



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

OMB No 1545-0052

2013

Open to Public Inspection

For calendar year 2013 or tax year beginning

, and ending

Name of foundation ATLANTIS BLUE PROJECT FOUNDATION, INC. F/K/A KERZNER MARINE FOUNDATION, INC.		A Employer identification number 34-2045752						
Number and street (or P.O. box number if mail is not delivered to street address) 1000 SOUTH PINE ISLAND ROAD	Room/suite 800	B Telephone number 954-809-2000						
City or town, state or province, country, and ZIP or foreign postal code PLANTATION, FL 33324		C If exemption application is pending, check here <input type="checkbox"/>						
G Check all that apply: <table border="0"> <tr> <td><input type="checkbox"/> Initial return</td> <td><input type="checkbox"/> Initial return of a former public charity</td> </tr> <tr> <td><input type="checkbox"/> Final return</td> <td><input type="checkbox"/> Amended return</td> </tr> <tr> <td><input type="checkbox"/> Address change</td> <td><input checked="" type="checkbox"/> Name change</td> </tr> </table>		<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<input type="checkbox"/> Address change	<input checked="" type="checkbox"/> Name change	D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity							
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return							
<input type="checkbox"/> Address change	<input checked="" type="checkbox"/> Name change							
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>						
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 418,843. (Part I, column (d) must be on cash basis)	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>						

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received		250,182.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		21.	21.		STATEMENT 1
4 Dividends and interest from securities					
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10					
b Gross sales price for all assets on line 6a					
7 Capital gain net income (from Part IV, line 2)			0.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		250,203.	21.		
13 Compensation of officers, directors, trustees, etc		0.	0.		0.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees					
c Other professional fees STMT 2		65,597.	0.		65,597.
17 Interest					
18 Taxes					
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings		5,769.	0.		5,769.
22 Printing and publications					
23 Other expenses STMT 3		19,780.	0.		19,780.
24 Total operating and administrative expenses. Add lines 13 through 23		91,146.	0.		91,146.
25 Contributions, gifts, grants paid		295,440.			209,963.
26 Total expenses and disbursements. Add lines 24 and 25		386,586.	0.		301,109.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		<136,383.>			
b Net investment income (if negative, enter -0-)			21.		
c Adjusted net income (if negative, enter -0-)				N/A	

323501
10-10-13

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2013)

SCANNED DEC 02 2014

R 13

ATLANTIS BLUE PROJECT FOUNDATION, INC.

F/K/A KERZNER MARINE FOUNDATION, INC.

34-2045752

Page 2

Form 990-PF (2013)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash - non-interest-bearing	376,251.	342,194.	342,194.	
	2 Savings and temporary cash investments				
	3 Accounts receivable ▶				
	Less: allowance for doubtful accounts ▶				
	4 Pledges receivable ▶				
	Less: allowance for doubtful accounts ▶				
	5 Grants receivable	66,515.	76,649.	76,649.	
	6 Receivables due from officers, directors, trustees, and other disqualified persons				
	7 Other notes and loans receivable ▶				
	Less: allowance for doubtful accounts ▶				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments - U.S. and state government obligations				
	b Investments - corporate stock				
	c Investments - corporate bonds				
		11 Investments - land, buildings, and equipment basis ▶			
Less: accumulated depreciation ▶					
12 Investments - mortgage loans					
13 Investments - other					
14 Land, buildings, and equipment, basis ▶					
Less: accumulated depreciation ▶					
15 Other assets (describe ▶)					
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item 1)		442,766.	418,843.	418,843.	
Liabilities		17 Accounts payable and accrued expenses	1,271.	113,731.	
		18 Grants payable			
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ▶)				
	23 Total liabilities (add lines 17 through 22)	1,271.	113,731.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>				
	27 Capital stock, trust principal, or current funds	0.	0.		
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
	29 Retained earnings, accumulated income, endowment, or other funds	441,495.	305,112.		
	30 Total net assets or fund balances	441,495.	305,112.		
	31 Total liabilities and net assets/fund balances	442,766.	418,843.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	441,495.
2 Enter amount from Part I, line 27a	2	<136,383.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	305,112.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	305,112.

Form 990-PF (2013)

ATLANTIS BLUE PROJECT FOUNDATION, INC.

Form 990-PF (2013)

F/K/A KERZNER MARINE FOUNDATION, INC.

