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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

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013

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

C Name of organization
THE WOODS HOLE RESEARCH CENTER INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
149 WOODS HOLE ROAD

City or town, state or country, and ZIP + 4
FALMOUTH, MA 02540

D Employer identification number
04-3005094

E Telephone number
(508) 540-9900

G Gross receipts $ 11,380,341

F Name and address of principal officer
RICHARD HOUGHTON
149 WOODS HOLE ROAD
FALMOUTH,MA 02540

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:** ▶ WHRC ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1988

M State of legal domicile MA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
SEE SCHEDULE O

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	23
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	64
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	7,074,199	8,836,335
	9	Program service revenue (Part VIII, line 2g)	0	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	201,459	385,244
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	27,522	26,515
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,303,180	9,248,094
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,240,007	1,470,795
	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)	5,637,624	5,564,097
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	68,386
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶594,527		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,973,595	2,592,539
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	10,851,226	9,695,817
	19	Revenue less expenses Subtract line 18 from line 12	-3,548,046	-447,723

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	16,134,375	17,109,731
	21	Total liabilities (Part X, line 26)	2,747,147	3,791,279
	22	Net assets or fund balances Subtract line 21 from line 20	13,387,228	13,318,452

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 | 2014-01-14 Date

▶ MELANIE B POWERS VP/DIRECTOR, FINANCE AND ADMIN
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
CRAIG A STEVENS CPA				P01289490
Firm's name ▶ CALIBRE CPA GROUP PLLC			Firm's EIN ▶ 47-0900880	
Firm's address ▶ 7501 WISCONSIN AVENUE SUITE 1200 WEST BETHESDA, MD 20814			Phone no (202) 331-9880	

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

TO ADVANCE SCIENTIFIC DISCOVERY AND SEEK SCIENCE-BASED SOLUTIONS FOR THE WORLD'S ENVIRONMENTAL AND ECONOMIC CHALLENGES THROUGH RESEARCH AND EDUCATION ON FORESTS, SOILS, AIR, AND WATER

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 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 $ 4,058,684 including grants of $ 1,172,158) (Revenue $)

FORESTS - FORESTS ONCE COVERED NEARLY HALF THE EARTH'S LAND SURFACE, BUT DUE TO AGRICULTURAL EXPANSION, THEIR COVERAGE HAS DECLINED TO ABOUT ONE-THIRD DESPITE THE DECLINE, FORESTS PLAY A VITAL ROLE IN MODERATING THE EARTH'S CLIMATE BY REGULATING THE WATER CYCLE (TRANSFERRING HUGE AMOUNTS OF WATER FROM THE SOIL INTO THE AIR, WHICH IN TURN INFLUENCES RAINFALL PATTERNS AND STORMS), BY STABILIZING SOIL AND PREVENTING IT FROM BEING WASHED AWAY INTO RIVERS, AND BY SOAKING UP CARBON DIOXIDE FROM THE ATMOSPHERE AND STORING IT IN THE WOODY TRUNKS OF TREES AND IN THE SOIL, THUS REMOVING THIS HEAT-TRAPPING GAS FROM THE ATMOSPHERE FORESTS ARE THEREFORE INTEGRAL TO GLOBAL ENVIRONMENTAL HEALTH WHRC STUDIES THE GREAT FORESTS OF THE WORLD THROUGH FIELDWORK AND REMOTE SENSING TO UNDERSTAND THEIR FUNCTIONING AND HOW THEY CHANGE OVER TIME COMBINING SATELLITE IMAGERY-DERIVED MAPS WITH FIELD MEASUREMENTS OF THE AMOUNT OF CARBON CONTAINED IN FORESTS, WHRC SCIENTISTS CALCULATE HOW MUCH INTACT CARBON IS STORED BY FORESTS AND HOW MUCH CARBON IS RELEASED INTO THE ATMOSPHERE WHEN FORESTS ARE CUT WE WORK WITH FARMERS, RANCHERS, AND LOGGING COMPANIES TO UNDERSTAND THE ECONOMIC AND SOCIAL DRIVERS OF LAND-USE CHANGE, INCLUDING THE VALUE OF STANDING FOREST, THE DEMANDS FOR AGRICULTURAL EXPANSION, AND POLICIES THAT WOULD ENCOURAGE SOUND FOREST MANAGEMENT AND CONSERVATION

4b (Code) (Expenses $ 1,432,695 including grants of $ 266,202) (Revenue $)

WATER - WHRC COMBINES REMOTE SENSING AND MODELING WITH ANALYSES OF THOUSANDS OF WATER SAMPLES TAKEN FROM STREAMS AND RIVERS AROUND THE GLOBE TO GAIN INFORMATION ABOUT HUGE WATERSHEDS SUCH AS THOSE IN THE AMAZON AND CONGO AS WELL AS SMALL LOCAL STREAMS DEFORESTATION AND FOREST DEGRADATION RESULT IN A COMPLEX SET OF CHANGES TO CLIMATE AND THE WATER BALANCE AT SMALL AND LARGE SCALES, INCREASING RUNOFF, SEDIMENT FLUX AND STREAM FLOW AND POTENTIALLY ALTERING RAINFALL PATTERNS WHRC SCIENTISTS LEAD FIELDWORK AND MODELING PROJECTS TO BETTER UNDERSTAND THE CONSEQUENCES OF THESE CHANGES AND TO LINK TO POSSIBLE MITIGATION STRATEGIES, POLICIES, AND SOLUTIONS IN THE ARCTIC, FOR EXAMPLE, WHRC SCIENTISTS ANALYZE THE CARBON DISSOLVED IN RIVER WATER TO DETERMINE HOW THAWING OF PERMAFROST DUE TO CLIMATE CHANGE CAUSES THE LOSS OF CARBON PREVIOUSLY STORED IN THOSE FROZEN SOILS AND ITS RELEASE INTO THE AIR AND WATER THIS STUDY IS CRUCIAL FOR UNDERSTANDING HOW THE RATE OF CLIMATE CHANGE CAUSED BY HUMAN USE OF FOSSIL FUELS MAY BE ACCELERATED BY THAWING PERMAFROST IN THE AMAZON BASIN, WE STUDY THE EFFECTS OF CONVERTING FORESTS TO VARIOUS FORMS OF AGRICULTURE ON WATER QUALITY AND WATER YIELD, AND WE RELATE CHANGES IN THE WATER CYCLE TO CHANGING LOCAL CLIMATE AND FIRE RISK RIVERS ARE ALSO IMPORTANT HABITAT FOR BIOLOGICAL DIVERSITY AND FOR ECONOMICALLY IMPORTANT FISHERIES WHRC SCIENTISTS HAVE DEVELOPED COMMUNITY FISHERIES MANAGEMENT SYSTEMS TO HELP LOCAL COMMUNITIES ACHIEVE SUSTAINABLE HARVESTS OF FISH IN FLOODPLAIN LAKES OF THE AMAZON BASIN

