager compensation ▶ \$	
	Description of services provided ▶	
	☐ Director/officer ☐ Employee ☐ Independent contractor	
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	s 🗌 No
b	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 ▶ \$	
Part	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete part to provide any additional information (see instructions).	this
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	Schedule G (Form 990 or 9	90-EZ) 2010

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

c questions on 2010

Department of the Treasury Internal Revenue Service Complete to provide Information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE INTERNATIONAL SEAKEEPERS SOCIETY, INC

Employer identification number 58-2385869

990 PART III. LINE 1A. 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 retneval. The system was awarded patent #6,536,272.
The SeaKeeper 1000 uses a standard suite of weather instruments combined with specialized set of automated laboratory analytic
devises 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, chlorophyli,
CO2, arsenic, and mercury, to name a few. The SeaKeeper System is positioned to become a "standard" for modular automated environ-
mental 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 ships, a yacht transport, research vessels, and piers. In 2010, SeaKeepers
commissioned 3 new systems and at year end had 3 systems in various stages of install.
Still feeling the affects of the economic downturn, in 2010, SeaKeepers continues to streamline its operations as it begins to rebuild
its donor base and also works to diversify and expand its supporters. The license agreement with YSI as the exclusive builder of the
SeaKeeper 1000 continues and has begun to pay dividends in the form of royalties as the fleet expands beyond that of the yacht members.
SeaKeepers also filed for and was successful in obtaining a \$100,000 grant to explore the stability of the pH and dissolved oxygen
sensors (with an overall study of the archival data one-minute data), develop a training program for those the yacht crews and scientists
aboard research vessels that have been equipped with the SeaKeepers1000, and also to enhance the new Visual Data Acquisition
and Reporting Software (VDARS). The study is scheduled to be completed in 2011. The International SeaKeepers Society Scientific
Advisory Council is a high-level group of nationally and internationally prominent scientists and leaders with expertise in ocean sciences
and meteorology. This volunteer Advisory Council provides advice, assistance and support to SeaKeepers and its staff to guide the
programming and planning decisions of the organization. The Advisory Council provides SeaKeepers with connections to experts in the
scientific community, who inform the organization's work.
Part I Line 6: Volunteers provide programming services and web interface for data access to allow reporting of SeaKeepers Fleet
transmissions, they also provide support at fundraising events and administrative tasks in the office.
Part VI. Section A. Line 2. Board members Robert Fisher and Marilyn Fisher are husband and wife.

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization THE INTERNATIONAL SEAKEEPERS SOCIETY, INC.	Employer identification number 58-238-586
THE HITLKING TOWNE SEARCE FERS SOCIETY, INC.	38-238-360
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 energyal. Approval is obtain	and via phono or amail
are provided to the committee either electronically or by mall for review and approval. Approval is obtain	red via priorie di email.

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