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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

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 10-01-2010 and ending 09-30-2011

B Check if applicable
- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

C Name of organization
CONSORTIUM FOR OCEAN LEADERSHIP

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
1201 NEW YORK AVENUE NW NO 420

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

D Employer identification number
52-1892964

E Telephone number
(202) 332-0063

G Gross receipts $ 173,235,867

F Name and address of principal officer
DR ROBERT GAGOSIAN
1201 NEW YORK AVENUE NW NO 420
WASHINGTON, DC 20005

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

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

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW OCEANLEADERSHIP ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation 1994 | M State of legal domicile DE

Part I Summary

Activities & Governance

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

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	17
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	17
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	79
6	Total number of volunteers (estimate if necessary)	6	50
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	133,645,022	172,568,155
	9	Program service revenue (Part VIII, line 2g)	560,326	614,558
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	30,197	53,154
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	134,235,545	173,235,867
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,241,356	664,508
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	8,214,293	9,345,470
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,829		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	124,958,807	163,077,773
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	134,414,456	173,087,751
	19	Revenue less expenses Subtract line 18 from line 12	-178,911	148,116

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	11,957,257	27,540,631
	21	Total liabilities (Part X, line 26)	9,990,433	25,560,189
	22	Net assets or fund balances Subtract line 21 from line 20	1,966,824	1,980,442

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

****** 2012-04-30
Signature of officer Date

YAN XING VP & CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶ ☐	PTIN
JENNY E HERRERA CPA	JENNY E HERRERA CPA			

Firm's name ▶ RUBINO & MCGEEHIN CHARTERED | Firm's EIN ▶

Firm's address ▶ 6903 ROCKLEDGE DRIVE SUITE 1200 BETHESDA, MD 20817 | Phone no ▶ (301) 564-3636

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

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

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

If "Yes," describe these new services on Schedule O

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 90,948,605 including grants of $) (Revenue $)

OCEAN RESEARCH INTERACTIVE OBSERVATORY NETWORK PROGRAM (OOI) - DEVELOPMENT OF THE PRELIMINARY NETWORK DESIGN, SYSTEM REQUIREMENTS, AND OTHER PLANNING DOCUMENTS

4b (Code) (Expenses $ 68,103,166 including grants of $) (Revenue $)

INTEGRATED OCEAN DRILLING PROGRAM - INTERNATIONAL PARTNERSHIP OF SCIENTISTS AND RESEARCH INSTITUTIONS ORGANIZED TO EXPLORE THE HISTORY AND STRUCTURE OF THE EARTH

4c (Code) (Expenses $ 4,010,195 including grants of $) (Revenue $)

U S SCIENCE SUPPORT PROGRAM ASSOCIATED WITH THE INTERGRATED OCEAN DRILLING PROGRAM(IODP) SUPPORTS INVOLVEMENT OF THE US SCIENTIFIC COMMUNITY IN THE IODP, AN INTERNATIONAL PROGRAM OF BASIC RESEARCH IN MARINE GEOSCIENCES THAT USES MULTIPLE OCEAN DRILLING PLATFORMS TO EXPLORE THE EARTH'S HISTORY AND ENVIRONMENT

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 4,951,209 including grants of $ 664,508) (Revenue $ 614,558)

4e **Total program service expenses**▶$ 168,013,175

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
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		
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b		No
c	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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	Yes	
f	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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Parts II and IV*	15	Yes	
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 U S ? *If "Yes," complete Schedule F, Parts III and IV*	16	Yes	
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		No
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		No
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		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 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		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
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		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
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* ☐ **Yes** ☑ **No**			
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	40			
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	Yes	
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	79			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
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		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	17		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	17		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . .		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		No
6	Does the organization have members or stockholders?		6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . .		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
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		No

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		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
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	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶NY

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

YAN XING
1201 NEW YORK AVE 4TH FL
WASHINGTON, DC 20005
(202) 332-0063

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

Check if Schedule O contains a response to any question 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, and **current** key employees 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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
(1) DR ROBERT GAGOSIAN PRESIDENT & CEO	40 00	X		X				374,804	0	37,438
(2) AMY CASTNER SEC/DIR OF BOARD RELATIONS	40 00	X		X				82,699	0	28,154
(3) DR NANCY TARGETT CHAIR	2 00	X		X				0	0	0
(4) DR ROBERT B DUNBAR VICE CHAIR	2 00	X		X				0	0	0
(5) DR BRIAN TAYLOR TREASURER	2 00	X		X				0	0	0
(6) DR NANCY RABALAIS GOVERNOR	2 00	X						0	0	0
(7) DR JAMES G SANDERS GOVERNOR	2 00	X						0	0	0
(8) DR PETER N MIKHALEVSKY GOVERNOR	2 00	X						0	0	0
(9) DR ROBERT W CORELL GOVERNOR	2 00	X						0	0	0
(10) MR FRANK M CUSHING GOVERNOR	2 00	X						0	0	0
(11) DR DONALD F BOESCH GOVERNOR	2 00	X						0	0	0
(12) DR LARRY MAYER GOVERNOR	2 00	X						0	0	0
(13) DR ROBERT M OWEN GOVERNOR	2 00	X						0	0	0
(14) DR MARK R ABBOTT GOVERNOR	2 00	X						0	0	0
(15) DR CHARLIE PAULL GOVERNOR	2 00	X						0	0	0
(16) DR SUSAN K AVERY GOVERNOR	2 00	X						0	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 (describe hours for related organizations in Schedule O)	(C) 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
(17) DR MICHAEL PERFIT GOVERNOR	2 00	X						0	0	0
(18) DR SANDRA WHITEHOUSE GOVERNOR	2 00	X						0	0	0
(19) MS JOSIE QUINTRELL GOVERNOR	2 00	X						0	0	0
(20) YAN XING VP & CFO	40 00			X				180,514	0	40,075
(21) KEVIN WHEELER VP, DIR PUBLIC AFFAIRS	40 00				X			158,066	0	27,849
(22) DAVID DIVINS VP, DIR OCEAN DRILLING	40 00				X			158,899	0	39,207
(23) STUART WILLIAMS PROJ DIR, OOI	40 00					X		189,064	0	20,950
(24) WILLIAM PRITCHETT ASSOC PROJ MGR/SENIOR PORJ ENGINEER	40 00					X		147,868	0	21,319
(25) ANTHONY FERLAINO SR PROJ MGR, OOI	40 00					X		168,908	0	30,954
(26) GREGORY MYERS SR TECH EXPERT, ENG & TECH	40 00					X		149,400	0	31,374
(27) REGINALD BEACH SENIOR SCIENTIST	40 00					X		158,317	0	37,256

		(D)	(E)	(F)
1b	Sub-Total . . . . ▶			
c	Total from continuation sheets to Part VII, Section A . . . . ▶			
d	Total (add lines 1b and 1c) . . . . ▶	1,768,539	0	314,576

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 ▶23

			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**		No
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**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
TEXAS A&M RESEARCH FOUNDATION PO BOX 201918 DALLAS, TX 753201918	IMPLEMENTATION OF OCEAN DRILLING	59,197,088
UNIVERSITY OF WASHINGTON 12455 COLLECTIONS DR CHICAGO, IL 606930001	IMPLEMENTATION OF OCEAN OBSERVING	53,575,514
WOODS HOLE OCEANOGRAPHIC INSTITUTE 569 WOODS HOLE RD WOODS HOLE, MA 02543	IMPLEMENTATION OF OCEAN OBSERVING	16,409,336
UNIVERSITY OF CALIFORNIA 9500 GILMAN DR LAJOLLA, CA 92093	IMPLEMENTATION OF OCEAN OBSERVING	9,523,914
COLUMBIA UNIVERSITY 615 WEST 131ST STREET NEW YORK, NY 10027	IMPLEMENTATION OF OCEAN DRILLING	7,539,729

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 ▶18

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . .	1a	1,370				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations . . .	1d					
	e Government grants (contributions)	1e	169,535,585				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,031,200				
	g Noncash contributions included in lines 1a-1f $						
	h Total. Add lines 1a-1f . . . . ▶			172,568,155			
Program Service Revenue			Business Code				
	2a MEMBERSHIP DUES		900099	595,050	595,050		
	b OTHER PROGRAM REVENUE		900099	19,508	19,508		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a–2f . . . . ▶			614,558			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶			53,154			53,154
	4 Income from investment of tax-exempt bond proceeds . . ▶						
	5 Royalties . . . . ▶						
		(i) Real	(ii) Personal				
	6a Gross Rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) . . . . ▶						
		(i) Securities	(ii) Other				
	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) . . . . ▶						
	8a Gross income from fundraising events (not including $ ________ of contributions reported on line 1c) See Part IV, line 18 . . . a						
	b Less direct expenses . . . b						
	c Net income or (loss) from fundraising events . . ▶						
	9a Gross income from gaming activities See Part IV, line 19 . a						
	b Less direct expenses . . . . b						
	c Net income or (loss) from gaming activities . . ▶						
	10a Gross sales of inventory, less returns and allowances . a						
	b Less cost of goods sold . . b						
	c Net income or (loss) from sales of inventory . . ▶						
	Miscellaneous Revenue		Business Code				
	11a						
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a–11d . . . . . . ▶						
	12 Total revenue. See Instructions . . . ▶			173,235,867	614,558	0	53,154