34-2045752

Page 3

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	NONE		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6).	<div> <div>If gain, also enter in Part I, line 8, column (c).</div> <div>If (loss), enter -0- in Part I, line 8</div> </div>	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2012	431,145.	438,542.	.983133
2011	375,824.	292,266.	1.285897
2010	432,273.	139,162.	3.106257
2009	392,835.	213,029.	1.844045
2008	722,674.	445,236.	1.623126

2 Total of line 1, column (d)	2	8.842458
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	1.768492
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5	4	359,128.
5 Multiply line 4 by line 3	5	635,115.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7 Add lines 5 and 6	7	635,115.
8 Enter qualifying distributions from Part XII, line 4	8	301,109.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.
See the Part VI instructions.

ATLANTIS BLUE PROJECT FOUNDATION, INC.

F/K/A KERZNER MARINE FOUNDATION, INC.

34-2045752

Page 4

Form 990-PF (2013)

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	0.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0.
6	Credits/Payments:		
a	2013 estimated tax payments and 2012 overpayment credited to 2013	6a	
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	0.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be. Credited to 2014 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> FL		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Form 990-PF (2013)

ATLANTIS BLUE PROJECT FOUNDATION, INC.

F/K/A KERZNER MARINE FOUNDATION, INC.

Form 990-PF (2013)

34-2045752

Page 5

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► BLUEPROJECTATLANTIS.COM	13	X	
14	The books are in care of ► CARA TRIPP Telephone no. ► 954-809-2684 Located at ► 1000 S. PINE ISLAND ROAD, STE 800, PLANTATION, FL ZIP+4 ► 33324			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	1b	X
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ►		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.) N/A	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b	X

Form 990-PF (2013)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?**6b****X**

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
GEORGE MARKANTONIS 1000 S. PINE ISLAND RD, SUITE 800 PLANTATION, FL 33324	PRESIDENT 0.25	0.	0.	0.
MARK GSELLMAN 1000 S. PINE ISLAND RD, SUITE 800 PLANTATION, FL 33324	VICE PRESIDENT AND SECRETARY 0.25	0.	0.	0.
CARLOS HERNANDEZ 1000 S. PINE ISLAND RD, SUITE 800 PLANTATION, FL 33324	TREASURER 0.25	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000**0**

Part VIII

Information About Officers, Directors, Trustees, Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

[illegible]**Total** number of others receiving over \$50,000 for professional services

0

Total number of callers receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1	N/A	
2		
3		
4		

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1	N/A	
2		
	All other program-related investments. See instructions.	
3		

Total. Add lines 1 through 3

0.

ATLANTIS BLUE PROJECT FOUNDATION, INC.

F/K/A KERZNER MARINE FOUNDATION, INC.

Form 990-PF (2013)

34-2045752

Page 8

Part X**Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	364,597.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	364,597.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	364,597.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,469.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	359,128.
6	Minimum investment return. Enter 5% of line 5	6	17,956.

Part XI**Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	17,956.
2a	Tax on investment income for 2013 from Part VI, line 5	2a	
b	Income tax for 2013. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	17,956.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	17,956.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	17,956.

Part XII**Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	301,109.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	301,109.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	301,109.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2013)

ATLANTIS BLUE PROJECT FOUNDATION, INC.

Form 990-PF (2013)

F/K/A KERZNER MARINE FOUNDATION, INC.

34-2045752

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				17,956.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008	700,412.			
b From 2009	382,184.			
c From 2010	425,315.			
d From 2011	361,593.			
e From 2012	409,219.			
f Total of lines 3a through e	2,278,723.			
4 Qualifying distributions for 2013 from Part XII, line 4: ► \$	301,109.			
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2013 distributable amount				17,956.
e Remaining amount distributed out of corpus	283,153.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:	2,561,876.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008 not applied on line 5 or line 7	700,412.			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	1,861,464.			
10 Analysis of line 9:				
a Excess from 2009	382,184.			
b Excess from 2010	425,315.			
c Excess from 2011	361,593.			
d Excess from 2012	409,219.			
e Excess from 2013	283,153.			

ATLANTIS BLUE PROJECT FOUNDATION, INC.

Form 990-PF (2013)

F/K/A KERZNER MARINE FOUNDATION, INC.