4c (Code) (Expenses $ 656,330 including grants of $) (Revenue $)

INTEGRATIVE SCIENCE - WHILE MANY OF OUR INDIVIDUAL SCIENTISTS HAVE DEVELOPED REPUTATIONS AS LEADERS IN THEIR RESPECTIVE FIELDS OF EXPERTISE, THIS ACHIEVEMENT IS DUE LARGELY TO THE EFFECTIVENESS OF JOINT COLLABORATIONS AMONG SCIENTISTS FROM WITHIN AND OUTSIDE THE CENTER FOR NEARLY ALL OF OUR PROJECTS OUR SCIENCE IS DRIVEN BY THE NEED TO INTEGRATE ACROSS AREAS OF EXPERTISE IN ORDER TO UNDERSTAND HOW AN ENTIRE ECOSYSTEM, A GLOBAL CYCLE, OR A SUITE OF HUMAN INTERVENTIONS REALLY WORKS OUR INTENTIONAL COMPOSITION OF COMPLEMENTARY EXPERTISE AFFORDS A SCIENTIFIC IMPACT OUT OF PROPORTION WITH OUR MODEST SIZE (CURRENTLY 15 PRINCIPAL INVESTIGATORS AND A TOTAL OF ABOUT 55 STAFF) UNLIKE LARGE UNIVERSITIES OR GOVERNMENT LABORATORIES, WHICH ARE CONSTRAINED BY MULTIPLE EDUCATIONAL, RESEARCH, AND BUREAUCRATIC MISSIONS, WE ARE ABLE TO NIMBLY ASSEMBLE EXPERT TEAMS TO ADDRESS TIMELY TOPICS AND GEOGRAPHICAL HOTSPOTS OF ENVIRONMENTAL RESEARCH HUGE VOLUMES OF DATA ARE PRODUCED DAILY BY SATELLITES AND BY NETWORKS OF FOREST, SOIL, AIR, AND WATER MEASUREMENTS THROUGHOUT THE WORLD MAKING GOOD USE OF THESE VARIOUS STREAMS OF DATA TO ANSWER THE MOST CRITICAL SCIENTIFIC QUESTIONS REQUIRES SKILL, EXPERIENCE, AND HARD WORK WORKING TOGETHER, OUR EXPERTS USE SATELLITES TO STUDY THE CHANGING EARTH (OUR "EYES IN THE SKY"), FIELD STUDIES OF RIVERS, SOILS, PLANTS, AND PEOPLE (OUR "BOOTS ON THE GROUND"), AND DATA ANALYSIS AND MAPPING (OUR "THINKERS IN THE TANK") HENCE, WE ARE NOT ONLY A REMOTE SENSING SHOP, ONLY A THINK TANK, OR ONLY A RESEARCH INSTITUTE, BUT RATHER, A UNIQUE COMBINATION OF ALL THREE IN THIS WAY, WE DECIPHER REGIONAL AND GLOBAL PATTERNS OF CHANGE IN THE CONTEXT OF LOCAL EXPERIENCE AND KNOWLEDGE FINALLY, WE COMMUNICATE THESE INSIGHTS BOTH TO THE SCIENTIFIC COMMUNITY, THUS ADVANCING SCIENTIFIC DISCOVERY, AND TO NON-SCIENTIFIC AUDIENCES WHO ARE SEEKING SCIENCE-BASED SOLUTIONS TO THE MOST PRESSING ENVIRONMENTAL AND ECONOMIC ISSUES OF THE DAY

(Code) (Expenses $ 512,670 including grants of $ 19,075) (Revenue $)

SOILS - SOILS STORE MORE THAN TWICE AS MUCH CARBON AS CURRENTLY EXISTS IN THE ATMOSPHERE, AND MORE THAN THREE TIMES AS MUCH CARBON AS EXISTS IN ALL OF THE PLANTS BIOMASS OF THE WORLD'S FORESTS AND GRASSLANDS SOILS ALSO PURIFY WATER AND CYCLE PLANT NUTRIENTS NEEDED TO SUPPORT PRODUCTIVE AGRICULTURE AND FORESTRY WHRC RESEARCH REVEALS THE IMPORTANCE OF SOIL, INFORMS MANAGEMENT PRACTICE, AND SUPPORTS THE DEVELOPMENT OF POLICY FOCUSED ON A SUSTAINABLE BALANCE BETWEEN ENVIRONMENTAL HEALTH AND ECONOMIC DEVELOPMENT IN THE BRAZILIAN AMAZON, WHRC STUDIES THE RESULTS OF CLEARING FORESTS FOR AGRICULTURE IN TERMS OF CHANGES IN SOIL FERTILITY, PRODUCTION OF GREENHOUSE GASES, AND THE QUALITY OF STREAM WATER IN NEW ENGLAND, WHRC STUDIES THE LEGACY OF 19TH CENTURY FARMING, SUBSEQUENT FOREST REGROWTH, AND MORE RECENT FOREST HARVESTING ON SOIL CARBON STORAGE THE WHRC HAS LED ASSESSMENTS OF AGRICULTURAL SOIL NITROGEN MANAGEMENT FOR OPTIMIZING CROP PRODUCTIVITY WHILE MINIMIZING UNINTENDED LOSSES OF SOIL NITROGEN AS AIR AND WATER POLLUTION OUR WORK DEMONSTRATES THAT GOOD MANAGEMENT OF THE SOIL SUPPORTS BIOLOGICAL DIVERSITY, WATER AND FOOD PRODUCTION, AND IS INTEGRAL TO THE MAINTENANCE OF A STABLE CLIMATE

(Code) (Expenses $ 242,580 including grants of $ 13,359) (Revenue $)