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	378,362	378,362		
2 Grants and other assistance to individuals in the U S See Part IV, line 22	226,146	226,146		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	60,000	60,000		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,192,364	679,553	512,811	
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	6,092,041	4,741,030	1,349,616	1,395
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	712,370	558,773	153,432	165
9 Other employee benefits	845,608	647,798	197,643	167
10 Payroll taxes	503,087	376,814	126,172	101
a Fees for services (non-employees) Management				
b Legal	172,051	100,359	71,692	
c Accounting	198,349		198,349	
d Lobbying				
e Professional fundraising services *See Part IV, line 17*				
f Investment management fees	2,135		2,135	
g Other	156,777,678	156,491,184	286,494	
12 Advertising and promotion	41,665	40,091	1,574	
13 Office expenses	664,089	349,156	314,932	1
14 Information technology	390,244	166,227	224,017	
15 Royalties				
16 Occupancy	1,382,976		1,382,976	
17 Travel	2,257,339	2,197,668	59,671	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	881,888	851,509	30,379	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	216,573		216,573	
23 Insurance	92,786	32,875	59,911	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a G&A ALLOCATION	0	115,630	-115,630	
b				
c				
d				
e				
f All other expenses				
25 **Total functional expenses.** Add lines 1 through 24f	173,087,751	168,013,175	5,072,747	1,829
26 **Joint costs.** Check here ▶ ☐ if following 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				

Part X **Balance Sheet**

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	6,766	1	51,417
	2	Savings and temporary cash investments	3,828,871	2	2,436,020
	3	Pledges and grants receivable, net	4,408,931	3	21,211,849
	4	Accounts receivable, net	469,207	4	928,488
	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)), 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) Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	530,088	9	292,472
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* 10a 1,315,626			
	b	Less accumulated depreciation 10b 775,710	605,972	10c	539,916
	11	Investments—publicly traded securities	1,899,715	11	1,865,633
	12	Investments—other securities See Part IV, line 11	207,707	12	214,836
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	11,957,257	16	27,540,631
Liabilities	17	Accounts payable and accrued expenses	7,049,511	17	24,160,881
	18	Grants payable		18	
	19	Deferred revenue	2,130,881	19	544,939
	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	810,041	25	854,369
	26	**Total liabilities.** Add lines 17 through 25	9,990,433	26	25,560,189
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	1,966,824	27	1,980,442
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	1,966,824	33	1,980,442
	34	Total liabilities and net assets/fund balances	11,957,257	34	27,540,631

Part XI **Reconcilliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	173,235,867
2	Total expenses (must equal Part IX, column (A), line 25)	2	173,087,751
3	Revenue less expenses Subtract line 2 from line 1	3	148,116
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	1,966,824
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-134,498
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,980,442

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization’s financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization’s financial statements audited by an independent accountant?	2b	Yes	
c	If “Yes,” to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
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 separated 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	Yes	
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	Yes	

SCHEDULE A
(Form 990 or 990EZ)

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

2010

Open to Public Inspection

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number
52-1892964

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 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									

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar 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 ")	40,439,895	91,223,482	103,145,435	133,645,022	172,568,155	541,021,989
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	40,439,895	91,223,482	103,145,435	133,645,022	172,568,155	541,021,989
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						541,021,989

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	**(a)** 2006	**(b)** 2007	**(c)** 2008	**(d)** 2009	**(e)** 2010	**(f)** Total
7 Amounts from line 4	40,439,895	91,223,482	103,145,435	133,645,022	172,568,155	541,021,989
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	121,038	83,093	59,808	30,197	53,154	347,290
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)						541,369,279

12 Gross receipts from related activities, etc (See instructions) | **12** | 3,010,449

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	99 940 %
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	99 900 %

16a **33 1/3% support test—2010.** 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—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2010.** 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—2009.** 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 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

Calendar 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 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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2010.** 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—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** 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).