34-2045752 Page 11

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution **	Amount
a Paid during the year				
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE ARLINGTON, VA 22203		PC	ENHANCE CORAL REEF MANAGEMENT, MONITORING AND RESEARCH IN THE AREAS OF NEW PROVIDENCE, ROSE AND	45,009.
BAHAMAS REEF ENVIRONMENT EDUCATIONAL FOUNDATION ("BREEF") BUILDING 4, UNIT 1, CAVES VILLAGE, WEST BAY NASSAU, BAHAMAS		PF	INCREASE AWARENESS OF THE MECHANISM, CAUSES, IMPACTS OF CLIMATE CHANGE AND TO ENCOURAGE STAKEHOLDERS	30,000.
PERRY INSTITUTE FOR MARINE SCIENCE 100 NORTH US HWY 1, SUITE 202 JUPITER, FL 33477		PC	CONDUCT CORAL REEF MONITORING AND RESTORATION IN THE BAHAMAS	100,011.
THE BAHAMAS NATIONAL TRUST THE RETREAT, VILLAGE ROAD NASSAU, BAHAMAS		PC	FUND THE NAVIGATOR LEVEL OF THE DISCOVERY CLUB PROGRAM WHICH WILL EQUIP MEMBERS FROM THE AGES OF 13	20,000.
THE LOW COUNTRY INSTITUTE 40 MOBLEY OAKS LN OKATIE, SC 29909		PC	FUND THE BOTTLENOSE DOLPHIN HEALTH AND RISK ASSESMENT PROJECT	5,200.
Total	SEE CONTINUATION SHEET(S)			209,963.
b Approved for future payment				
BAHAMAS MARINE MAMMAL RESEARCH ORGANISATION P.O. BOX AB-20714 MARSH HARBOUR, BAHAMAS		PC	STRANDING RESPONSE TO SUPPORT CONSERVATION OF MARINE MAMMALS IN THE BAHAMAS.	35,423.
BAHAMAS MARINE MAMMAL RESEARCH ORGANISATION P.O. BOX AB-20714 MARSH HARBOUR, BAHAMAS		PC	FIELD RESEARCH AND OUTREACH TO SUPPORT CONSERVATION OF MARINE MAMMALS IN THE BAHAMAS	50,054.
Total				85,477.

F/K/A KERZNER MARINE FOUNDATION, INC.

Form 990-PF (2013)

34-2045752

Page 13

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | |
|--|-------------------|
| <p>1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p>a Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p>b Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p> | <p>Yes</p> |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)		X
1b(4)		X
1b(5)		X
1b(6)		X
1c		X

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign
Here**

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 taxpayer) is based on all information of which preparer has any knowledge.

Carlos Hernandez
Signature of officer or trustee

11/12/14
Date

TREASURER

May the IRS discuss this return with the preparer shown below (see part 1)?

☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature

Date _____

Check ☐ if
self-employed

PTIN

JANICE A. RATICA

Firm's name ► **CHERRY BEKAERT LLP**

Firm's address ► 1111 METROPOLITAN AVE. STE. 1000
CHARLOTTE, NC 28204

Phone no. **704-377-1678**

Form **990-PF** (2013)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization

ATLANTIS BLUE PROJECT FOUNDATION, INC.
F/K/A KERZNER MARINE FOUNDATION, INC.

Employer identification number

34-2045752

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

ATLANTIS BLUE PROJECT FOUNDATION, INC.
F/K/A KERZNER MARINE FOUNDATION, INC.

Employer identification number

34-2045752

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BREF BAHAMAS, LTD. ONE CASINO DRIVE PARADISE ISLAND, BAHAMAS	\$ 245,043.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	QUALEX, INC. 4020 STIRRUP CREEK DR., SUITE 100 DURHAM, NC 27703	\$ 5,139.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

ATLANTIS BLUE PROJECT FOUNDATION, INC.
F/K/A KERZNER MARINE FOUNDATION, INC.

Employer identification number

34-2045752

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

ATLANTIS BLUE PROJECT FOUNDATION, INC.
F/K/A KERZNER MARINE FOUNDATION, INC.

Employer identification number

34-2045752

Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**ATLANTIS BLUE PROJECT FOUNDATION, INC.
F/K/A KERZNER MARINE FOUNDATION, INC.**

34-2045752

Part XV . Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SEA TURTLE CONSERVANCY 4424 NW 13 ST., SUITE B-11 GAINSVILLE, FL 32609		PC	SPONSOR A SEA TURRTLE	9,743.
Total from continuation sheets				9,743.

ATLANTIS BLUE PROJECT FOUNDATION, INC.
F/K/A KERZNER MARINE FOUNDATION, INC.

