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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

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 10-01-2011 and ending 09-30-2012

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) 332-3900

G Gross receipts $ 160,569,618

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

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**	16
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	16
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	**5**	102
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
8	Contributions and grants (Part VIII, line 1h)	172,568,155	159,850,130
9	Program service revenue (Part VIII, line 2g)	614,558	652,040
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	53,154	67,448
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)	173,235,867	160,569,618
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	664,508	582,077
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)	9,345,470	10,302,780
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶9,565		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	163,077,773	148,879,474
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	173,087,751	159,764,331
19	Revenue less expenses Subtract line 18 from line 12	148,116	805,287

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	27,540,631	52,909,458
21	Total liabilities (Part X, line 26)	25,560,189	49,850,137
22	Net assets or fund balances Subtract line 21 from line 20	1,980,442	3,059,321

Part II Signature Block

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

Sign Here

****** — Signature of officer — 2013-04-04 — Date

YAN XING VP & CFO — Type or print name and title

Paid Preparer's Use Only

Preparer's signature: JENNY E HERRERA CPA | Date | Check if self-employed ☐ | Preparer's taxpayer identification number (see instructions) P00252755

Firm's name (or yours if self-employed), address, and ZIP + 4: RUBINO & COMPANY CHARTERED, 6903 ROCKLEDGE DRIVE SUITE 1200, BETHESDA, MD 20817 | EIN ▶ 52-1186096 | 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 organization's program service accomplishments for each of its three largest program services, as measured 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 $ 68,119,118 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 $ 59,540,824 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 $ 16,580,820 including grants of $) (Revenue $)

GRI AND BP EXPLORATION AND PRODUCTION - THE GULF OF MEXICO RESEARCH INITIATIVE (GOMRI) IS A 10-YEAR INDEPENDENT RESEARCH PROGRAM INVESTIGATING THE EFFECTS OF THE DEEPWATER HORIZON INCIDENT THE MISSION OF THE GOMRI IS TO IMPROVE SOCIETY'S ABILITY TO UNDERSTAND AND MITIGATE THE IMPACTS OF HYDROCARBON POLLUTION AND STRESSORS ON THE MARINE ENVIRONMENT AND PUBLIC HEALTH AN INDEPENDENT AND ACADEMIC 20-MEMBER RESEARCH BOARD MAKES THE FUNDING AND RESEARCH DIRECTION DECISIONS TO ENSURE THE INTELLECTUAL QUALITY, EFFECTIVENESS AND ACADEMIC INDEPENDENCE OF THE GOMRI RESEARCH ALL RESEARCH DATA, FINDINGS AND PUBLICATIONS WILL BE PUBLICLY AVAILABLE THE PROGRAM WAS ESTABLISHED THROUGH A $500 MILLION FINANCIAL COMMITMENT FROM BP OCEAN LEADERSHIP HELPS ADMINISTER THE PROGRAM THOUGH PROPOSAL REVIEW, GRANT MANAGEMENT, SCIENCE COORDINATION AND OUTREACH ACTIVITIES

(Code) (Expenses $ 2,299,652 including grants of $) (Revenue $)

OVERSEAS DRILLING LIMITED

(Code) (Expenses $ 1,286,372 including grants of $ 20,000) (Revenue $)

NATIONAL OCEAN SCIENCES BOWL

(Code) (Expenses $ 864,104 including grants of $) (Revenue $ 652,040)

OTHER RESEARCH AND EDUCATION

(Code) (Expenses $ 757,194 including grants of $) (Revenue $)

GULF OF MEXICO RESEARCH INITIATIVE

(Code) (Expenses $ 590,177 including grants of $ 562,077) (Revenue $)

PUBLIC POLICY AND ADVOCACY

(Code) (Expenses $ 408,119 including grants of $) (Revenue $)

NATIONAL OCEANOGRAPHIC PARTNERSHIP PROGRAM

(Code) (Expenses $ 3,966,512 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)

(Expenses $ 10,172,130 including grants of $ 582,077) (Revenue $ 652,040)