Facts And Circumstances Test

Additional Data

Software ID:
Software Version:
EIN: 52-1892964
Name: CONSORTIUM FOR OCEAN LEADERSHIP

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses $ 1,442,555 including grants of $) (Revenue $ 614,558)
OTHER RESEARCH & EDUCATION

(Code) (Expenses $ 1,172,045 including grants of $) (Revenue $)
INTERNATIONAL CENSUS OF MARINE LIFE PROGRAM

(Code) (Expenses $ 1,132,368 including grants of $ 60,000) (Revenue $)
NATIONAL OCEAN SCIENCES BOWL

(Code) (Expenses $ 427,654 including grants of $ 604,508) (Revenue $)
PUBLIC POLICY AND ADVOCACY

(Code) (Expenses $ 419,521 including grants of $) (Revenue $)
NATIONAL OCEANOGRAPHIC PARTNERSHIP PROGRAM

(Code) (Expenses $ 357,066 including grants of $) (Revenue $)
GULF OF MEXICO RESEARCH INITIATIVE

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

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

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

2 Political expenditures ▶ $

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

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

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

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

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

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

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group
B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing Organization's Totals	**(b)** Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)	50,283	
c Total lobbying expenditures (add lines 1a and 1b)	50,283	
d Other exempt purpose expenditures	173,037,468	
e Total exempt purpose expenditures (add lines 1c and 1d)	173,087,751	
f Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h Subtract line 1g from line 1a If zero or less, enter -0-	0	
i Subtract line 1f from line 1c If zero or less, enter -0-	0	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** Total
2a Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	110,902	29,305	22,014	50,283	212,504
d Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

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

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

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

Part IV **Supplemental Information**

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

Identifier	Return Reference	Explanation

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
2010
Open to Public Inspection

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number
52-1892964

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the 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 taxable year ▶ ____

4 Number of states where property subject to conservation easement is located ▶ ____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, 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 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ____

(ii) Assets included in Form 990, Part X ▶ $ ____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ____

b Assets included in Form 990, Part X ▶ $ ____

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain 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					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Term endowment ▶

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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
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		462,815	208,478	254,337
d Equipment		553,332	334,538	218,794
e Other		299,479	232,694	66,785
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				539,916

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
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

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. *(Column (b) should 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) should 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	
DEFERRED RENT	678,063
DEFERRED COMPENSATION	176,306
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	854,369

2. Fin 48 (ASC 740) 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 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	173,235,867
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	173,087,751
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	148,116
4	Net unrealized gains (losses) on investments	4	-134,498
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-134,498
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	13,618

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	173,099,234
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-134,498		
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	-134,498
3	Subtract line **2e** from line **1**			3	173,233,732
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	2,135		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	2,135
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	173,235,867

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

1	Total expenses and losses per audited financial statements			1	173,085,616
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	173,085,616
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	2,135		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	2,135
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	173,087,751

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, 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

Identifier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493125009992

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

2010

Open to Public Inspection

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number
52-1892964

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

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

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

3 Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, 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/investments in region
AFRICA	0	0	PROGRAM SERVICES	INTERNATIONAL CENSUS OF MARINE LIFE LIFE IN A CHANGING OCEAN	4,065
EUROPE	0	0	PROGRAM SERVICES	MARINE MICROBIOLOGY, WORLD CONFERENCE ON MARINE BIODIVERSITY, INDIAN SYMPOSIUM ON CENSUS OF MARINE LIFE, CONVENTION ON BIODIVERSITY, SSC,IOC WEST PAC, EXPEDITION 323/319/322 2ND POST CRUISE MEETING, EPSP MEETING, EDP MEETING, SPC MEETING, GLOMAR ECORD SUMMER SCHOOL, HISTORY OF MARINE ANIMAL POPULATIONS, DECADE OF DISCOVERY	391,292
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	EXPEDITION 337 SHIMOTKA COALBED BIOSPHERE, EXPEDITION 331 DEEP HOT BIOSPHERE, EXPEDITION 333 NANTROSEIZE, EXPEDITION 333 SAMPLING MEETING, POST EXPEDITION AWARD, DETAILED PLANNING GROUP, TOHOKU EARTHQUAKE, INTERNATIONAL CENSUS OF MARINE LIFE INDIAN SYMPOSIUM ON CENSUS OF MARINE LIFE, CONVENTION ON BIODIVERSITY, SSC, IOC, WESTPAC	126,962
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	INTERNATIONAL CENSUS OF MARINE LIFE LIFE IN A CHANGING OCEAN	34,150
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	EXPEDITION 329 SOUTH PACIFIC GYRE, EXPEDITION 330 LOUISVILLE SEAMOUNTS, STP MEETING, SLOW SLIPS EVENT WORKSHOP	161,865
NORTH AMERICA	0	0	PROGRAM SERVICES	EXPEDITION 327 JUAN DE FUCA, GOBI PELAGIC WORKING GROUP	5,591
SOUTH AMERICA	0	0	PROGRAM SERVICES	SCHOOL OF ROCK,EXPEDITION 334 COSTA RICA SEISMOGENESIS, EXPEDITION 335 SUPERFAST SPREADING CRUST 4, INDIAN SYMPOSIUM ON COML, EXPEDITION 334 COSTA RICA SEISMOGENESIS PROJECT, EXPEDITION SUPERFAST SPREADING CRUST 4, EXPEDITION MID ATLANTIC RIDGE MICROBIOLOGY	69,005
MIDDLE EAST	0	0	PROGRAM SERVICES	GEOLOGICAL CARBON CAPTURE WORKSHOP	13,520
3a Sub-total	0	0			806,450
b Total from continuation sheets to Part I	0	0			0
c **Totals** (add lines 3a and 3b)	0	0			806,450