34-2045752

Part XV . Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - THE NATURE CONSERVANCY

ENHANCE CORAL REEF MANAGEMENT, MONITORING AND RESEARCH IN THE AREAS OF
NEW PROVIDENCE, ROSE AND PARADISE ISLAND

NAME OF RECIPIENT - BAHAMAS REEF ENVIRONMENT EDUCATIONAL FOUNDATION

("BREEF")

INCREASE AWARENESS OF THE MECHANISM, CAUSES, IMPACTS OF CLIMATE CHANGE
AND TO ENCOURAGE STAKEHOLDERS TO TAKE ACTION ON A PERSONAL AND/OR
INSTITUTIONAL LEVEL TO REDUCE THEIR CONTRIBUTION TO OR ADAPT TO THE
POTENTIAL IMPAGES OF CLIMATE CHANGE.

NAME OF RECIPIENT - THE BAHAMAS NATIONAL TRUST

FUND THE NAVIGATOR LEVEL OF THE DISCOVERY CLUB PROGRAM WHICH WILL EQUIP
MEMBERS FROM THE AGES OF 13 -25 WITH VALUABLE KNOWLEDGE AND SKILLS THAT
WILL PREPARE THEM FOR THEIR TERTIARY STUDIES OR FUTURE CAREERS.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST INCOME	21.	21.	
TOTAL TO PART I, LINE 3	21.	21.	

FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL FEES	65,597.	0.		65,597.
TO FORM 990-PF, PG 1, LN 16C	65,597.	0.		65,597.

FORM 990-PF OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TELEPHONE	3,253.	0.		3,253.
COURIER	552.	0.		552.
OFFICE SUPPLIES	15,975.	0.		15,975.
TO FORM 990-PF, PG 1, LN 23	19,780.	0.		19,780.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 4

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

GRANT SUBMISSION, ATLANTIS BLUE PROJECT FOUNDATION, INC.
1000 S PINE ISLAND RD, STE 800
PLANTATION, FL 33324

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

954-809-2000

GRANT SUBMISSION, ATLANTIS BLUE PROJECT FOUNDATION,
INC.

EMAIL ADDRESS

N/A

FORM AND CONTENT OF APPLICATIONS

PLEASE SEE ATTACHED.

ANY SUBMISSION DEADLINES

APPLICATIONS ARE ACCEPTED TWICE A YEAR: APRIL 15TH AND SEPTEMBER 15TH.

RESTRICTIONS AND LIMITATIONS ON AWARDS

PRIORITY WILL BE PLACED ON PROJECTS THAT INCLUDE THE DEVELOPMENT AND
MANAGEMENT OF MARINE PROTECTED AREAS, CORAL REEF PROTECTION, AND MARINE
MAMMAL, SEA TURTLE, AND SHARK CONSERVATION AND RESEARCH IN THE CARIBBEAN.

Atlantis Blue Project Foundation Grant Submission Guidelines 2012-2015

Strategy

The strategic focus of Atlantis Blue Project Foundation (ABPF) is protecting the integrity of tropical marine ecosystems that are becoming increasingly threatened due to overexploitation and overpopulation. The Foundation seeks applications for programs that will produce specific and measurable results related to ABPF's program strategy within a one- to three-year timeframe. Priority will be placed on projects that include the development and management of marine protected areas; coral reef protection; and marine mammal, sea turtle, and shark conservation and research in the Caribbean.

Conservation success ultimately depends on the capacity of local individuals and organizations and a thorough understanding of the effect of globalization on the region. To protect the world's most biologically diverse aquatic areas, poverty and the expansion of extractive industries must be addressed. Thus we encourage our applicants to partner with organizations whose areas of expertise will complement their conservation and research proficiency including those that specialize in poverty alleviation, enterprise development, conflict management, capacity building, and food security. The success of conservation programs also relies on research that generates results that are applicable to solving complex conservation questions. We recommend that scientists involve local NGOs, universities, and/or research facilities in-situ in their research programs. This type of collaboration and mentoring will help build the capacity of the local people and develop a mechanism to share findings.

Program Focus

1) Coral Reefs

Problem Statement: Coral reefs are the most biologically diverse marine ecosystem.

Unfortunately it is estimated that more than 60% of reefs are jeopardized due to human impacts including overfishing and pollution. A report released by the World Resources Institute has found that in the Caribbean alone, two thirds of coral reefs are threatened and one third is vulnerable to coastal development. Poor management practices make coral reef habitats even more susceptible to human influence. In addition, many local communities living adjacent to reefs have limited access to economic opportunities that leads to their increasing reliance on coral reef resources and further reef degradation. To reduce pressure on coral reefs, local communities must have access to more short- and long-term economic alternatives. If local communities have food security and their basic needs are met, they are much more likely to be receptive to conservation efforts.