AIR - HUMAN-CAUSED CLIMATE CHANGE IS OCCURRING BECAUSE EXCESSIVE AMOUNTS OF HEAT-TRAPPING GASES ARE ACCUMULATING IN OUR ATMOSPHERE CLIMATE CHANGE MEANS HIGHER AVERAGE TEMPERATURES (GLOBAL WARMING) AND MORE EXTREME WEATHER EVENTS SUCH AS DROUGHTS AND INTENSE STORMS IN THE ARCTIC, AMONG OTHER LOCALES, WHRC RESEARCH SHOWS HOW THE RAPID CHANGE IN CLIMATE CAUSES THE RELEASE OF GREENHOUSE GASES INTO THE AIR FROM THE REGION'S WETLANDS AND PERMAFROST SOILS AND THUS ACCELERATES THE RATE OF CHANGE WHRC HAS ALSO LED SCIENTIFIC ASSESSMENTS OF NITROGEN IN AIR POLLUTION, INCLUDING INDUSTRIAL AND TRANSPORTATION SOURCES OF NITROGEN OXIDES AND AGRICULTURAL SOURCES OF THE HEAT TRAPPING GAS, NITROUS OXIDE WHRC HAS RESEARCHED THE CHEMICAL CHARACTERISTICS OF SOOT FOUND ON REMOTE GLACIERS IN ORDER TO IDENTIFY THE SOURCES OF THIS AIR POLLUTION THIS DARK-COLORED SOOT IS CAUSING THE GLACIERS TO MELT MORE RAPIDLY AND MAY ALSO BE AFFECTING FOOD WEBS IN THE RIVERS AND OCEANS RECEIVING GLACIAL MELTWATER

4d Other program services (Describe in Schedule O)

(Expenses $ 755,250 including grants of $ 32,434) (Revenue $)

4e **Total program service expenses** ▶ 6,902,959

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		No
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 for escrow or custodial account liability, 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	Yes	
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, line 10? *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 and XII*	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 and XII 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	Yes	
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, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts 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 (see instructions)*	17	Yes	
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 hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV **Checklist of Required Schedules** *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to any government or organization 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**		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25*	**24a**	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		No
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**		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		No
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, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	**34**		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
b	If 'Yes' to line 35a, 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**		
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 11b 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	36			
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	64			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ▶CG 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 as charitable contributions? . . .			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		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	23		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	20		
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		No
6	Did the organization have members or stockholders?		6		No
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		No
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		No
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 this 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	Yes	
	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 ▶MA

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 ☐ Other (explain in Schedule O)

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 during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
▶MELANIE B POWERS 149 WOODS HOLE ROAD FALMOUTH, MA (508) 444-1511

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 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 organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
See Additional Data Table										

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								1,669,094	0	271,499

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 ▶12

			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	Yes	
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
DEVELOPMENT SOLUTIONS OF NE LLC 229 COTUIT RD SANDWICH MA 02563	DEVELOPMENT SERVICES	114,110

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 ▶1

Part VIII Statement of Revenue

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

			(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**					
	b Membership dues **1b**					
	c Fundraising events **1c**					
	d Related organizations . . . **1d**					
	e Government grants (contributions) **1e**	5,131,067				
	f All other contributions, gifts, grants, and similar amounts not included above **1f**	3,705,268				
	g Noncash contributions included in lines 1a-1f $	13,935				
	h **Total.** Add lines 1a-1f . . . . ▶		8,836,335			
Program Service Revenue		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f . . . . ▶					
Other Revenue	**3** Investment income (including dividends, interest, and other similar amounts) . . . . ▶		118,484			118,484
	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	2,399,007 /				
	b Less cost or other basis and sales expenses	2,132,247 /				
	c Gain or (loss)	266,760 /				
	d Net gain or (loss) . . . . ▶		266,760			266,760
	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 MISCELLANEOUS	900099	26,515			26,515
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a–11d . . . . ▶		26,515			
	12 **Total revenue.** See Instructions . . . . . ▶		9,248,094	0	0	411,759

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)

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	1,032,190	1,032,190		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	438,605	438,605		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	999,542	380,088	494,580	124,874
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	2,804,300	2,052,876	644,984	106,440
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	270,345	192,835	66,755	10,755
9	Other employee benefits	1,164,253	742,023	348,781	73,449
10	Payroll taxes	325,657	208,293	97,561	19,803
11	Fees for services (non-employees)				
a	Management				
b	Legal	24,822		17,982	6,840
c	Accounting	49,994		49,994	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	68,386			68,386
f	Investment management fees	43,630		43,630	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	233,024	168,182	64,842	
12	Advertising and promotion	456	456		
13	Office expenses	109,930	62,520	37,925	9,485
14	Information technology	134,845	91,513	37,272	6,060
15	Royalties . .				
16	Occupancy	160,910		160,910	
17	Travel	309,942	267,863	24,816	17,263
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	269,306	269,306		
20	Interest	9,279		9,279	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	747,814		747,814	
23	Insurance	29,935		29,935	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	RESEARCH SUPPLIES AND E	115,068	103,811	11,257	0
b	PRINTING	34,350	2,000	1,273	31,077
c	ALLOCATION OF COMMON EX	0	736,928	-800,397	63,469
d					
e	All other expenses	319,234	153,470	109,138	56,626
25	**Total functional expenses.** Add lines 1 through 24e	9,695,817	6,902,959	2,198,331	594,527
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		575,510	1	953,075
	2	Savings and temporary cash investments		13,837	2	961,268
	3	Pledges and grants receivable, net		2,093,130	3	1,642,195
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 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		179,528	9	500,785
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 13,495,701			
	b	Less accumulated depreciation	10b 6,000,803	8,188,734	10c	7,494,898
	11	Investments—publicly traded securities		4,849,055	11	5,324,299
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		234,581	15	233,211
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		16,134,375	16	17,109,731
Liabilities	17	Accounts payable and accrued expenses		485,947	17	598,464
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		2,188,531	20	2,072,966
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	1,000,000
	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		72,669	25	119,849
	26	**Total liabilities.** Add lines 17 through 25		2,747,147	26	3,791,279
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		7,420,952	27	7,165,133
	28	Temporarily restricted net assets		2,292,447	28	2,476,640
	29	Permanently restricted net assets		3,673,829	29	3,676,679
		Organizations that do not follow SFAS 117 (ASC 958), 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		13,387,228	33	13,318,452
	34	Total liabilities and net assets/fund balances		16,134,375	34	17,109,731