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 Part V 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 of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	AUSTRALIAN CENSUS OF MARINE LIFE	20,000	EFT			FMV
		SOUTH ASIA	INDIA SYMPOSIUM	20,000	EFT			FMV

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 . . . . ▶

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 Part V 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)
CARRIBEAN NRIC WORKSHOP SUPPORT	CENTRAL AMERICA AND THE CARRIBEAN	1	20,000	EFT			FMV

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*	☐ Yes	☑ No

Part V **Supplemental Information**

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 OCEAN LEADERSHIP MAINTAINS RECORDS THAT INCLUDE PURCHASE REQUEST WITH AUTHORIZED SIGNATURE, COPY OF AWARD AND CERTIFICATIONS, EPLS PRINT OUT AS EVIDENCE OF ELIGIBILITY, AND SELECTION CRITERIA IF AWARD EXCEEDS THE MICRO PURCHASE THRESHOLD OF $3,000 AS PER OCEAN LEADERSHIP'S POLICIES OCEAN LEADERSHIP HAS PROVIDED A LEVEL OF OVERSIGHT AND MONITORING THAT WILL ALLOW ADEQUATE AND ACCURATE COLLECTION OF DATA ON PERFORMANCE THROUGHOUT THE LIFE OF A PROGRAM MONITORING PROCESS FOR THE GRANTS AND SUBCONTRACTS THE OVERALL PURPOSE OF MONITORING AND EVALUATION IS THE MEASUREMENT AND ASSESSMENT OF PERFORMANCE IN ORDER TO MORE EFFECTIVELY MANAGE THE OUTPUTS AND OUTCOMES OF EXPENDITURES OCEAN LEADERSHIP MONITORS AWARDS AT SEVERAL KEY PHASES OF THE AWARDS LIFE CYCLE 1) PRE-AWARD ASSESSMENT THE INITIAL MONITORING BEGINS WITH A PRE-AWARD ASSESSMENT OF THE PROSPECTIVE RECIPIENTS ABILITIES AND RESOURCES TO BE APPLIED TO THE AWARD FOR THE PURPOSE OF DETERMINING WHETHER THE RECIPIENT CAN ADEQUATELY PROVIDE THE SERVICES DEMANDED BY THE AWARD 2) PERIODIC MONITORING ON-GOING MONITORING IS CONDUCTED DURING THE LIFE OF THE AWARD PERIODIC MONITORING INCLUDES REVIEW OF THE QUARTERLY AND ANNUAL REPORTING REQUIRED UNDER THE AWARD AND ANY OTHER REPORTS AS SPECIFIED IN THE AWARD 3) COMPLETION OF GRANT A FINAL REVIEW OF THE AWARDS ACTIVITY AND ACCOMPLISHMENTS AND SPENDING IS CONDUCTED AT THE COMPLETION OF THE AWARD 4) THE ABOVE MONITORING IS ACCOMPLISHED THROUGH VARIOUS MEANS BASED ON THE NEEDS OF THE INDIVIDUAL AWARD TECHNIQUES USED WILL CONSIST OF PERIODIC WRITTEN REPORTS FROM THE RECIPIENT, ON-SITE VISITS (ANNOUNCED AND UNANNOUNCED), TELEPHONE CONTACTS, AND, IF APPLICABLE ON-LINE REVIEW OF AWARD DATA 5) REPORTING FORMAT THE RECIPIENT IS EXPECTED TO PROVIDE THE REPORTS IDENTIFIED IN THE AGREEMENT SIGNED BETWEEN OCEAN LEADERSHIP AND THE RECIPIENT THE ANNUAL REPORTS REQUIRED ARE COMPLETED USING THE REPORTING FORMAT PROVIDED FOR BY OCEAN LEADERSHIP 6) PROGRAM DIRECTORS WILL REVIEW THE SUBCONTRACTORS REPORTS TO MAKE SURE THEY ARE COMPLETE AND THAT THE INFORMATION AGREES WITH ANY PERIODIC REPORTING 7) MONITORING RECORDS PROGRAM STAFF FULLY AND ACCURATELY DOCUMENT ALL MONITORING EFFORTS 8) SITE VISITS OCEAN LEADERSHIP MAY UNDERTAKE ADDITIONAL RECIPIENT MONITORING BY MAKING PERIODIC SITE VISITS BASED ON THE LEVEL OF RISK ASSIGNED TO EACH RECIPIENT, ONE TO SEVERAL SITE VISITS MAY BE SCHEDULED DURING THE TERM OF THE AWARD