Potential Conservation Activities

- Addressing and managing human-caused threats to coral reef viability including sediment runoff, overfishing, coastal development, tourism, pollution, cruise ship waste, sewage discharge, and destructive fishing practices
- Employing multiple strategies to manage coral reef resources
- Monitoring water quality
- Building local capacity to manage coral reef ecosystems

- Facilitating the inclusion of all stakeholders in the development of management plans
- Developing strategies for growing and reintroducing coral

Potential Research Activities

- Studying the effects of coral bleaching
- Documenting the spread of coral diseases
- Mapping impacts
- Identifying and protecting spawning aggregations
- Improving habitat quality in degraded areas

2) Marine Protected Areas

Problem Statement: Population explosion and the resulting unrelenting demand for more natural resources is leading to the unprecedented loss of biodiversity, the disappearance and fragmentation of habitat, an increase in invasive species, and climate change. All of these threats are placing increasing burdens on our remaining wild areas as well as unprecedented stress on areas already "preserved." Creating, implementing, and managing Marine Protected Areas (MPAs) is one strategy that can be used in concert with other conservation practices to protect marine ecosystems.

Potential Conservation Activities

- Promoting the creation of a network of marine protected areas
- Establishing marine protected areas
- Developing MPA management plans
- Creating MPA zoning strategies
- Identifying and addressing impacts of coastal land use on adjacent waters
- Building the capacity for marine ecosystem management
- Ensuring MPA sustainability
- Facilitating stakeholder involvement in MPAs

Potential Research Activities

- Creating and documenting the effects of no-take zones
- Prioritizing areas to receive protection
- Analyzing the social and economic impact of MPAs
- Monitoring and evaluating resource management success

3) Marine Mammals, Sea Turtles, and Sharks

Problem Statement: Despite years of research and conservation work, relatively little is known about the more than 80 species of whales and dolphins due to difficulty in studying them in the wild. Sea turtles and sharks are also challenging to study. Yet these marine species are affected by a multitude of threats including entanglement in fishing gear, pollution, habitat destruction, collisions with ships, and overfishing. Some species are nearing extinction. And in some areas, local populations of some species are threatened or have entirely disappeared. Basic research still needs to be conducted and political, social, and economical factors that affect marine mammals, sea turtles, and sharks must be continually analyzed and addressed.

Potential Conservation Activities

- Identifying areas of habitat destruction
- Creating marine protected areas

- Studying the effects of overfishing on populations
- Establishing collaborative conservation plans

Potential Research Activities

- Assessing population sizes
- Monitoring health hazards
- Establishing accurate take levels
- Determining range and migration patterns
- Identifying feeding patterns

Conservation Approach

Within each focus areas, the following approaches should be considered:

- Field research
- Mapping and monitoring
- Sustainable development
- Public outreach
- Education programs
- Restoration
- Science-based advocacy
- Governance
- Capacity building

Program Parameters

ABPF expects applicants to specify how, under their proposed activities, they will promote achievement of the results proposed. A successful proposal will address the following key areas.

1. Focus on in-situ efforts to conserve habitats and populations within the Caribbean
2. Create results-oriented programs offering measurable results within one to three years or generate scientific findings with conservation applicability
3. Demonstrate local support
4. Partner with local NGOs, universities, local communities, and/or the private sector to transfer scientific findings and/or conservation skills or to leverage resources
5. Offer sound implementation plans, including a strategy for ensuring sustainability of the conservation effort or conservation applicability of research results
6. Develop and implement a conservation education program that will help lead to the development of a conservation ethic in the participants

Application Guidelines

Applications should be in an 8 1/2" x 11" format, single-spaced, with a minimum of 10-point type.

The submission should include the following sections:

- 1) **Cover page:** One page maximum. State title of project. Include the name and URL for the institution(s) involved in the proposal as well as the contact person from each organization along with their title, address, phone number, fax number, and email address. Program Director/Principal Investigator should sign the cover page.
- 2) **Abstract:** Two pages maximum. Give a brief overview of your organization(s) and summarize the key points of your program/research/education program including statement of need, strategy, and methodology as well as implementation and evaluation plans.