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	9,248,094
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,695,817
3	Revenue less expenses Subtract line 2 from line 1	3	-447,723
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13,387,228
5	Net unrealized gains (losses) on investments	5	386,540
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-7,593
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	13,318,452

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
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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	

Additional Data

Software ID:
Software Version:
EIN: 04-3005094
Name: THE WOODS HOLE RESEARCH CENTER INC

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
WILHELM MERCK CHAIR	3 00	X						0	0	0
JOHN H ADAMS DIRECTOR	2 00	X						0	0	0
STEPHEN T CURWOOD DIRECTOR	2 00	X						0	0	0
IRIS FANGER DIRECTOR	2 00	X						0	0	0
STUART GOODE DIRECTOR	2 00	X						0	0	0
DAVID HAWKINS DIRECTOR	2 00	X						0	0	0
LILY RICE HSIA DIRECTOR	2 00	X						0	0	0
LAWRENCE S HUNTINGTON DIRECTOR	2 00	X						0	0	0
THOMAS E LOVEJOY VICE CHAIR	2 00	X						0	0	0
VICTORIA LOWELL DIRECTOR	3 00	X						0	0	0
MERLOYD LUDINGTON DIRECTOR	2 00	X						0	0	0
AMY REGAN DIRECTOR	3 00	X						0	0	0
CONSTANCE R ROOSEVELT DIRECTOR	2 00	X						0	0	0
TEDD SAUNDERS DIRECTOR	1 00	X						0	0	0
ERIC DAVIDSON PRESIDENT/DIRECTOR	40 00	X		X				221,870	0	37,952
JOSEPH R ROBINSON TREASURER	3 00	X		X				0	0	0
SCOTT J GOETZ DIRECTOR/SENIOR SCIENTIST/DEPDIRECTOR	40 00	X						181,530	0	25,272
JOSHUA R GOLDBERG DIRECTOR	2 00	X						0	0	0
KAREN LAMBERT DIRECTOR	3 00	X						0	0	0
RJ LYMAN CLERK	1 00	X		X				0	0	0
WILLIAM MOOMAW DIRECTOR	1 00	X						0	0	0
JEREMY OPPENHEIM DIRECTOR	1 00	X						0	0	0
ROBERT M HOLMES DIRECTOR/SENIOR SCIENTIST	40 00	X						140,537	0	29,811
MELANIE POWERS ASST TREASURER/DIR OF FIN	40 00			X				193,600	0	22,552
LISA O'CONNELL ASSISTANT CLERK	40 00			X				89,461	0	22,170

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
RICHARD HOUGHTON SENIOR SCIENTIST	40 00					X		182,262	0	33,941
JOSEF KELLNDORFER SENIOR SCIENTIST	40 00					X		133,762	0	25,044
MICHAEL COE SENIOR SCIENTIST	40 00					X		126,728	0	19,765
CAMILLE ROMANO CONTROLLER	40 00					X		123,093	0	28,008
DAVID MCGRATH ASSOCIATE SCIENTIST	40 00					X		111,251	0	26,984
WILLIAM BROWN FORMER PRESIDENT/ EXECUTIVE DIRECTOR	0 00						X	165,000	0	0

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

2012

Open to Public Inspection

Name of the organization
THE WOODS HOLE RESEARCH CENTER INC

Employer identification number
04-3005094

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

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

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions)**)	**(iv)** Is the organization in col **(i)** listed in your governing document? Yes	No	**(v)** Did you notify the organization in col **(i)** of your support? Yes	No	**(vi)** Is the organization in col **(i)** organized in the U S ? Yes	No	**(vii)** Amount of monetary support
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	19,219,409	9,510,898	6,755,270	7,074,108	8,864,171	51,423,856
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	19,219,409	9,510,898	6,755,270	7,074,108	8,864,171	51,423,856
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)						13,784,495
6 **Public support.** Subtract line 5 from line 4						37,639,361

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	19,219,409	9,510,898	6,755,270	7,074,108	8,864,171	51,423,856
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	276,174	127,343	118,307	127,380	118,484	767,688
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	33,836	9,986	21,516	27,522	26,515	119,375
11 **Total support** (Add lines 7 through 10)						52,310,919

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	71 950 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	70 930 %

16a **33 1/3% support test—2012.** 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—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2012.** 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—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 2012 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2011** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2012.** 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—2011.** 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.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization
THE WOODS HOLE RESEARCH CENTER INC

Employer identification number
04-3005094

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 can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ 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 education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the 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, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶________

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(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 (ASC 958) relating to these items

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

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

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

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

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

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

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 XIII 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 XIII Check here if the explanation has been provided in Part XIII . . . . ☐

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	4,206,317	5,187,098	4,628,452	3,669,172	3,682,641
b Contributions	2,850	6,100	5,150	536,100	21,400
c Net investment earnings, gains, and losses	549,606	122,280	553,496	487,694	-34,869
d Grants or scholarships					
e Other expenditures for facilities and programs	191,682	1,109,161		64,514	
f Administrative expenses					
g End of year balance	4,567,091	4,206,317	5,187,098	4,628,452	3,669,172

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► 11 660 %

b Permanent endowment ► 80 500 %

c Temporarily restricted endowment ► 7 840 %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

4 Describe in Part XIII 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		517,571		517,571
b Buildings		11,074,599	4,565,042	6,509,557
c Leasehold improvements				
d Equipment		1,903,531	1,435,761	467,770
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ►				7,494,898

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) must 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) must equal Form 990, Part X, col (B) line 13)* ▶		

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

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

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

1 (a) Description of liability	(b) Book value
Federal income taxes	
LIABILITY UNDER CHARITABLE GIFT ANNUITY	68,089
REFUNDABLE ADVANCES	51,760
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	119,849

2. Fin 48 (ASC 740) Footnote In Part XIII, 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 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

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

1	Total revenue, gains, and other support per audited financial statements			1	9,654,877
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	386,540		
b	Donated services and use of facilities	2b	27,836		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	-7,593		
e	Add lines **2a** through **2d**			2e	406,783
3	Subtract line **2e** from line **1**			3	9,248,094
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	9,248,094

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

1	Total expenses and losses per audited financial statements			1	9,723,653
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	27,836		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	27,836
3	Subtract line **2e** from line **1**			3	9,695,817
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	9,695,817