4e **Total program service expenses** ▶ $ 154,412,892

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 instructions)?	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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 temporarily restricted endowments, permanent endowments, 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, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Part I*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part 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, Part III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		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.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Part IV Checklist of Required Schedules *(continued)*

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 questions 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 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
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	**35a**		No
b	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*	**35b**		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**	88		
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**	102			
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 or securities 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.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state			**13a**		
b	Enter the aggregate 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 aggregate 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	16		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	16		
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	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		No
6	Did the organization have members or stockholders?		6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		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	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete 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 the Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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 made 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 made 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, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DR ROBERT GAGOSIAN PRESIDENT & CEO	40 00	X		X				406,501	0	37,682
(2) AMY CASTNER SEC/DIR OF BOARD RELATIONS	40 00	X		X				83,241	0	24,660
(3) COLIN REED ASST SEC/SR MGR EXEC OFFICE	40 00	X		X				71,251	0	11,850
(4) DR NANCY TARGET CHAIR	2 00	X		X				0	0	0
(5) DR ROBERT B DUNBAR VICE CHAIR	2 00	X		X				0	0	0
(6) DR JAMES G SANDERS TREASURER	2 00	X		X				0	0	0
(7) DR MARK R ABBOTT GOVERNOR	2 00	X						0	0	0
(8) DR CHARLIE PAUL GOVERNOR	2 00	X						0	0	0
(9) DR BRIAN TAYLOR GOVERNOR	2 00	X						0	0	0
(10) MS JOSIE QUINTRELL GOVERNOR	2 00	X						0	0	0
(11) DR PETER N MIKHALEVSKY GOVERNOR	2 00	X						0	0	0
(12) DR SANDRA WHITEHOUSE GOVERNOR	2 00	X						0	0	0
(13) DR SUSAN K AVERY GOVERNOR	2 00	X						0	0	0
(14) DR MICHAEL PERFIT GOVERNOR	2 00	X						0	0	0
(15) DR NANCY RABALAIS GOVERNOR	2 00	X						0	0	0
(16) DR ROBERT W CORELL GOVERNOR	2 00	X						0	0	0
(17) DR DONALD F BOESCH 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) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DR STEVEN E LOHRENZ GOVERNOR	2 00	X						0	0	0
(19) DR LARRY MAYER GOVERNOR	2 00	X						0	0	0
(20) YAN XING VP & CFO	40 00			X				191,705	0	42,101
(21) KEVIN WHEELER VP, DIR PUBLIC AFFAIRS	40 00				X			160,582	0	31,472
(22) TIMOTHY COWLES VP, DIR OCEAN OBSERVING	40 00				X			193,290	0	32,349
(23) DAVID DIVINS VP, DIR OCEAN DRILLING	40 00				X			163,266	0	40,341
(24) PAUL HAGSTROM ASSOC PROJ MGR/SENIOR PROJ ENG	40 00					X		158,896	0	17,347
(25) WILLIAM PRITCHETT ASSOC PROJ MGR/SENIOR PROJ ENG	40 00					X		152,855	0	21,589
(26) ANTHONY FERLAINO SR PROJ MGR, OOI	40 00					X		182,257	0	33,492
(27) GREGORY MYERS SR TECH EXPERT, ENG & TECH	40 00					X		153,463	0	31,174
(28) REGINALD BEACH SENIOR SCIENTIST	40 00					X		163,151	0	38,370
1b Sub-Total . . . . . ▶										
c Total from continuation sheets to Part VII, Section A . . . . ▶										
d Total (add lines 1b and 1c) . . . . . ▶								2,080,458	0	362,427

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 27

			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 Report compensation for the calendar year ending with or within the organization's tax year

(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	52,843,077
UNIVERSITY OF WASHINGTON 12455 COLLECTIONS DR CHICAGO, IL 606930001	IMPLEMENTATION OF OCEAN OBSERVING	31,783,564
WOODS HOLE OCEANOGRAPHIC INSTITUTE 569 WOODS HOLE RD WOODS HOLE, MA 02543	IMPLEMENTATION OF OCEAN OBSERVING	17,366,489
UNIVERSITY OF CALIFORNIA REGENTS 9500 GILMAN DR LAJOLLA, CA 92093	IMPLEMENTATION OF OCEAN OBSERVING	9,719,262
TRUSTEES OF COLUMBIA UNIVERSITY PO BOX 29789 NEW YORK, NY 10027	IMPLEMENTATION OF OCEAN DRILLING	7,172,273