3) **Program/Research Description:** Twenty pages maximum. Include your statement of need, goal, strategy, objectives, approach, and measurable outcomes. Discuss how you will interface with the local community and local and/or national government officials.

4) **Institutional Capacity:** Three pages maximum. Demonstrate your team and organization's technical and management expertise in grant and project management including examples from success in other projects. Include a summary of your organization's expertise, past accomplishments creating and implementing similar initiatives, and your team's breadth of expertise in areas relevant to the project.

5) **Project Team:** Include a resume (not to exceed two pages) and job description (not to exceed one page) for key project personnel/researchers. One person must be identified as the Program Director/Principal Investigator.

6) **Past Performance References:** Three pages maximum. Include a table that lists the organizations that have funded similar work over the last five years. Include the funder's contact information (program officer, phone number, address, and email address), grant name, amount received, and a brief summary of the program objectives and results.

7) **Management and Implementation Plan:** Two pages maximum. Explain the organizational structure and staffing plan. If applicable, include all management and technical support to be received from the headquarters office. Review areas of authority and responsibility and if applicable, how partners will interact. Discuss how you will ensure timely implementation of your program/research and describe your internal procedures to ensure the early recognition and resolution of issues that would impede the progress of your work.

8) **Evaluation Plan:** Two pages maximum. Propose a performance monitoring and evaluation plan that demonstrates your strategy for ensuring results.

9) **Project Budget:** Provide a budget for each project year with accompanying budget narrative. ABPF requires organizations with annual budgets of more than \$500,000 to provide a minimum of a 20% project match.

a. **Direct Labor:** Direct salaries for each individual involved with the project. Anticipated yearly salary increases should be included.

b. **Fringe Benefits:** Based on the organization's audited fringe benefit rate.

c. **Consultants:** Include fees and travel.

d. **Supplies and Equipment**

e. **Travel:** Include the number of trips, individuals travelling, origin and destinations, and cost of each destination. Include per diem if applicable.

f. **Other Direct Costs:** Includes costs such as visas, passports, and evacuation insurance. All items should be explained in the budget narrative.

g. **Subgrantees:** If partnering on this grant, each partner should include a complete separate budget with accompanying budget narrative.

10) **Audited Financial Statement:** Please include your organization's last audited financial statement

11) **Charitable Status:** Include a copy of your country's non-profit determination letter.

ABPF will not fund:

- Litigation
- Political activities
- Fund raising
- Scholarships
- Endowments
- University overhead costs

Additional Application Guidelines

- 1) Keep the submission simple. Elaborate presentations are not desired.
- 2) Only submit the materials requested. Videos, CDs, and other collateral will not be reviewed.
- 3) All applications become property of Atlantis Blue Project Foundation.

Submission Directions

Completed applications should be emailed to the Executive Director at debra.erickson@atlantisparadise.com. Nonsolicited applications will not be reviewed.

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file) - You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print	Name of exempt organization or other filer, see instructions	Enter filer's identifying number
File by the due date for filing your return. See instructions	ATLANTIS BLUE PROJECT FOUNDATION, INC. F/K/A KERZNER MARINE FOUNDATION, INC.	Employer identification number (EIN) or 34-2045752
	Number, street, and room or suite no. If a P.O. box, see instructions 1000 SOUTH PINE ISLAND ROAD, NO. 800	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PLANTATION, FL 33324	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

CARA TRIPP

- The books are in the care of ► **1000 S. PINE ISLAND ROAD, STE 800 - PLANTATION, FL 33324**

Telephone No ► **954-809-2684**

Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2014**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ☒ calendar year **2013** or
- ☐ tax year beginning _____, and ending _____

- 2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return
- ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. ATLANTIS BLUE PROJECT FOUNDATION, INC. F/K/A KERZNER MARINE FOUNDATION, INC.	Employer identification number (EIN) or 34-2045752
	Number, street, and room or suite no. If a P.O. box, see instructions 1000 SOUTH PINE ISLAND ROAD, NO. 800	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PLANTATION, FL 33324	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

CARA TRIPP

- The books are in the care of **1000 S. PINE ISLAND ROAD, STE 800 - PLANTATION, FL 33324**

Telephone No. **954-809-2684**

Fax No.

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2014**.

5 For calendar year **2013**, or other tax year beginning , and ending

6 If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

**ADDITIONAL TIME IS REQUIRED IN ORDER TO GATHER THE INFORMATION
NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.**

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature

Title **TREASURER**

Date