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	UP TO 5% OF THE TOTAL EARNED INCOME OF THE ENDOWMENT FUND IS APPROPRIATED ANNUALLY TO SUPPORT THE OPERATIONS OF THE CENTER
PART XI, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS - 7,593

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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

2012

Open to Public Inspection

Name of the organization
THE WOODS HOLE RESEARCH CENTER INC

Employer identification number
04-3005094

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 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in region	**(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 and investments in region
SOUTH AMERICA	0	1	GRANTMAKING	INTEGRATES RESEARCH, POLICY ANALYSIS, NATURAL RESOURCE MGMT SYSTEMS AND EDUCATION	49,000
SOUTH AMERICA	0	0	GRANTMAKING	MAPPING POTENTIAL FUTURE DEFORESTATION	6,000
SOUTH AMERICA	0	0	GRANTMAKING	DELIVERY OF THE MODIS-LANDSAT CERRADO BIOMASS PRODUCTS	18,888
SOUTH AMERICA	0	0	GRANTMAKING	CUSTOMIZE MAP FOR VARIOUS AMAZON LANDSCAPES	59,298
SOUTH AMERICA	0	0	GRANTMAKING	INTERGATES RESEARCH, POLICY ANALYSIS, NATURAL RESOURCE MGT SYSTEMS, AND EDUCATION	305,419
3a Sub-total	0	1			438,605
b Total from continuation sheets to Part I	0	0			0
c **Totals** (add lines 3a and 3b)	0	1			438,605

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. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
See Add'l Data								

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 . . . . ▶ 5

3 Enter total number of other organizations or entities . . . . ▶ 0

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. Part III can be duplicated 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, Return by a U.S. Transferor of Property to a Foreign Corporation (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 organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (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 required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 THE CHIEF FINANCIAL OFFICER AND DIRECTOR OF ADMINISTRATION (CFO) PREPARES ALL SUBCONTRACTS WITH FOREIGN ENTITIES THESE SUBCONTRACTS CONTAIN A SCOPE OF WORK AND A DETAILED BUDGET PLAN SUB-RECIPIENTS PREPARE AND SUBMIT INVOICES TO THE CFO THE INVOICES ARE REVIEWED FOR APPROPRIATENESS AND COMPLIANCE WITH ALLOWABLE/UNALLOWABLE EXPENSES SUPPORTING DOCUMENTS MAY INCLUDE COPIES OF RECEIPTS OR COPIES OF THE SUB-RECIPIENT ACCOUNTING RECORDS THESE INVOICES ARE THEN REVIEWED BY THE CONTROLLER AND THE GRANTS ACCOUNTANT AND TRACED TO THE GENERAL LEDGER TO DETERMINE ELIGIBILITY FOR PAYMENT THE CONTROLLER AND THE GRANTS ACCOUNTANT ALSO REVIEW INVOICES FOR COMPLIANCE TO LINE ITEM BUDGETS AS APPLICABLE SIGNIFICANT VARIANCES TO BUDGET ARE REVIEWED BY THE CFO AND PRINCIPAL INVESTIGATORS, AND IF DETERMINED NECESSARY, REPORTED TO THE PRIME FUNDER IN THE FORM OF A RE-BUDGET REQUEST THE CENTER'S ACCOUNTING SYSTEM TRACKS REVENUES AND EXPENDITURES ON A PROJECT OR "AWARD" BASIS

Additional Data

Software ID:
Software Version:
EIN: 04-3005094
Name: THE WOODS HOLE RESEARCH CENTER INC

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	RESEARCH	49,000	WIRE TRANSFER			
		SOUTH AMERICA	RESEARCH	6,000	WIRE TRANSFER			
		SOUTH AMERICA	RESEARCH	18,888	WIRE TRANSFER			
		SOUTH AMERICA	RESEARCH	59,298	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	RESEARCH	305,419	WIRE TRANSFER			

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
THE WOODS HOLE RESEARCH CENTER INC

Employer identification number
04-3005094

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- a ☑ Mail solicitations
- b ☑ Internet and email solicitations
- c ☐ Phone solicitations
- d ☑ In-person solicitations
- e ☑ Solicitation of non-government grants
- f ☑ Solicitation of government grants
- g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
DEVELOPMENT SOLUTIONS OF NEW ENGLAND 299 COTUIT ROAD SANDWICH, MA 02563	DEVELOPMENT CONSULTING		No	0	59,705	-59,705
Total . . . . ▶					59,705	-59,705

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

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Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 (event type)	**(b)** Event #2 (event type)	**(c)** Other events (total number)	**(d)** Total events (add col **(a)** through col **(c)**)
Revenue	**1** Gross receipts . . .				
	2 Less Contributions . .				
	3 Gross income (line 1 minus line 2) . . .				
Direct Expenses	**4** Cash prizes . . .				
	5 Noncash prizes . .				
	6 Rent/facility costs . .				
	7 Food and beverages .				
	8 Entertainment . . .				
	9 Other direct expenses .				
	10 Direct expense summary Add lines 4 through 9 in column (d) . . . . ▶				( )
	11 Net income summary Combine line 3, column (d), and line 10 . . . . ▶				

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	**(b)** Pull tabs/Instant bingo/progressive bingo	**(c)** Other gaming	**(d)** Total gaming (add col **(a)** through col **(c)**)
Revenue	**1** Gross revenue				
Direct Expenses	**2** Cash prizes				
	3 Non-cash prizes . . .				
	4 Rent/facility costs . . .				
	5 Other direct expenses . .				
	6 Volunteer labor . . .	☐ **Yes**_______ ☐ **No**	☐ **Yes**_______ ☐ **No**	☐ **Yes**_______ ☐ **No**	
	7 Direct expense summary Add lines 2 through 5 in column (d) . . . . ▶				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) . . . . ▶				

9 Enter the state(s) in which the organization operates gaming activities ____________

a Is the organization licensed to operate gaming activities in each of these states? . . . . ☐ **Yes** ☐ **No**

b If "No," explain ____________

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . . ☐ **Yes** ☐ **No**

b If "Yes," explain ____________

Does the organization operate gaming activities with nonmembers? . . . . Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . Yes No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation

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

2012

Open to Public Inspection

Name of the organization
THE WOODS HOLE RESEARCH CENTER INC

Employer identification number
04-3005094

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. Part II can be duplicated 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
(1) AMER MUSEUM NAT HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 10024	13-6162659	501(C)(3)	79,371				SCIENTIFIC RESEARCH
(2) CARNEGIE INSTITUTION OF WASHINGTON 1530 P ST NW WASHINGTON, DC 20005	53-0196523	501(C)(3)	20,307				SCIENTIFIC RESEARCH
(3) COLUMBIA UNIVERSITY 615 W 131ST STREET ROOM 254 NEW YORK, NY 10027	13-5598093	501(C)(3)	7,264				SCIENTIFIC RESEARCH
(4) CONSERVATION INTERNATIONAL FOUNDATION 2011 CRYSTAL DRIVE SUITE 500 ARLINGTON, VA 22202	52-1497470	501(C)(3)	55,342				SCIENTIFIC RESEARCH
(5) IPAM INTERNATIONAL PROGRAM 3180 18TH STREET SUITE 205 SAN FRANCISCO, CA 94110	27-3444564	501(C)(3)	672,143				SCIENTIFIC RESEARCH
(6) MARINE BIOLOGICAL LABORATORY 7 MBL STREET WOODS HOLE, MA 02543	04-2104690	501(C)(3)	41,867				SCIENTIFIC RESEARCH
(7) MONTANA STATE UNIV 309 MONTANA HALL BOZEMAN, MT 59717	81-0302402	MONTANA UNIV SYSTEM	5,941				SCIENTIFIC RESEARCH
(8) RESOURCE MEDIA 101 MONTGOMERY ST SUITE 2600 SAN FRANCISCO, CA 94104	82-0564961	501(C)(3)	19,075				SCIENTIFIC RESEARCH
(9) UNIV OF MARYLAND 3112 LEE BUILDING COLLEGE PARK, MD 20742	52-6002033	UNIV SYSTEM OF MD	60,661				SCIENTIFIC RESEARCH
(10) UNIV OF NEW HAMPSHIRE 211 MORSE HALL DURHAM, NH 03824	02-6000937	UNIV SYSTEM OF NH	9,324				SCIENTIFIC RESEARCH
(11) UNIVERSITY OF TEXAS AT AUSTIN INNER CAMPUS DRIVE MAIN BLDG ROOM 132 AUSTIN, TX 78713	74-6000203	UNIV OF TX SYSTEM	45,929				SCIENTIFIC RESEARCH
(12) YALE UNIVERSITY 47 COLLEGE STREET SUITE 203 NEW HAVEN, CT 06510	06-0646973	501(C)(3)	14,965				SCIENTIFIC RESEARCH

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 12

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 0

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. Part III can be duplicated 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

Part IV **Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), 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 THE CHIEF FINANCIAL OFFICER AND DIRECTOR OF ADMINISTRATION (CFO) PREPARES ALL CONSULTING AGREEMENTS AND SUBCONTRACTS FOR INDIVIDUALS AND ORGANIZATIONS WITHIN THE US THESE DOCUMENTS CONTAIN A SCOPE OF WORK AND A DETAILED BUDGET PLAN THE INDIVIDUALS/ORGANIZATIONS PREPARE AND SUBMIT INVOICES TO THE ACCOUNTING DEPARTMENT THESE INVOICES ARE REVIEWED FOR APPROPRIATENESS AND COMPLIANCE WITH ALLOWABLE/UNALLOWABLE EXPENSES THE CONTROLLER AND THE GRANTS ACCOUNTANT REVIEW THE INVOICES FOR COMPLIANCE WITH BUDGET LINE ITEMS SIGNIFICANT VARIANCES TO BUDGET ARE REVIEWED BY THE CFO AND PRINCIPAL INVESTIGATOR, AND IF DETERMINED NECESSARY, REPORTED TO THE PRIME FUNDER IN THE FORM OF A RE-BUDGET REQUEST THE CENTER'S ACCOUNTING SYSTEM TRACKS EXPENDITURES ON A PROJECT OR "AWARD" BASIS ANNUALLY, APPLICABLE SUBCONTRACT ORGANIZATIONS ARE REQUESTED TO SUBMIT THEIR A-133 REPORTS, WHICH ARE REVIEWED BY THE CFO

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 04-3005094
Name: THE WOODS HOLE RESEARCH CENTER INC

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
AMER MUSEUM NAT HISTORYCENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 10024	13-6162659	501(C)(3)	79,371				SCIENTIFIC RESEARCH
CARNEGIE INSTITUTION OF WASHINGTON1530 P ST NW WASHINGTON, DC 20005	53-0196523	501(C)(3)	20,307				SCIENTIFIC RESEARCH

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
COLUMBIA UNIVERSITY 615 W 131ST STREET ROOM 254 NEW YORK, NY 10027	13-5598093	501(C)(3)	7,264				SCIENTIFIC RESEARCH
CONSERVATION INTERNATIONAL FOUNDATION2011 CRYSTAL DRIVE SUITE 500 ARLINGTON, VA 22202	52-1497470	501(C)(3)	55,342				SCIENTIFIC RESEARCH

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
IPAM INTERNATIONAL PROGRAM3180 18TH STREET SUITE 205 SAN FRANCISCO,CA 94110	27-3444564	501(C)(3)	672,143				SCIENTIFIC RESEARCH
MARINE BIOLOGICAL LABORATORY7 MBL STREET WOODS HOLE,MA 02543	04-2104690	501(C)(3)	41,867				SCIENTIFIC RESEARCH

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
MONTANA STATE UNIV309 MONTANA HALL BOZEMAN,MT 59717	81-0302402	MONTANA UNIV SYSTEM	5,941				SCIENTIFIC RESEARCH
RESOURCE MEDIA101 MONTGOMERY ST SUITE 2600 SAN FRANCISCO,CA 94104	82-0564961	501(C)(3)	19,075				SCIENTIFIC RESEARCH

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
UNIV OF MARYLAND3112 LEE BUILDING COLLEGE PARK,MD 20742	52-6002033	UNIV SYSTEM OF MD	60,661				SCIENTIFIC RESEARCH
UNIV OF NEW HAMPSHIRE 211 MORSE HALL DURHAM,NH 03824	02-6000937	UNIV SYSTEM OF NH	9,324				SCIENTIFIC RESEARCH