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 24

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 1,886				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e 138,527,159				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 21,321,085				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f		159,850,130			
Program Service Revenue			Business Code				
	2a	MEMBERSHIP DUES	900099	652,040	652,040		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f		652,040			
	3	Investment income (including dividends, interest and other similar amounts)		67,448			67,448
	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)					
Other Revenue	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		160,569,618	652,040	0	67,448

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)

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

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 United States See Part IV, line 21	397,705	397,705		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	164,372	164,372		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	20,000	20,000		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,565,775	1,022,715	543,060	
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	6,478,558	5,023,079	1,448,136	7,343
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	724,540	568,883	154,846	811
9	Other employee benefits	983,281	715,239	267,110	932
10	Payroll taxes	550,626	416,028	134,081	517
11	Fees for services (non-employees)				
a	Management				
b	Legal	192,627	141,024	51,603	
c	Accounting	140,982		140,982	
d	Lobbying				
e	Professional fundraising *See Part IV, line 17* . .				
f	Investment management fees	10,781		10,781	
g	Other	143,975,314	143,484,554	490,760	
12	Advertising and promotion	15,946	13,362	2,584	
13	Office expenses	454,209	226,043	228,204	-38
14	Information technology	219,293	61,654	157,639	
15	Royalties . .				
16	Occupancy	1,385,515	1,000	1,384,515	
17	Travel	1,801,071	1,721,835	79,236	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	461,125	435,399	25,726	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	165,380		165,380	
23	Insurance	57,231		57,231	
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					
b					
c					
d					
e					
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	159,764,331	154,412,892	5,341,874	9,565
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		51,417	1	16,311,100
	2	Savings and temporary cash investments		2,436,020	2	1,797,707
	3	Pledges and grants receivable, net		21,211,849	3	17,704,549
	4	Accounts receivable, net		928,488	4	13,688,811
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		292,472	9	416,892
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 1,394,334			
	b	Less accumulated depreciation	10b 914,268	539,916	10c	480,066
	11	Investments—publicly traded securities		1,865,633	11	2,288,299
	12	Investments—other securities See Part IV, line 11		214,836	12	222,034
	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)		27,540,631	16	52,909,458
Liabilities	17	Accounts payable and accrued expenses		24,160,881	17	18,667,733
	18	Grants payable			18	
	19	Deferred revenue		544,939	19	30,260,535
	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		854,369	25	921,869
	26	**Total liabilities.** Add lines 17 through 25		25,560,189	26	49,850,137
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		1,980,442	27	3,059,321
	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		1,980,442	33	3,059,321
	34	Total liabilities and net assets/fund balances		27,540,631	34	52,909,458

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	160,569,618
2	Total expenses (must equal Part IX, column (A), line 25)	2	159,764,331
3	Revenue less expenses Subtract line 2 from line 1	3	805,287
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	1,980,442
5	Other changes in net assets or fund balances (explain in Schedule O)	5	273,592
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	3,059,321

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	

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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

2011

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

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	91,223,482	103,145,435	133,645,022	172,568,155	159,850,130	660,432,224
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	91,223,482	103,145,435	133,645,022	172,568,155	159,850,130	660,432,224
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)						3,365,762
6 **Public Support.** Subtract line 5 from line 4						657,066,462

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	91,223,482	103,145,435	133,645,022	172,568,155	159,850,130	660,432,224
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	83,093	59,808	30,197	53,154	67,448	293,700
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						660,725,924

12	Gross receipts from related activities, etc (See instructions)	12	3,096,763

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 2011 (line 6 column (f) divided by line 11 column (f))	14	99 450 %
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15	99 940 %

16a **33 1/3% support test—2011.** 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—2010.** 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—2011.** 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—2010.** 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 IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2011** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2010** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2011.** 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—2010.** 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 explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

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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

2011

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, line 35c (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 on behalf of or in opposition to candidates for public office 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 (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