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," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number
52-1892964

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" 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. Part II can be duplicated if additional space is needed. . . . . ▶ ☐

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

2 Enter total number of section 501(c)(3) and government organizations . . . . ▶ 13

3 Enter total number of other organizations . . . . ▶ 12

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 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
(1) NOSB STIPENDS	5	18,300		FMV	
(2) COMMUNICATION STIPEND	2	11,063		FMV	
(3) OOI STIPEND	2	30,000		FMV	
(4) IODP STIPEND	1	9,920		FMV	
(5) JUAN DE FUCA EDUCATION	3	15,000		FMV	

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

Identifier	**Return Reference**	**Explanation**
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 OCEAN LEADERSHIP MAINTAINS RECORDS THAT INCLUDE PURCHASE REQUEST WITH AUTHORIZED SIGNATURE, COPY OF AWARD AND CERTIFICATIONS, EPLS PRINT OUT AS EVIDENCE OF ELIGIBILITY, AND SELECTION CRITERIA IF AWARD EXCEEDS THE MICRO PURCHASE THRESHOLD OF $3,000 AS PER OCEAN LEADERSHIP'S POLICIES OCEAN LEADERSHIP HAS PROVIDED A LEVEL OF OVERSIGHT AND MONITORING THAT WILL ALLOW ADEQUATE AND ACCURATE COLLECTION OF DATA ON PERFORMANCE THROUGHOUT THE LIFE OF A PROGRAM MONITORING PROCESS FOR THE GRANTS AND SUBCONTRACTS THE OVERALL PURPOSE OF MONITORING AND EVALUATION IS THE MEASUREMENT AND ASSESSMENT OF PERFORMANCE IN ORDER TO MORE EFFECTIVELY MANAGE THE OUTPUTS AND OUTCOMES OF EXPENDITURES OCEAN LEADERSHIP MONITORS AWARDS AT SEVERAL KEY PHASES OF THE AWARDS LIFE CYCLE 1) PRE-AWARD ASSESSMENT THE INITIAL MONITORING BEGINS WITH A PRE-AWARD ASSESSMENT OF THE PROSPECTIVE RECIPIENTS ABILITIES AND RESOURCES TO BE APPLIED TO THE AWARD FOR THE PURPOSE OF DETERMINING WHETHER THE RECIPIENT CAN ADEQUATELY PROVIDE THE SERVICES DEMANDED BY THE AWARD 2) PERIODIC MONITORING ON-GOING MONITORING IS CONDUCTED DURING THE LIFE OF THE AWARD PERIODIC MONITORING INCLUDES REVIEW OF THE QUARTERLY AND ANNUAL REPORTING REQUIRED UNDER THE AWARD AND ANY OTHER REPORTS AS SPECIFIED IN THE AWARD 3) COMPLETION OF GRANT A FINAL REVIEW OF THE AWARDS ACTIVITY AND ACCOMPLISHMENTS AND SPENDING IS CONDUCTED AT THE COMPLETION OF THE AWARD 4) THE ABOVE MONITORING IS ACCOMPLISHED THROUGH VARIOUS MEANS BASED ON THE NEEDS OF THE INDIVIDUAL AWARD TECHNIQUES USED WILL CONSIST OF PERIODIC WRITTEN REPORTS FROM THE RECIPIENT, ON-SITE VISITS (ANNOUNCED AND UNANNOUNCED), TELEPHONE CONTACTS, AND, IF APPLICABLE ON-LINE REVIEW OF AWARD DATA 5) REPORTING FORMAT THE RECIPIENT IS EXPECTED TO PROVIDE THE REPORTS IDENTIFIED IN THE AGREEMENT SIGNED BETWEEN OCEAN LEADERSHIP AND THE RECIPIENT THE ANNUAL REPORTS REQUIRED ARE COMPLETED USING THE REPORTING FORMAT PROVIDED FOR BY OCEAN LEADERSHIP 6) PROGRAM DIRECTORS WILL REVIEW THE SUBCONTRACTORS REPORTS TO MAKE SURE THEY ARE COMPLETE AND THAT THE INFORMATION AGREES WITH ANY PERIODIC REPORTING 7) MONITORING RECORDS PROGRAM STAFF FULLY AND ACCURATELY DOCUMENT ALL MONITORING EFFORTS 8) SITE VISITS OCEAN LEADERSHIP MAY UNDERTAKE ADDITIONAL RECIPIENT MONITORING BY MAKING PERIODIC SITE VISITS BASED ON THE LEVEL OF RISK ASSIGNED TO EACH RECIPIENT, ONE TO SEVERAL SITE VISITS MAY BE SCHEDULED DURING THE TERM OF THE AWARD