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
UNIVERSITY OF TEXAS AT AUSTININNER CAMPUS DRIVE MAIN BLDG ROOM 132 AUSTIN,TX 78713	74-6000203	UNIV OF TX SYSTEM	45,929				SCIENTIFIC RESEARCH
YALE UNIVERSITY47 COLLEGE STREET SUITE 203 NEW HAVEN,CT 06510	06-0646973	501(C)(3)	14,965				SCIENTIFIC RESEARCH

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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

2012

Open to Public Inspection

Name of the organization
THE WOODS HOLE RESEARCH CENTER INC

Employer identification number
04-3005094

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 or provision of all of 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 filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ 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**	Yes	
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**		No
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 Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name and Title		(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 as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)ERIC DAVIDSON PRESIDENT/DIRECTOR	(i)	221,870	0	0	22,187	15,765	259,822	0
	(ii)	0	0	0	0	0	0	0
(2)SCOTT J GOETZ DIRECTOR/SENIOR SCIENTIST/DEPDIRECTO	(i)	181,530	0	0	18,156	7,116	206,802	0
	(ii)	0	0	0	0	0	0	0
(3)ROBERT M HOLMES DIRECTOR/SENIOR SCIENTIST	(i)	140,537	0	0	14,054	15,757	170,348	0
	(ii)	0	0	0	0	0	0	0
(4)MELANIE POWERS ASST TREASURER/DIR OF FIN	(i)	193,600	0	0	6,787	15,765	216,152	0
	(ii)	0	0	0	0	0	0	0
(5)RICHARD HOUGHTON SENIOR SCIENTIST	(i)	182,262	0	0	18,226	15,715	216,203	0
	(ii)	0	0	0	0	0	0	0
(6)JOSEF KELLNDORFER SENIOR SCIENTIST	(i)	133,762	0	0	13,379	11,665	158,806	0
	(ii)	0	0	0	0	0	0	0
(7)CAMILLE ROMANO CONTROLLER	(i)	123,093	0	0	12,309	15,699	151,101	0
	(ii)	0	0	0	0	0	0	0
(8)WILLIAM BROWN FORMER PRESIDENT/ EXECUTIVE DIRECTOR	(i)	165,000	0	0	0	0	165,000	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, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II
Also complete this part for any additional information

Identifier	Return Reference	Explanation
	PART I, LINE 4A	THE CENTER'S FORMER PRESIDENT AND EXECUTIVE DIRECTOR RECEIVED A SECOND AND FINAL SEPERATION PAYMENT IN JANUARY 2012 OF $165,000

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Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
THE WOODS HOLE RESEARCH CENTER INC

Employer identification number
04-3005094

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pool financing Yes	(i) Pool financing No
A	MASSACHUSETTS HEALTH & EDUCATION FACILITIES AUTHORITY	04-2456011	57586ELD1	08-14-2009	2,531,484	CONSTRUCTION - $603,900, CURRENT REFUNDING - $1,927,584		X		X	X	

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	458,141			
2	Amount of bonds legally defeased				
3	Total proceeds of issue	2,531,484			
4	Gross proceeds in reserve funds	19,277			
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrows	1,908,307			
7	Issuance costs from proceeds				
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	603,900			
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion	2010			

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III Private Business Use *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	%		%		%		%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	%		%		%		%	
6	Total of lines 4 and 5	%		%		%		%	
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		X						

Part IV Arbitrage

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X						
b	Exception to rebate?		X						
c	No rebate due?		X						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								

Part IV Arbitrage *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?								

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Identifier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493014007054

Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
THE WOODS HOLE RESEARCH CENTER INC

Employer identification number
04-3005094

Part I **Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . ▶ $

Part II **Loans to and/or From Interested Persons.**
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
(1) MRRL NOMINEE TRUST	TRUSTEES ARE BOARD MEMBERS OF WHRC	FINANCIAL SUPPORT	X		1,000,000	1,000,000		No	Yes		Yes	
Total		▶ $				1,000,000						

Part III **Grants or Assistance Benefitting Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV **Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V **Supplemental Information**
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493014007054