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)	31,540	
c	Total lobbying expenditures (add lines 1a and 1b)	31,540	
d	Other exempt purpose expenditures	159,732,791	
e	Total exempt purpose expenditures (add lines 1c and 1d)	159,764,331	
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

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) 2008	(b) 2009	(c) 2010	(d) 2011	(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	29,305	22,014	50,283	31,540	133,142
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

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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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

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

Description of property	(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		496,313	287,810	208,503
d Equipment		599,388	353,968	245,420
e Other		298,633	272,490	26,143
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				480,066

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	646,993
DEFERRED COMPENSATION	274,876
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	921,869

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	160,569,618
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	159,764,331
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	805,287
4	Net unrealized gains (losses) on investments	4	273,592
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	273,592
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,078,879

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	160,832,548
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	273,592		
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	273,592
3	Subtract line **2e** from line **1**			3	160,558,956
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	10,662		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	10,662
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	160,569,618

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

1	Total expenses and losses per audited financial statements			1	159,753,669
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	159,753,669
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	10,662		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	10,662
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	159,764,331

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

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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

2011

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
CENTRAL AMERICA AND CARRIBEAN			PROGRAM SERVICES	PRE-DRILLING AWARD, EXP 340 LESSER ANTILLES VOLCANISM & LANDSLIDES(PCLL), EXP 340 LESSER ANTILLES, SCHOOL OF ROCK- SHIP TO SHORE	38,016
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	PRCM EXP 343, POCM EXP 317, JFAST EXP 343, STP MEETING, PCLL EXP 343T JAPAN TRENCH FAST DRILLING PROJECT, SHIMOKITA COALBED BIOSPHERE, EXP 337, POST EXP AWARD, EXP 330	109,007
EUROPE			PROGRAM SERVICES	6TH AQUATIC VIRUS WORKSHOP, PCLL EXP 339 MEDITERRANEAN OUTFLOW, PCLL EXP 340T ATLANTIC MASSIF OCEANIC CORE COMPLEX, SMPL EXP 339, PROPOSAL EVALUATION PANEL, POST EXPEDITION AWARD EXP , POST EXPEDITION ACTIVITY, EXP 334	108,711
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	POCM(POST CRUISE MEETING) EXP 330	11,563
NORTH AMERICA			PROGRAM SERVICES	DEA EXP 342, PCLL EXP 342, EXP 330	21,446
SOUTH AMERICA			PROGRAM SERVICES	PEA EXP 334, POCM EXP 325, CONCEPCION OBSERVATORY MEETING	5,517
SOUTH ASIA			PROGRAM SERVICES	SCIENTIFIC OCEAN DRILLING IN INDIAN OCEAN WORKSHOP,SIPCOM MEETING, EXP 338 (PRCM)	36,120
3a Sub-total	0	0			330,380
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			330,380

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	WORKSHOP SUPPORT	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)

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 AWARD'S LIFE CYCLE 1) PRE-AWARD ASSESSMENT THE INITIAL MONITORING BEGINS WITH A PRE-AWARD ASSESSMENT OF THE PROSPECTIVE RECIPIENT'S 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 AWARD'S 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 SUBCONTRACTOR'S 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

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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

2011

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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . ▶ ☐

(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 listed in the line 1 table . . . ▶ 8

3 Enter total number of other organizations listed in the line 1 table . . . ▶ 17

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) IODP STIPEND/SCHOOL OF ROCK INSTRUCTORS	11	40,558		FMV	
(2) IUSSP410 TEACHER AWARDS	21	6,300		FMV	
(3) NOSB INTERNS/HONORARIA	3	14,500		FMV	
(4) OEDG2012 (SCHOOL OF ROCK INSTRUCTORS)	4	4,000		FMV	
(5) OOI/OOIMRE/OM	1	22,500		FMV	
(6) UNRESTRICTED INTERNS	4	24,440		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 AWARD'S LIFE CYCLE 1) PRE-AWARD ASSESSMENT THE INITIAL MONITORING BEGINS WITH A PRE-AWARD ASSESSMENT OF THE PROSPECTIVE RECIPIENT'S 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 AWARD'S 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 SUBCONTRACTOR'S 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

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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

2011

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?	**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?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	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?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or 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 Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(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)	365,033	21,744	19,724	24,500	13,182	444,183	0
	(ii)	0	0	0	0	0	0	0
(2) YAN XING	(i)	169,907	5,000	16,798	28,681	13,420	233,806	0
	(ii)	0	0	0	0	0	0	0
(3) KEVIN WHEELER	(i)	156,412	4,000	170	16,066	15,406	192,054	0
	(ii)	0	0	0	0	0	0	0
(4) TIMOTHY COWLES	(i)	169,285	5,000	19,005	19,537	12,812	225,639	0
	(ii)	0	0	0	0	0	0	0
(5) DAVID DIVINS	(i)	159,367	3,500	399	24,621	15,720	203,607	0
	(ii)	0	0	0	0	0	0	0
(6) PAUL HAGSTROM	(i)	153,843	4,000	1,053	15,401	1,946	176,243	0
	(ii)	0	0	0	0	0	0	0
(7) WILLIAM PRITCHETT	(i)	148,614	4,000	241	15,030	6,559	174,444	0
	(ii)	0	0	0	0	0	0	0
(8) ANTHONY FERLAINO	(i)	176,978	5,000	279	26,787	6,705	215,749	0
	(ii)	0	0	0	0	0	0	0
(9) GREGORY MYERS	(i)	149,797	3,500	166	15,548	15,626	184,637	0
	(ii)	0	0	0	0	0	0	0
(10) REGINALD BEACH	(i)	162,745	0	406	25,054	13,316	201,521	0
	(ii)	0	0	0	0	0	0	0

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 PERFORMANCE 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

2011

Open to Public Inspection

Name of the organization
CONSORTIUM FOR OCEAN LEADERSHIP

Employer identification number
52-1892964

Identifier	Return Reference	Explanation
NEW PROGRAM SERVICES	FORM 990, PART III, LINE 2	SEE FORM 990, PART III, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS, LINE 4C
	FORM 990, PART VI, SECTION A, LINE 4	THE VOTING MEMBERS AMENDED THE BYLAWS SUSTANTIVE AMENDMENTS INCLUDED A CHANGE TO THE QUALIFICATIONS FOR ASSOCIATE MEMBER STATUS, IN THE ELECTION MODEL, AND A NUMBER OF OTHER MINOR REVISIONS, AND IN THE ADMISSION OF NEW MEMBERS
	FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS FORTY-SEVEN VOTING MEMBERS, TWENTY-NINE ASSOCIATE MEMBERS, AND NINE AFFILIATE MEMBERS
	FORM 990, PART VI, SECTION A, LINE 7A	THE ORGANIZATION'S FORTY-SEVEN VOTING MEMBERS ELECT REPRESENTATIVES TO THE BOARD OF TRUSTEES
	FORM 990, PART VI, SECTION A, LINE 7B	THE BYLAWS OF THE CORPORATION MAY BE AMENDED ONLY BY A VOTE OF THE VOTING MEMBERS IN ADDITION, VOTING MEMBERS ELECT TRUSTEES TO SERVICE ON THE BOARD OF TRUSTEES AND ADMIT NEW MEMBERS
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS FIRST PROVIDED TO THE AUDIT COMMITTEE OF THE BOARD FOR REVIEW AND THEN MADE AVAILABLE TO ALL MEMBERS OF THE BOARD PRIOR TO ITS FILING WITH THE IRS IN ADDITION, FORM 990 IS PROVIDED TO OCEAN LEADERSHIP'S COGNIZANT AGENCY
	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 ADDITIONALLY, MEMBERS AND TRUSTEES ARE REMINDED OF THE POLICIES AT EACH MEMBERS AND BOARD MEETING
	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 AS NEEDED THE ASSESSMENT INCLUDES A COMPREHENSIVE MARKET SALARY REVIEW CONDUCTED BY NONPROFIT HR SOLUTIONS, AN INDEPENDENT HUMAN RESOURCES CONSULTING FIRM THE INDEPENDENT STUDY ALSO INCLUDES A REVIEW OF BENEFITS PROVIDED TO OTHER NON-PROFIT CHIEF EXECUTIVES WITH COMPARABLE BUDGET, STAFF SIZE, SCOPE AND MISSION IN SOME YEARS THE ASSESSMENT INCLUDES A REVIEW OF MARKET INCREASE DATA RESULTS OF THESE MARKET REVIEWS ARE PRESENTED BY NPHRS TO THE EXECUTIVE COMMITTEE, WHICH DISCUSSES THE DATA COLLECTED, CONSIDERS THE PERFORMANCE OF THE PRESIDENT/CEO, AND SETS A SALARY ALIGNED TO A FIGURE THEY DEEM TO BE REASONABLE AND APPROPRIATE, TAKING INTO CONSIDERATION THE REPORTED MEAN OF THE MARKET EXECUTIVE COMPENSATION BETWEEN THE EXECUTIVE COMMITTEE AND THE PRESIDENT/CEO IS ESTABLISHED BY CONTRACT BETWEEN THE EXECUTIVE COMMITTEE AND THE PRESIDENT/CEO 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 DATA IS GATHERED FROM COMPENSATION SURVEYS USING DATA FROM ORGANIZATIONS OF SIMILAR SIZE, BUDGET, SCOPE, AND MISSION DATA WAS LAST GATHERED IN 2012 COMPENSATION DECISIONS ARE DOCUMENTED IN OFFER LETTERS, PERSONNEL ACTION FORMS AND SALARY NOTIFICATIONS TO EMPLOYEES
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC BOTH ON THE ORGANIZATION'S WEBSITE AND UPON REQUEST THE FORM 990 AND FINANCIAL STATEMENTS ARE AVAILABLE ON GUIDESTAR AND AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 273,592
	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
	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

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 $ 2,299,652 including grants of $) (Revenue $)
OVERSEAS DRILLING LIMITED

(Code) (Expenses $ 1,286,372 including grants of $ 20,000) (Revenue $)
NATIONAL OCEAN SCIENCES BOWL

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

4d. Other program services

(Code) (Expenses $ 864,104 including grants of $) (Revenue $ 652,040)
OTHER RESEARCH AND EDUCATION

(Code) (Expenses $ 757,194 including grants of $) (Revenue $)
GULF OF MEXICO RESEARCH INITIATIVE

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

4d. Other program services

(Code) (Expenses $ 590,177 including grants of $ 562,077) (Revenue $)
PUBLIC POLICY AND ADVOCACY

(Code) (Expenses $ 408,119 including grants of $) (Revenue $)
NATIONAL OCEANOGRAPHIC PARTNERSHIP PROGRAM

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

4d. Other program services

(Code) (Expenses $ 3,966,512 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

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 920930207	95-6006144	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
CIRESUNIVERSITY OF COLORADO AT BOULDER3100 MAINE ST 572 UCB BOULDER,CO 803090572	84-6000555	STATE OF CO	17,500		FMV		SUBSIDY FOR NOSB COMPETITION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
REGENTS OF UNVIVERSTY OF MICHIGAN - CSCAR3003 S STATE STREET ANN ARBOR, MI 48109	38-6006309	501(C)(3)	14,500		FMV		SUBSIDY FOR NOSB COMPETITION
FLORIDA ATLANTIC UNIVERSITY - HARBOR BRANCH 777 GLADES ROAD OFFICE OF THE CONTROLLER BOCA RATON, FL 334310991	65-0385507	STATE OF FL	15,000		FMV		SUBSIDY FOR NOSB COMPETITION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
INTER-DISTRICT COMMITTEE PROJECT OCEANOLOGY1084 SHENNESSOSSETT RD GROTON,CT 06340	06-0896672	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
TEXAS A&M UNIVERSITY1260 TAMU COLLEGE STATION, TX 778431260	74-6000531	STATE OF TX	13,416		FMV		SUBSIDY FOR NOSB COMPETITION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
EAST CAROLINA UNIVOFFICE OF SPONS PROG2200 S CHARLES BLVD 2906 GREENVILLE,NC 278584353	56-6000403	STATE OF NC	12,630		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF HAWAII2530 DOLE ST SAKAMAKI D200 HONOLULU,HI 96822	99-6000354	STATE OF HI	20,000		FMV		SUBSIDY FOR NOSB COMPETITION

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THE UNIVERSITY OF MAINE SYSTEM16 CENTRAL STREET BANGOR,ME 04401	01-6000769	STATE OF ME	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
MASSACHUSSETS INSTITUTE OF TECHNOLOGY77 MASSACHUSSETS AVENUE CAMBRIDGE,MA 02139	04-2103594	501(C)(3)	18,000		FMV		SUBSIDY FOR NOSB COMPETITION

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OLD DOMINION UNIVERSITY RESEARCH FOUNDATIONP O BOX 6369 NORFOLK,VA 23508	54-6068198	501(C)(3)	7,485		FMV		SUBSIDY FOR NOSB COMPETITION
OREGON STATE UNIVERSITY BUSINESS AFFAIRS B100 KERR ADMIN BLDG CORVALLIS,OR 97331	48-1278540	STATE OF OR	15,000		FMV		SUBSIDY FOR NOSB COMPETITION

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RUTGERS THE STATE UNIVERSITY OF NEW JERSEY65 DAVIDSON ROAD PISCATAWAY,NJ 08854	22-6001086	IRC 115	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
SAN FRANCISCO STATE UNIVERSITY1600 HOLLOWAY AVENUE-ADM 155 SAN FRANCISCO, CA 94132	93-1137247	IRC 115	15,000		FMV		SUBSIDY FOR NOSB COMPETITION

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SAVANNAH STATE UNIVERSITY OFFICE OF FISCAL AFFAIRS BOX 20419 SAVANNAH, GA 31404	58-6002069	STATE OF GA	32,949		FMV		SUBSIDY FOR NOSB COMPETITION AND DIVERSITY AWARD
UNIVERSITY OF SOUTHERN CALIFORNIA WRIGLEY INSTITUTE UNIVERSITY GARDENS SUITE 203 LOS ANGELES, CA 900898003	95-1642394	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION

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UNIVERSITY OF SOUTH FLORIDA 4202 EAST FOWLER AVENUE-ADM 147 TAMPA,FL 33620	59-3102112	STATE OF FL	14,535		FMV		SUBSIDY FOR NOSB COMPETITION
STONY BROOK UNIVTHE RESEARCH FDN OF STATE UNIVERSITY OF NYP O BOX 9 ALBANY,NY 122010009	14-1368361	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION

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

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TEXAS A&M UNIVERSITY2700 EARL RUDDER FWY S STE 180 COLLEGE STATION,TX 77845	74-6000531	STATE OF TX	14,190		FMV		SUBSIDY FOR NOSB COMPETITION
VIRGINIA INSTITUTE OF MARINE SCIENCE STATE ROUTE 1208 GREATE ROAD GLOUCESTER POINT,VA 23062	54-6001802	STATE OF VA	7,500		FMV		SUBSIDY FOR NOSB COMPETITION

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UNIVERSITY OF WASHINGTON129 SCHMITZ HALL BOX 355870 SEATTLE,WA 981955870	91-6001537	IRC 115	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF WISCONSINMILWAUKEE SCHOOL OF CONTINUING EDUCATIONDRAWER 491 MILWAUKEE,WI 53293	39-1805963	501(C)(3)	15,000		FMV		SUBSIDY FOR NOSB COMPETITION

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YOUNGSTOWN STATE UNIVERSITY GRANTS ACCOUNTING ONE UNIVERSIY PLAZA YOUNGSTOWN,OH 44555	34-1011998	STATE OF OH	15,000		FMV		SUBSIDY FOR NOSB COMPETITION
UNIVERSITY OF ALASKA FAIRBANKS P O BOX 756540 BUTROVICH BUILDING 209B FAIRBANKS,AK 997756540	92-6000147	IRC 115	20,000		FMV		SUBSIDY FOR NOSB COMPETITION

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UNIVERSITY OF SOUTHERN MISSISSIPPI703 EAST BEACH DRIVE OCEAN SPRINGS, MS 39564	64-6000818	STATE OF MS	25,000		FMV		SUBSIDY FOR NOSB COMPETITION