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 52-1892964
Name: CONSORTIUM FOR OCEAN LEADERSHIP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRCH AQUARIUM AT SCRIPPSSIO 9500 GILMAN DR DEPT 0207 LAJOLLA,CA 92093	95-6006144	501(C)(3)	14,500		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
JL SCOTT MARINE EDUCATION CENTER703 EAST BEACH DR OCEAN SPRINGS,MS 39564	64-6000818	501(C)(3)	10,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
GULF COAST RESEARCH LABORATORYUNIV SOUTHERN MISSISSIPPI 703 EAST BEACH DR OCEAN SPRINGS,MS 39564	64-6000818	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
MASSACHUSSETS INSTITUTE OF TECHNOLOGY600 TECHNOLOGY SQ NE49-416 CAMBRIDGE,MA 02139	04-2103594	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
PROJECT OCEAN TECHNOLOGY1084 SHENNESSOSSETT RD GROTON,CT 063406048	06-0896672	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
CIRESUNIVERSITY OF COLORADO AT BOULDER 216 UCB BOULDER,CO 80309	84-6000555	STATE OF COLORADO	15,500		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
TEXAS A&M UNIVERSITYTEXAS SEA GRANT2700 EARL RUDDER FWY S 180 COLLEGE STATION,TX 77845	74-6000531	115	30,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
CSCAR(UNIVERSITY OF MICHIGAN DRAR)2044 WOLVERINE TWR3003 SSTATE ST RM 1082 ANN ARBOR,MI 48109	38-6006309	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
UNIVERSITY OF ALASKA FAIRBANKSOFC OF GRANTS/ADM SVCS CTR ROOM 109 PO BOX 757880 SEWARD,AK 99775	92-6000147	115	17,500		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
SAN FRANCISCO STATE UNIVERSITY1600 HOLLOWAY AVENUE-ADM 155 SAN FRANCISCO,CA 94132	93-1137247	115	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
EAST CAROLINA UNIV OFFICE OF SPONS PROG2200 S CHARLES BLVD 2906 GREENVILLE,NC 278584353	56-6000403	STATE OF NC	14,804		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
UNIVERSITY OF MIAMI 4600 RICKENBACKER CSWY MIAMI,FL 33149	59-0624458	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OLD DOMINION UNIVERSITYRESEARCH FOUNDATION PO BOX 6369 NORFOLK, VA 23508	54-6068198	501(C)(3)	7,500		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
UNIV OF NEW HAMPSHIRE UNH OFFICE OF SPONS RESRCH SERVICE BLDG ROOM 109 DURHAM, NH 038243585	02-6000937	501(C)(3)	12,297		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
OREGON STATE UNIVERSITYPO BOX 1086 CORVALLIS, OR 97339	48-1278540	STATE OF OR	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
UNIV OF SOUTH FLORIDA COLLEGE OF MARINE SCIENCE140 SEVENTH AVE SOUTH ST PETERSBURG, FL 33701	59-3102112	STATE OF FL	14,999		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
VIRGINIA INSTITUTE OF MARINE SCIENCEPO BOX 1346 GLOUCESTER POINT, VA 230621340	54-6001802	STATE OF VA	7,500		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
UNIVERSITY OF WISCONSIN MILWAUKEE DRAWER 491 MILWAUKEE, WI 53293	39-1805963	501(C)(3)	19,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
UNIVERSITY OF SOUTHERN CALIFORNIA WRIGLEY INSTITUTESPONSORED PROJECTS ACCOUNTINGFILE 52095 LOS ANGELES, CA 900892095	95-1642394	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
UNIVERSITY OF HAWAII OFFICE OF RESEARCH SERVICES2530 DOLE ST SAKAMAKI C200 HONOLULU, HI 96822	99-6000354	STATE OF HI	18,250		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
YOUNGSTOWN STATE UNIV GRANTS ACCOUNTING ONE UNIV PLAZA YOUNGSTOWN, OH 44555	34-1011998	STATE OF OH	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
USUNYRESEARCH FOUNDATION OF THE STATE UNIVERSITY OF NEW YORKPO BOX 9 ALBANY, NY 12222	14-1368361	501(C)(3)	14,961		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
UNIVERSITY OF WASHINGTON3716 BROOKLYN AVENUE NE SEATTLE, WA 981056716	91-6001537	STATE OF WA	14,500		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
SAVANNAH STATE UNIVERSITYOFFICE OF FISCAL AFFAIRS BOX 20419 SAVANNAH, GA 31404	58-6002069	501(C)(3)	17,051		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
RUTGERS THE STATE UNIVERSITY OF NEW JERSEY3 RUTGERS PLAZA 2ND FLOOR NEW BRUNSWICK, NJ 08901	22-6001086	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number
52-1892964

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(1) DR ROBERT GAGOSIAN	(i)	324,804	50,000	0	24,500	12,938	412,242	0
	(ii)	0	0	0	0	0	0	0
(2) YAN XING	(i)	175,514	5,000	0	26,970	13,105	220,589	0
	(ii)	0	0	0	0	0	0	0
(3) KEVIN WHEELER	(i)	153,066	5,000	0	15,600	12,249	185,915	0
	(ii)	0	0	0	0	0	0	0
(4) DAVID DIVINS	(i)	154,899	4,000	0	23,907	15,300	198,106	0
	(ii)	0	0	0	0	0	0	0
(5) STUART WILLIAMS	(i)	131,020	58,044	0	19,087	1,863	210,014	0
	(ii)	0	0	0	0	0	0	0
(6) WILLIAM PRITCHETT	(i)	144,368	3,500	0	14,944	6,375	169,187	0
	(ii)	0	0	0	0	0	0	0
(7) ANTHONY FERLAINO	(i)	163,908	5,000	0	24,780	6,174	199,862	0
	(ii)	0	0	0	0	0	0	0
(8) GREGORY MYERS	(i)	145,400	4,000	0	15,497	15,877	180,774	0
	(ii)	0	0	0	0	0	0	0
(9) REGINALD BEACH	(i)	158,317	0	0	24,327	12,929	195,573	0
	(ii)	0	0	0	0	0	0	0
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 7	THE PRESIDENT/CEO BONUS IS DETERMINED BY THE EXECUTIVE COMMITTEE AS PART OF THE PRESIDENT'S EMPLOYMENT CONTRACT THE BONUSES FOR ALL EMPLOYEES WITH THE EXCEPTION OF THE PRESIDENT/CEO ARE DETERMINED EACH YEAR BASED ON THE ORGANIZATION'S BUDGET AND CALCULATED AS A PERCENT OF THE TOTAL SALARY BUDGET THE PRESIDENT/CEO REVIEWS THE SUBMITTED RECOMMENDATIONS AND APPROVES THE FINAL BONUS AMOUNT

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number
52-1892964

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE ORGANIZATION HAS FORTY-SIX VOTING MEMBERS, THIRTY-THREE ASSOCIATE MEMBERS, AND SEVEN AFFILIATE MEMBERS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE ORGANIZATION'S FORTY-SIX VOTING MEMBERS ELECT REPRESENTATIVES TO THE BOARD OF TRUSTEES

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		THE BYLAWS MAY BE AMENDED AT ANY REGULAR OR SPECIAL MEETING OF THE VOTING MEMBERS, DULY CALLED AND HELD, BY THE VOTE OF A MAJORITY OF THE VOTING MEMBERSHIP PRESENT AT SUCH MEETING IF A QUORUM EXISTS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE FORM 990 WAS PROVIDED TO THE AUDIT COMMITTEE FOR REVIEW AND COMMENTS PRIOR TO FILING THE RETURN THE FORM WAS ALSO PROVIDED TO THE REST OF THE BOARD FOR REVIEW THE RETURN WAS THEN REVIEWED BY THE CFO AND SUBMITTED TO THE COGNIZANT AGENCY

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

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

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

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -134,498

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

Identifier	Return Reference	Explanation
	FORM 990, PAGE 6, PART VI, LINE 1A	THE EXECUTIVE COMMITTEE INCLUDES THE BOARD CHAIR, THE VICE CHAIR, THE TREASURER AND THE CHAIRS OF THE OTHER STANDING BOARD COMMITTEES AUDIT, NOMINATING, AND PERSONNEL THE OCEAN LEADERSHIP PRESIDENT AND SECRETARY OF THE BOARD ARE NON-VOTING MEMBERS OF THE EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE IS CHARGED WITH EXERCISING ALL THE POWERS VESTED IN THE BOARD OF TRUSTEES DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD AND THE WITH MAKING NOMINATIONS OF AT-LARGE TRUSTEES