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

2012

Open to Public Inspection

Name of the organization
THE WOODS HOLE RESEARCH CENTER INC

Employer identification number
04-3005094

Identifier	Return Reference	Explanation
DESCRIPTION OF ORGANIZATION MISSION	FORM 990, PART I, LINE 1	WOODS HOLE RESEARCH CENTER (WHRC) IS A PRIVATE, NON-PROFIT RESEARCH ORGANIZATION FOCUSING ON ENVIRONMENTAL SCIENCES OUR CORE BUSINESS IS TO CONDUCT HIGH QUALITY SCIENTIFIC RESEARCH AND POLICY ANALYSIS ON MAJOR ENVIRONMENTAL AND ECONOMIC ISSUES FACING SOCIETY, SUCH AS CLIMATE CHANGE, LAND-USE CHANGE, RESOURCE LIMITATION, FOREST, SOIL AND WATER CONSERVATION, BIODIVERSITY CONSERVATION, AND HUMAN ALTERATION OF GLOBAL CYCLES OF ENERGY, WATER, CARBON, AND NUTRIENTS WE SEEK TO APPLY SCIENCE TO THE CHALLENGE OF STEWARDSHIP OF THE EARTH'S ECOSYSTEMS IN AN INCREASINGLY RESOURCE-LIMITED WORLD THIS GOAL REQUIRES BOTH A GLOBAL PERSPECTIVE AND LOCAL KNOWLEDGE OF HOW ECOSYSTEMS FUNCTION AND HOW PEOPLE BENEFIT FROM AND MODIFY THOSE ECOSYSTEMS TO THAT END, OUR SCIENTISTS COMBINE ANALYSIS OF SATELLITE IMAGES OF THE EARTH WITH FIELD STUDIES TO MEASURE, MAP, AND MODEL CHANGES IN THE WORLD'S ECOSYSTEMS AND HUMAN COMMUNITIES, FROM THE THAWING PERMAFROST IN THE ARCTIC TO THE EXPANDING AGRICULTURAL REGIONS OF THE TROPICS WE WORK LOCALLY AND REGIONALLY, WITH IN-DEPTH EXPERTISE AND COLLABORATIONS IN NORTH AND SOUTH AMERICA, AFRICA, AND ASIA WE ALSO WORK GLOBALLY, FOCUSING ON HOW HUMANS ARE CHANGING GLOBAL CYCLES OF CARBON, NUTRIENTS, AND WATER AND INDUCING CLIMATE CHANGE AND HABITAT LOSS AT A PACE AND SCALE UNPRECEDENTED IN HUMAN HISTORY WE MERGE NATURAL SCIENCE WITH SOCIAL AND ECONOMIC SCIENCE TO DISCOVER PATHS FOR HUMAN PROSPERITY AND SUSTAINABILITY OF THE EARTH'S NATURAL RESOURCES WE ARE FIRST AND FOREMOST AN INSTITUTION DEVOTED TO HIGH QUALITY SCIENTIFIC RESEARCH OUR ORIGINAL RESEARCH AND SCHOLARLY REVIEWS ARE PUBLISHED IN THE WORLD'S BEST PEER-REVIEWED SCIENTIFIC JOURNALS EQUALLY IMPORTANT TO CONDUCTING RESEARCH AND ANALYSIS IS THE COMMUNICATION OF THOSE RESULTS THE STAKEHOLDER GROUPS INTERESTED IN OUR RESULTS INCLUDE OUR PEERS IN THE SCIENTIFIC COMMUNITY, POLICY MAKERS AT LOCAL, NATIONAL, AND GLOBAL ARENAS, NGO AND PRIVATE SECTOR LEADERS, THE GENERAL PUBLIC, AND STUDENTS WE TRANSLATE THE IMPORTANCE AND RELEVANCE OF OUR SCIENCE TO NON-SCIENTIFIC AUDIENCES THROUGH TARGETED REPORTS, COMMUNITY OUTREACH, WEB SITES, AND MYRIAD OTHER VENUES WE INJECT OUR SCIENCE INTO DISCUSSIONS OF POLICY THROUGH PROCESSES SUCH AS THE UNITED NATIONS FRAMEWORK CONVENTION ON CLIMATE CHANGE (UNFCCC), THE INTERGOVERNMENTAL PANEL ON CLIMATE CHANGE (IPCC), THE U S NATIONAL ACADEMY OF SCIENCES, THE INTERNATIONAL NITROGEN INITIATIVE, AND MANY OTHERS, INCLUDING PARTICIPATION OF OUR SCIENCE AND POLICY EXPERTS IN NATIONAL AND INTERNATIONAL SYMPOSIA AND WORKSHOPS WE PROMOTE EDUCATION AND CAPACITY BUILDING THROUGH UNDERGRADUATE INTERNSHIP PROGRAMS, MENTORING OF GRADUATE STUDENTS, TRAINING WORKSHOPS AT HOME AND ABROAD, AND DISTRIBUTION OF OUR OUTREACH MATERIALS THROUGH A WIDE RANGE OF VENUES THE IMPACT OF OUR WORK IS MULTIPLIED BY THOSE WHO RECEIVE TRAINING AS THEY PARTNER WITH US TO CARRY OUT OUR CORE BUSINESS A KEY INGREDIENT TO "PUNCHING ABOVE OUR WEIGHT" IS TO CREATE A BROAD INTERNATIONAL NETWORK OF COLLABORATORS AND PARTNERS WHO CARRY ON THEIR RELATED WORK AND WHO VALUE OUR WORK BECAUSE DEVELOPING AND EMERGING MARKET COUNTRIES ARE BOTH VULNERABLE TO AND STRONGLY AFFECTING GLOBAL CHANGE, CREATING PARTNERSHIPS FOR CAPACITY BUILDING FOR ENVIRONMENTAL SCIENCE AND POLICY IS NEEDED FOR OUR RESEARCH PRODUCTS TO BE MOST EFFECTIVELY USED
	FORM 990, PART VI, SECTION A, LINE 2	THE DEPUTY DIRECTOR, WHO IS ALSO A BOARD MEMBER IS MARRIED TO AN ASSOCIATE SCIENTIST/PRINCIPAL INVESTIGATOR AT THE CENTER
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PREPARED BY THE CENTER'S INDEPENDENT ACCOUNTANTS AND SUBMITTED TO THE VICE PRESIDENT AND DIRECTOR, FINANCE AND ADMINISTRATION AS WELL AS THE CONTROLLER FOR GENERAL REVIEW THE BOARD FINANCE COMMITTEE THEN REVIEWS THE FORM 990 PRIOR TO SUBMISSION THE FORM 990 WILL CONTINUE TO BE SUBMITTED TO THE FULL BOARD PRIOR TO FILING
	FORM 990, PART VI, SECTION B, LINE 12C	REPORTED CONFLICTS ARE REVIEWED AND ADDRESSED AS NEEDED ON AN INDIVIDUAL BASIS WITH FURTHER DISCLOSURE AND/OR RECUSAL OF INDIVIDUALS FROM DECISION MAKING AS APPROPRIATE.
	FORM 990, PART VI, SECTION B, LINE 15	IN ESTABLISHING THE COMPENSATION LEVEL FOR THE EXECUTIVE DIRECTOR, THE EXECUTIVE/COMPENSATION COMMITTEE OF THE BOARD USES AN EMPLOYMENT ATTORNEY TO ASSIST WITH STRUCTURE, GATHERS COMPARABILITY DATA FROM GUIDESTAR, COMMITTEE EXPERIENCE AND THE ATTORNEY, CONSIDERS THE INDIVIDUAL'S COMPENSATION HISTORY AND EXPERIENCE AND MAKES A RECOMMENDATION THAT IS DOCUMENTED AND VALIDATED BY E-MAIL FROM TIME TO TIME THE ORGANIZATION ENGAGES AN OUTSIDE FIRM TO COMPLETE COMPENSATION SURVEYS TO ENSURE THAT LINE POSITIONS ARE COMPETITIVE AND COMPARABLE. FOR CERTAIN SENIOR POSITIONS THE ORGANIZATION MAY ALSO USE A SEARCH FIRM OR EMPLOYMENT ATTORNEY TO HELP ESTABLISH APPROPRIATE COMPENSATION LEVELS
	FORM 990, PART VI, SECTION C, LINE 19	THE CENTER'S FINANCIAL STATEMENTS ARE AVAILABLE BY REQUEST, AND ON OUR WEBSITE (WHRC ORG) THE CENTER DOES NOT GENERALLY MAKE AVAILABLE ITS GOVERNANCE DOCUMENTS OR ITS CONFLICT OF INTEREST POLICY
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -7,593
	FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR