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Form 990"

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2014

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except private foundations)

, 2014, and ending

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

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Department of the Treasury Internal Resenue Service

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

A F	or the	2014 calendar year, or tax year beginning , 2014,	and end			, 20
		C Name of organization			D Employer iden	ntification number
B ch	ech if appli	SEA SHEPHERD CONSERVATION SOCIETY			93-0792	2021
X	Address	Doing business as				
	Mame of	Number and street (or P O box if mail is not delivered to street address)	Room/sulte		E Telephone nun	mber
	et fattin]	2020 PARTINE AVENUE PART 45		1	(212) 220	0-2302
-	Firm) set	City or town, state or province, country, and ZIP or foreign postal code				
X	terminal Amende	ig] .	G Gross receipt	u \$ 7,610,927.
 	return Applicat	F Name and address of principal officer: SAME AS ABOVE			H(s) is this a grou	
_	j pensing			- 1	Subordinates: H(b) Are all subordi	
	Fay.ava	npt status: X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) c	nr 1	527	• •	ch a list. (see instructions)
		· ► SEASHEPHERD. ORG	<u>- </u>		H(c) Group exemp	
		organization: Corporation Trust Association Other	L Yea			State of legal domicile: WA
			15.00	0		
Ρĕ	rtI	Summary Briefly describe the organization's mission or most significant activities: MARINE	WILDI	TEE CO	NSERVATI	ON TO END THE
	1 8	DESTRUCTION OF HABITAT AND SLAUGHTER OF WILDLIFE	TN THE	WORL	715	20112-002-100
윌		OCEANS IN ORDER TO CONSERVE AND PROTECT ECOSYSTEM				
Ē						
Activities & Governance		Check this box if the organization discontinued its operations or dispose				1 1 -
Ğ		Number of voting members of the governing body (Part VI, line 1a)				3 3.
32		Number of independent voting members of the governing body (Part VI, fine 1b)				5 19.
ě	_	Total number of individuals employed in calendar year 2014 (Part'V, line 2a)				}
ŧ		Total number of volunteers (estimate if necessary)				
•		Total unrelated business revenue from Part VIII, column (C), line 12				
	b (Net unrelated business taxable income from Form 990-T, line 34	••••		Prior Year	Current Year
] _			<u> </u>	3,920,41	
3	1	Contributions and grants (Part VIII, line 1h)			13,42	
Revenue		Program service revenue (Part VIII, line 2g)			241,35	
á	1	investment Income (Part VIII, column (A), lines 3, 4, and 7d)			381,69	
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			4,556,87	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).			2,760,98	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			2,700,90	86. 627,185. 0
		Benefits paid to or for members (Part IX, column (A), line 4)			840,96	
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).			840,30	0 1,014,237.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		•		
X	b	Lotal Landing and alternation for mit and anatomic facilities anatomic facilities and anatomic facilit	?:		2,670,46	60. 5,215,087.
_	117	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		•	6,272,41	
	18	Total expenses. Add lines 13-17 (must equal Part X, column 14) the 25		··├──	-1,715,53	
-	1.0	November 1030 experience.	761	Benin	ning of Current	
sets or		Total assets (Part X, line 16)	\text{\tin}\text{\tint{\text{\teil}\text{\te}\}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\}\tittt{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\tinz{\text{\text{\texi}\text{\text{\texi}\text{\text{\texi}\til\text{\text{\text{\text{\text{\texi}\text{\texi}\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\texi}\text{\	338	3,245,14	
Asse	20	184	· - 🖏 · ·	· ·	399,4	
\$ 5 5 5 5	21	Total liabilities (Part X, line 26)	~ (출)··	· •	2,845,7	
Ž		Net assets or fund balances. Subtract line 21 from line 20. @@@EN, U.T.			2,043,7.	32.1 -723/433
ينا	art II	Signature Block	tulne and ct	atomonis a	and to the host o	of my knowledge and holid at i
tn	ie, come	names of periody. I dockre that I have examined this return, including accompanying scheool, and complete Declaration of prepare (other than officer) is based on all information of wi	nich prepare	r has any k	nowledge.	
		ile lester				3-17-16
SI	gn	Signature of officer			Date	
	3re		1000			
•••		Type or print name and title	JABIN			
		Print/Type preparer's name Preparer's signature	Date		To	, PTIN
Pa	ld			6 2011	Check self-emplo	- J "
	eparer	LORI L SCOTT		A 1 P A 1 (T	91-1501421
	e Only	Firm's name ▶BADER MARTIN, P.S.	 	206-621-1900		
==		RS discuss this return with the preparer shown above? (see instructions)			Phone no	1.2
				••••	 	Form 990 (2014
Fo	r Pape	rwork Reduction Act Hotice, see the separate instructions.				Form 330 (2014

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PAGE 2



SEA SHEPHERD CONSERVATION SOCIETY

1

P	m 990 (2014) Page 4
-	art III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	MARINE WILDLIFE CONSERVATION TO END THE DESTRUCTION OF HABITAT AND
	SLAUGHTER OF WILDLIFE IN THE WORLD'S OCEANS IN ORDER TO CONSERVE AND
	PROTECT ECOSYSTEMS AND SPECIES
	PROTECT ECOSTSTEMS AND SPECIES
_	
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?X 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? X Yes No
	If "Yes," describe these changes on Schedule O.
4	
•	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.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code) (Expenses \$, 202 including grants of \$) (Revenue \$)
	THREE NEW SHIPS WERE ACQUIRED IN 2014: THE MARTIN SHEEN, FARLEY
	MOWAT AND JULES VERNE.
46	(Code:) (Expenses \$ 1,704,689. including grants of \$) (Revenue \$)
40	
	LEGAL CAMPAIGN: DUE TO SEA SHEPHERD USA'S ONGOING EFFECTIVENESS
	AND SUCCESS, WE HAVE ATTRACTED SOME FORMIDABLE OPPONENTS. IN 2014,
	WE DEALT WITH A NUMBER OF LEGAL CHALLENGES DESIGNED TO THWART OUR
	CONSERVATION EFFORTS. WE ALSO UNDERTOOK EFFORTS TO PROACTIVELY
	DEFEND OUR CLIENTS - THE WHALES, DOLPHINS, SHARKS, SEALS, TURTLES,
	FISH AND OTHER SPECIES OF OCEAN WILDLIFE - ON THE LEGAL FRONT AS
	WELL AS ON THE HIGH SEAS. SEA SHEPHERD USA RECOGNIZES THAT THE
	WELL AS ON THE HIGH SEAS. SEA SHEPHERD USA RECOGNIZES THAT THE
	EFFORT TO PROTECT THE IMPERILED OCEANS MUST ALSO TAKE PLACE IN THE
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Part	IV Checklist of Required Schedules			-3
•			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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	<u>. </u>	X
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		Х
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,		i	
	Part III	5		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
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		X
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1	4	\$ 1.7 %
	VII, VIII, IX, or X as applicable.	Same and the		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
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		X
С	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	_	Х
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		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a	X	
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		<u> X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
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	اا		
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	<u>14b</u>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or		J	
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			v
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	, ,		v
10	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.	х	
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	^	
13	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	ļ	Х
20~	If "Yes," complete Schedule G, Part III	20a		- <u>X</u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
<u> </u>	in 165 to line 204, did the diganization attach a copy of its addited infancial statements to this feturi?		990 /	(2014)

Part	Checklist of Required Schedules (continued)			
•			Yes	No
21	$ \hbox{ Did the organization report more than $5,000 of grants or other assistance to any domestic organization or } \\$			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	$ \hbox{Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on } \\$			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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		X
24 a	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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		X
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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part N	28b		Х
С	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
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		X
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		X
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		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	_	
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		Х
				ı
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	Х	

Page	e 5	i

The Check if Schedule O contains a response or note to any line in this Part V	Par	Statements Regarding Other IRS Filings and Tax Compliance			
to Enter the number reported in Box 3 of Form 1096. Enter -0-If not applicable.		Check if Schedule O contains a response or note to any line in this Part V	<u></u>		. X
b Enter the number of Forms W-26 included in line 1 a Enter-o-if not applicable,				Yes	No
C bid the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2 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 3 bif at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required and 2 as a service of the young and 2 as a service of the federal and 2 as a service of the sum of 2 as a service of the young and 2 as a service of the federal and 2 as a service of the sum of 2 as a service of the young and 2 as a service of		Effect the number reported in Box of Form roof Effect of in not applicable.			
Teportable gaming (gambling) winnings to pizze winners? 2 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 3 Statements, filed for the calendar year ending with or within the year covered by this return 4 Statements, filed for the calendar year ending with or within the year covered by this return 5 b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? 8 Note. If the sum of lines is and 2a is greater than 250, you may be required to e-fife (see instructions). 9 b if Yes, sat filed a Form 990-T for this year? If Not 7 b line 2b, provide an explanation in Schedule 0. 9 b if Yes, sat filed a Form 990-T for this year? If Not 7 b line 2b, provide an explanation in Schedule 0. 9 b if Yes, enter the name of the foreign country. ►CANADA. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR). 9 b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 9 b of any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 9 b of west in the 5a of 5b, did the organization file form 8886-T? 9 b Des the organization she annual gross receipts that are normally greater than \$100,000, and did the organization she amount of the weep selectation an express statement that such contributions or girls were not tax deductible as charitable contributions? 9 b of west in the same of the deductible contributions under section 170(c). 10 b organizations that may receive deductible contributions under section 170(c). 11 b organizations that may receive deductible contributions under section 170(c). 12 b of the organization sell, exchange, or otherwise dispose of tangble personal property for which it was required to file form 3282 filed during the year. 12 b of the organization sell, excha		Enter the humber of Forms W-20 included in line ta Enter-0-1 not applicable,			
2a Enter the number of employees reported on Form W-3, Transmital of Wage and Tax	C				
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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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization have excess business holdings at any time during the year? 8 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organizations. Enter: a Intuation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12 b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 501(c)(12) organizations. Enter: a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b If "Yes," enter the	Ь		C.L	ı	
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the organization is licensed to issue qualified health plans					
c Enter the amount of reserves on hand	b	· · · · · · · · · · · · · · · · · · ·		ĺ	[
14a Did the organization receive any payments for indoor tanning services during the tax year?]	
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u ii res, nas ii nieu a ponni rzo to report these payments rii into, provide an explanation in schedule O 140					
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Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	on A. Governing Body and Management			1
			Yes	No
12	Enter the number of voting members of the governing body at the end of the tax year			
ıa	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
_	Enter the number of voting members included in line 1a, above, who are independent			
	Little the number of voting members included in line 14, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		x
_	any other officer, director, trustee, or key employee?	_		
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		x
_	supervision of officers, directors, or trustees, or key employees to a management company or other person?			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		$\frac{1}{x}$
6	Did the organization have members or stockholders?	6		
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		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	<u> </u>
ь	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	<i>∍.)</i>	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
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	Х	<u></u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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	Χ	
b				
_	rise to conflicts?	12b	Χ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1		
•	The organization's CEO, Executive Director, or top management official	15a	Х	
a b	Other officers or key employees of the organization	15b	_	Х
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
460	· · · · · · · · · · · · · · · · · · ·			
104	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		x
_	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	104		
ь				
	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?	466		
800	ion C. Disclosure	16b		Ь
17	List the states with which a copy of this Form 990 is required to be filed \(\sum_{WA} \).		- <u>-</u> -	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. X 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 int	erest	policy	, and
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and record	s 🕨		
JSA	SEA SHEPHERD 2226 EASTLAKE AVENUE EAST, 45 SEATTLE, WA 98102 212-220-2302	F^-	990	(2014)
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Form 990 (201	4)	SEA_S	SHEPHERD	CONSERVAT	rion	SOCIETY		93-07	92021	Page
Part VII	Compensation of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	an
	Independent Contr	ractors								
•	Check if Schedule	O contains	s a respons	e or note to	anv li	ne in this Part	VII			

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office Individual	unles	Pos heck ss pe	more erson	than of the state	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
_(1)ETHAN_WOLF	10.00									
BOARD PRESIDENT	0	Х		X			_	C	0	
(2)EMILY HUNTER	1.00		l				1			
BOARD MEMBER	0	X	<u> </u>				<u> </u>	C	0	-
_(3)ANN PREZYNA	85.00	ļ								
TREASURER/GENERAL COUNSEL	0	X	<u> </u>	X	ļ		ļ	32,000.	0	
_(4)ROBERT_WINTER	1.00				i			_	_	
BOARD MEMBER - PAST	0	X	<u> </u>				_	C	0	·
_(5)PETER_REIMAN	1.00							_		
BOARD MEMBER - PAST	0	X	ļ					C	0	
_(6)ROBERT_MUNROE	1.00	1	1							
BOARD MEMBER - PAST	0	X	1	<u> </u>	<u> </u>		<u> </u>	C	0	
_(7)ROGER PAYNE	1.00				ł					
BOARD MEMBER - PAST	0	X	<u> </u>	ļ	ļ_		ļ	C	0	
_(8)SHANNON MANN	1.00	1								
BOARD MEMBER - PAST	0	X	<u> </u>		<u> </u>		ļ	C	0	
_(9)LANI_LUM	1.00	1								
BOARD MEMBER - PAST	0	X	_		<u> </u>		<u> </u>	C	_0	
(10)MARNIE GAEDE	1.00	1					İ			
BOARD MEMBER - PAST	0	X	1		<u> </u>	ļ	<u> </u>	C	0	_
(11)BOB TALBOT	1.00	1		•						
BOARD MEMBER - PAST	0	X	_		_	<u> </u>	ļ	C	0	
(12)		-								
(13)			 							
(14)		1							-	

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Part VII Section A. Officers, Directors, Tri	usiees, ne	:y ⊏!!	ibic	ye	es,	anu r	nıyı	Test Compensat	ed Employ	/ees (C	orianuea)
` (A)	(B)			(0	C)			(D)	(E)		(F)
Name and title	Average	Position (do not check more than one						Reportable	Reportable compensation from		Estimated
	hours per week (list any	'				e tnan c is both		compensation from	compensation related		amount of other
	hours for	office			lirect	tor/trust	tee)	the	organizat		compensation
	related	욾	Ins	皇	ě	em Hg	Fo	organization	(W-2/1099-		from the
	organizations	d le	喜	Officer	en	ploy	Former	(W-2/1099-MISC)	`	• 1	organization and related
	below dotted line)	Individual trustee or director	long	ļ .	Key employee	è co]			ļ	organizations
	111107	brust	2 2		yee	嚴				ļ	- · 3 · · · · · · · · · · · · · · · · · · ·
		8	Institutional trustee			Highest compensated employee				ļ	
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							1				
				Т	1						
		1					L.				
1b Sub-total								32,000.		0	C
c Total from continuation sheets to Part VII,	Section A						>			0	
d Total (add lines 1b and 1c)	<u></u>	<u></u>					<u> </u>	32,000.		0	C
2 Total number of individuals (including but not		those	liste	ed a	bov	e) wh	o re	eceived more than	\$100,000	of	
reportable compensation from the organization	on ►		0								
											Yes No
3 Did the organization list any former offi											211 2 2 2 1 3 L
employee on line 1a? If "Yes," complete Scheo	dule J for su	ch ind	livid	lual							3 X
4 For any individual listed on line 1a, is the	sum of re	portal	ole	соп	npei	nsatio	n a	nd other compen	sation from	the	
organization and related organizations g											
ındıvıdual											4 X
5 Did any person listed on line 1a receive of	r accrue co	mper	nsat	ion	fror	n any	/ ur	related organizatı	on or indivi	dual	
for services rendered to the organization? If "	res," comple	ete Sc	nea	uie .	J TO	r sucn	pei	rson	· · · · · · ·	 -	5 X
Section B. Independent Contractors 1 Complete this table for your five highest cor						****		that recoved mar	than \$100	000 4	
1 Complete this table for your five highest cor compensation from the organization Report	npensaleu compensat	inuep ion fo	enu r the	e ca	alen	dar ve	ear i	ending with or wit	hin the orga	nızatic	וכ n's tax
year.	compensat				2.0	uu. y		onomig with or with	0.190		TO TOX
							Т				(C)
(A) Name and business ac	idress							(B) Description of se	ervices	((C) Compensation
PERKINS & COIE	· -	_				-	+,	LEGAL SERVICE			130,254.
SKADDEN, ARPS, SLATE MEAGHER & FL	OM						_	LEGAL SERVICE			220,279.
THE WORKS CREATIVE GROUP				-			$\overline{}$	VENDOR			405,759.
CAPLIN & DRYSDALE, CHARTERED		-					~-	LEGAL SERVICE	S		303,198.
CALDIN & DITODADD, CHIMIDAD							+		-		
2 Total number of independent contractors (including h	ut no	t lu	mite	ed t	o tho	se	listed above) who	received	32 2. d	A CARLINE
more than \$100,000 in compensation from t	he organiza	ation	▶ "		- •	4				35 (1)	ARCH IN

orm 9	990 (20	SEA SHEPHERD	CONSERVAT	TION SOCIETY		93-07920	21 Page 9
Par	t VIII	. Statement of Revenue					
	•	Check if Schedule O contains a response	e or note to an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns		6,046,545			\$\disp\disp\disp\disp\disp\disp\disp\disp
Program Service Revenue	2a b c d e f	All other program service revenue	Business Code	0	y > . >		
Other Revenue	3 4 5 6a b c d 7a b c d 8a b c	Investment income (including dividends and other similar amounts)	(II) Personal (II) Other 425,500 488,875 -63,375 ATCH 3 33,021 67,638 1,110,557 893,916.	2,303 0 1,001. 0 -63,375 -34,617	1,001 -63,375.	6,547	2,303.
	111	Miscellaneous Revenue	Business Code				
	11a			 			1

Form **990** (2014)

Total revenue. See instructions .

-32,314

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 or note to any line in this Part IX.

Check if Schedule O contains a response or note to any line 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 domestic organizations								
and domestic governments See Part IV, line 21	0							
2 Grants and other assistance to domestic								
ındıvıduals See Part IV, line 22	0		_					
3 Grants and other assistance to foreign								
organizations, foreign governments, and foreign								
individuals See Part IV, lines 15 and 16	627,185.	627,185.						
4 Benefits paid to or for members	0		_	<u> </u>				
5 Compensation of current officers, directors,								
trustees, and key employees	_32,000.	25,600.	6,400.					
6 Compensation not included above, to disqualified								
persons (as defined under section 4958(f)(1)) and								
persons described in section 4958(c)(3)(B)	0							
7 Other salaries and wages	815,583.	350,140.	273,904.	191,539				
8 Pension plan accruals and contributions (include								
section 401(k) and 403(b) employer contributions)	0							
9 Other employee benefits	102,892.	38,316.	43,885.	20,691.				
10 Payroll taxes	63,782.	27,064.	17,247.	19,471				
11 Fees for services (non-employees)								
a Management	o							
b Legal	2,720,581.	2,319,649.	400,932.					
c Accounting	113,585.	71,559.	42,026.					
d Lobbying	0							
e Professional fundraising services See Part IV, line 17.	0							
f Investment management fees	0			- .				
g Other (if line 11g amount exceeds 10% of line 25, column								
_ , _	332,665.	279,384.	24,194.	29,087				
(A) amount, list line 11g expenses on Schedule O)	1,072.	·	1,072.	-				
13 Office expenses	227,158.	114,012.	63,368.	49,778				
14 Information technology	146,080.	103,659.	18,365.	24,056				
15 Royalties	0							
-	14,801.	8,144.	6,125.	532				
16 Occupancy	883,845.	865,041.	9,653.	9,151				
17 Travel	000,0101	- 000,0121	3,000.					
18 Payments of travel or entertainment expenses								
for any federal, state, or local public officials 19 Conferences, conventions, and meetings	0							
	0							
20 Interest	0							
21 Payments to affiliates	91,026.	87,839.	2,276.	911				
22 Depreciation, depletion, and amortization	54,084.	1,081.	52,960.	43				
23 Insurance	31,004.	1,001.	32,300.	- 43				
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)								
	117,258.	105,826.	4,148.	7,284				
a EQUI PMENT	444,094.	444,094.	7,140.	1,204				
bSHIPS		61,708.	5 001	390				
cVIDEO, FILM, PHOTO	67,189.	01,708.	5,091.	390				
d FEDERAL INCOME TAXES	1,649.		1,649.	· · · · · · · · · · · · · · · · · · ·				
e All other expenses	0.050.505		072 005	252 222				
25 Total functional expenses. Add lines 1 through 24e	6,856,529.	5,530,301.	973,295.	352,933				
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								
following SOP 98-2 (ASC 958-720)	0			Form 990 (2014				

JSA 4E1052 1 000

art X	Check if Schedule O contains a response or note to any line in this F	Part X		
	ones, in constant of contains an expense of the contains and the cont	(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	1,534,437.	1	1,666,592
2	Savings and temporary cash investments	7,044.	2	8,035
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	_
5	Loans and other receivables from current and former officers, directors,	'		
"	trustees, key employees, and highest compensated employees			
6	Complete Part II of Schedule L 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		5	
2 2	Notes and loans receivable, net		7	
7 8	Inventories for sale or use		8	178,031
ا م 9	Prepaid expenses and deferred charges	•		45,237
1 -	Land, buildings, and equipment cost or	·		•
10 a	other basis. Complete Part VI of Schedule D 10a 1,747,329			
١.	Less accumulated depreciation	638,830.	100	1,415,649
				148,544
11	Investments - publicly traded securities	·	12	110,31
12	Investments - other securities. See Part IV, line 11	•	13	
13	Investments - program-related. See Part IV, line 11	•	14	
14	Intangible assets	•		14,565
15	Other assets See Part IV, line 11	2 245 140		
16	Total assets. Add lines 1 through 15 (must equal line 34)	• • • • • • • • • • • • • • • • • • • •		3,476,653
17	Accounts payable and accrued expenses	_		315,869
18	Grants payable	•	1	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities	•	20	
ဖ္ထ 21	Escrow or custodial account liability. Complete Part IV of Schedule D	•	21	
≌ 22	Loans and other payables to current and former officers, directors,		1 1	
Liabilities 22 22 22 22 22 22 22 22 22 22 22 22 22	trustees, key employees, highest compensated employees, and			
5	disqualified persons Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X		i	
	of Schedule D		25	3,884,219
26	Total liabilities. Add lines 17 through 25	. 399,417.	26	4,200,088
Ses	Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34.			
E 27	Unrestricted net assets	2,845,732.	27	-1,425,345
28	Temporarily restricted net assets		28	701,910
일 29	Permanently restricted net assets		29	
Net Assets or Fund Balances 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
ي 30 پاک	Capital stock or trust principal, or current funds		30	
g 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		33	-723,435
34				3,476,653
104				Form 990 (201

	. SEA SHEPHERD CONSERVATION SOCIETY	93	-07920	21		
Form 99	0 (2014)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,1	68,4	198.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	5,8	56,5	529.
3	Revenue less expenses. Subtract line 2 from line 1	3		-6	88,0	031.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	:	2,8	45,7	732.
5	Net unrealized gains (losses) on investments	5			22,9	989.
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8	;	2,5	02,2	231.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-4	01,8	394.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		-7	23,4	135.
Part	Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		_	Х
1	Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," of Schedule O.	xplaıı	n in		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		1 :	2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	ior			
	reviewed on a separate basis, consolidated basis, or both:		}			
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?		[:	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	overs	ight			
	of the audit, review, or compilation of its financial statements and selection of an independent ac-	counta	ant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, of Schedule O.					
32	As a result of a federal award, was the organization required to undergo an audit or audits as se	t fort	h in			
Ju	the Single Audit Act and OMB Circular A-133?			3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo such as a sudit or audits explain why in Schedule O and describe any steps taken to undergo such as	lergo		26	-	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

▶Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Nam	e or	tne organization					Embiosei iden	uncation number
SEA	SF	EPHERD CONSERVATION	SOCIETY				93-	-0792021
Pa	rt I	Reason for Public Char	rity Status (All or	rganizations must co	omplete	this pa	rt.) See instructions	
The	orga	anization is not a private foun						
1	ΓŤ	A church, convention of chui						
2		A school described in section	on 170(b)(1)(A)(ii).	(Attach Schedule E.)				
3		A hospital or a cooperative I	hospital service or	ganization described in	n section	170(b)	(1)(A)(iii).	
4	П	A medical research organiza	ation operated in c	conjunction with a hos	pital des	cribed in	section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and sta	ate					
5		An organization operated for	or the benefit of a	a college or university	owned	or ope	rated by a governme	ntal unit described in
		section 170(b)(1)(A)(iv). (Co		•				
6		A federal, state, or local gov	•	nmental unit described	d ın secti	on 170(b)(1)(A)(v).	
7	Х	An organization that norma						om the general public
	ت	described in section 170(b)	•			•		-
8		A community trust described			Part II.)			
9		An organization that norma				rt from	contributions, memb	ership fees, and gross
	_	receipts from activities rela						
		support from gross investi						
		acquired by the organization	n after June 30, 19	75 See section 509(a)(2). (C	omplete	Part III.)	
10		An organization organized a	and operated exclu	isively to test for public	safety	See sec	tion 509(a)(4).	
11		An organization organized a	and operated exclu	isively for the benefit o	f, to perf	form the	functions of, or to cal	rry out the purposes of
		one or more publicly suppor	rted organizations	described in section 5	i09(a)(1)	orsect	ion 509(a)(2). See se	ction 509(a)(3). Check
		the box in lines 11a through	11d that describe	s the type of supporti	ng orgar	nization a	and complete lines 11	e, 11f, and 11g
а		Type I A supporting orga	nızatıon operated,	supervised, or contro	olled by	ıts supp	orted organization(s),	typically by giving
		the supported organization	n(s) the power to	regularly appoint or e	lect a m	ajority o	f the directors or trus	tees of the supporting
		organization You must co	omplete Part IV, S	ections A and B.				
b	. [Type II A supporting orga	anization supervise	ed or controlled in co	nnection	with its	supported organizati	on(s), by having
		control or management o	f the supporting o	rganization vested in	the same	e persor	s that control or man	age the supported
		organization(s). You must	complete Part IV,	Sections A and C				
C		Type III functionally integ	grated A supportii	ng organization opera	ited in co	nnectio	n with, and functiona	lly integrated with,
		its supported organization	(s) (see instruction	s) You must comple	te Part I	V, Sectio	ons A, D, and E.	
d	ıL	Type III non-functionally	integrated. A supp	porting organization o	perated	ın conne	ection with its suppor	ted organization(s)
		that is not functionally inte	egrated. The organ	nization generally mus	t satisfy	a distrib	oution requirement and	d an attentiveness
		requirement (see instructi	ions). You mus t co	omplete Part IV, Sect	ions A a	nd D, an	d Part V.	
е	, L	Check this box if the orga	inization received	a written determinatio	n from th	ne IRS tl	hat it is a Type I, Type	II, Type III
		functionally integrated, or	Type III non-funct	ionally integrated sup	porting o	rganizat	tion	
f	Er	nter the number of supported	organizations					L
	Pr	ovide the following information	on about the suppo	orted organization(s)			· - -	
	1 (i)	Name of supported organization	(iı) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the d	-	(v) Amount of monetary support (see	(vi) Amount of other support (see
				above or IRC section	docur		instructions)	instructions)
				(see instructions))				
				_	Yes	No		
(A)					1			
(B)								
· ·				<u> </u>	 	<u> </u>	<u> </u>	
(C)								
				<u> </u>		ļ		
(D)								
			 	 	ļ	ļ		
(E)								1
					 			
-								

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

Schedule A (Form 990 or 990-EZ) 2014

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.)

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning ın) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	7,394,230	10,048,802	12,677,344.	3,959,609	6,079,566	40,159,551	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0	
4	Total. Add lines 1 through 3	7,394,230	10,048,802	12,677,344	3,959,609.	6,079,566.	40,159,551	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount		:					
	shown on line 11, column (f)						6,342,227	
6	Public support. Subtract line 5 from line 4					}	33,817,324	
Sec	tion B. Total Support		-					
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
7 8	Amounts from line 4	7,394,230	10,048,802	12,677,344	3,959,609	6,079,566.	40,159,551.	
	sources	860,098	122,536		253,881	3,304	1,239,819	
9	Net income from unrelated business activities, whether or not the business is regularly carried on		·-··			_	0	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						0	
11	Total support. Add lines 7 through 10						41,399,370	
12	Gross receipts from related activities, etc. (s	see instructions) .				12		
13	First five years. If the Form 990 is f organization, check this box and stop here							
	tion C. Computation of Public Sup			44 4 (0)			81.69%	
14	Public support percentage for 2014 (li						70.94%	
15	Public support percentage from 2013							
16a	331/3% support test - 2014. If the o							
t	this box and stop here. The organization qualifies as a publicly supported organization							
	check this box and stop here . The organization qualifies as a publicly supported organization							
17a	7a 10%-facts-and-circumstances test - 2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported							
	<u> </u>						ирропеа	
	organization,							
t	10%-facts-and-circumstances test -							
	15 is 10% or more, and if the org							
	Explain in Part VI how the organizat supported organization						▶ □	
18	Private foundation. If the organization						_	
	instructions	<u> </u>		<u> </u>		Schedule A (Form 9		

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.)

Sect	ion A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees				i		
	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	I					
	organization's tax-exempt purpose	I					
2	Gross receipts from activities that are not an			-		· · · ·	<u> </u>
3	'	1					
_	unrelated trade or business under section 513					 	
4	Tax revenues levied for the		İ		į		
	organization's benefit and either paid				'	İ	
	to or expended on its behalf						
5	The value of services or facilities			į	1		
	furnished by a governmental unit to the		1				
	organization without charge					 	
6	Total. Add lines 1 through 5					ļ	
7 a	Amounts included on lines 1, 2, and 3				ŀ		
	received from disqualified persons		<u> </u>	ļ			
b	Amounts included on lines 2 and 3		1				
	received from other than disqualified					1	
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	1				İ	
_	Add lines 7a and 7b			[
8	Public support (Subtract line 7c from						
•	line 6)	i					
Sec	tion B. Total Support			•	•		•
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
-	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	<u> </u>		 		+	
С	Add lines 10a and 10b		<u> </u>		 		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12							
-	loss from the sale of capital assets						
	(Explain in Part VI)					<u> </u>	
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organization	on's first, second,	third, fourth, or	r fifth tax year a	as a section	501(c)(3)
•	organization, check this box and stop here						
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2014 (line 8			mn (f))		15	%
	Public support percentage from 2013 Sch					16	
16						1 10 1	
	tion D. Computation of Investme			13 only man (f))		17	0/
17	Investment income percentage for 2014 (I						%_
18	Investment income percentage from 2013						<u>%</u>
19 a	331/3% support tests - 2014. If the or						
	17 is not more than 331/3%, check the						
b	331/3% support tests - 2013. If the org						
	line 18 is not more than 331/3 %, check	k this box and s	stop here. The o	rganization qualif	ies as a publicly	supported of	organization 🕨 🔛
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19	b, check this b	ox and see	instructions >
10.4							orm 990 or 990-EZ) 2014

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

secu	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain.	1_1_		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a	i	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	5c		
6	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	:	_
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10b		

JSA 4E1229 2 000 Schedule A (Form 990 or 990-EZ) 2014

3 Parent of Supported Organizations. Answer (a) and (b) below.

activities but for the organization's involvement.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.

reasons for the organization's position that its supported organization(s) would have engaged in these

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Schedule A (Form 990 or 990-EZ) 2014

2ь

3a

Schedule A (Form 990 or 990-EZ) 2014			Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	ization	s	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trust on	Nov 20, 1970. See in	structions. All
other Type III non-functionally integrated supporting organizations must con	nplete S	ections A through E	
Section A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI).			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	.	
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	,	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	y-integra	ated Type III supporting	organization (see
instructions).	-	•	•

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Rorm 990 or 990-EZ) 2014

Part V. Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Page 7

Paru Secti	on D - Distributions	Supporting Organizat	ions (commusa)	Current Year
1	Amounts paid to supported organizations to accomplish ex	rempt purposes	· . · · · . · · · · · · · · · · · · · ·	
.	Amounts paid to perform activity that directly furthers exen		ed	
-	organizations, in excess of income from activity	р. рроссов с. серрет		
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	
4	Amounts paid to acquire exempt-use assets	<u> </u>		
_ _	Qualified set-aside amounts (prior IRS approval required)			
- 6	Other distributions (describe in Part VI) See instructions		<u> </u>	
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
O	(provide details in Part VI). See instructions	the organization is roop		
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	* *		
	Line 8 amount divided by Line 9 amount		(ii)	(iii)
;	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section		ļ	
	D, line 7 \$			
а	Applied to underdistributions of prior years			
ь	Applied to 2014 distributable amount			
C	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if			
	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015 Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a				
b				
C				
d				
е				
		-	Schedul	e A (Form 990 or 990-EZ) 201

Schedule A (Form 990 or 990-EZ) 2014

Page 8

Part VI
Supplemental Information. 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).

SCHEDULE D (Form 990)

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. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization SEA SHEPHERD CONSERVATION SOCIETY 93-0792021

Par	t I	Organizations Maintaining Donor Adv		s 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	(a) a since a made	
2		gate value of contributions to (during year)		
2 3		gate value of grants from (during year)		
		gate value at end of year		
4 5		gate value at end of year	advisors in writing that the assets hi	eld in donor advised
J		are the organization's property, subject to the		
6		e organization inform all grantees, donors, a		
U		or charitable purposes and not for the bene		
	•	rring impermissible private benefit?		
Pai	rt II	Conservation Easements.		
ı a		Complete if the organization answered	"Yes" to Form 990, Part IV, line 7.	
1	Purpo	se(s) of conservation easements held by the		
•		Preservation of land for public use (e.g., rec	—	ion of a historically important land area
		Protection of natural habitat	· —	ion of a certified historic structure
		Preservation of open space		
2	Comr	plete lines 2a through 2d if the organization h	eld a qualified conservation contributio	n in the form of a conservation
-		nent on the last day of the tax year.		Held at the End of the Tax Year
а		number of conservation easements		. 2a
b		acreage restricted by conservation easement		
c		per of conservation easements on a certified		
ď		per of conservation easements included in (
_		ic structure listed in the National Register		I I
3		per of conservation easements modified, tra		
•		ear >	,	, 3
4	•	per of states where property subject to conse	ervation easement is located	
5		the organization have a written policy re		
•		ions, and enforcement of the conservation ea		
6		and volunteer hours devoted to monitoring, i		
-	>	3 ,	, ,	,
7	Amou	int of expenses incurred in monitoring, inspe	cting, and enforcing conservation ease	ments during the year
			0,	• ,
8		each conservation easement reported on lir	ne 2(d) above satisfy the requirements of	of section 170(h)(4)(B)(ı)
		ection 170(h)(4)(B)(ii)?		
9		rt XIII, describe how the organization reports		
	balar	ice sheet, and include, if applicable, the text	of the footnote to the organization's fin	ancial statements that describes the
	orgar	nization's accounting for conservation easem		
Pa	rt III	Organizations Maintaining Collection		ther Similar Assets.
		Complete if the organization answered	I "Yes" to Form 990, Part IV, line 8.	
1a	If the	organization elected, as permitted under S s of art, historical treasures, or other simi	FAS 116 (ASC 958), not to report in	its revenue statement and balance sheef
	work	s of art, historical treasures, or other simi	lar assets held for public exhibition,	education, or research in furtherance of
		service, provide, in Part XIII, the text of the		
Ь	If the	e organization elected, as permitted under is of art, historical treasures, or other simi	SEAS 116 (ASC 958), to report in it	is revenue statement and balance sheet
		s of art, historical treasures, or other simi c service, provide the following amounts rela		education, or research in futurerance of
		evenue included in Form 990, Part VIII, line 1		▶ \$
	(ii) A	ssets included in Form 990, Part X		> \$
2		e organization received or held works of		
_		ving amounts required to be reported under		
а		nue included in Form 990, Part VIII, line 1..		
a b		ts included in Form 990, Part VIII, life 1		
		ork Reduction Act Notice, see the Instructions for		Schedule D (Form 990) 2014
JSA		The state of the s		, , , , , , , , , , , , , , , , , , , ,
4 L 126	68 1 000			

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2	Provide the estimated	percentage of the	current year ei	nd balance (line	1g, column (a)) held as:
---	-----------------------	-------------------	-----------------	------------------	--------------------------

- Board designated or quasi-endowment Permanent endowment >
- Temporarily restricted endowment

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

(i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Describe in Part XIII the intended uses of the organization's endowment funds.

Land, Buildings, and Equipment. Part VI Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. 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		214,256.		214,256.
	Buildings		262,579.	100,697.	161,882.
C	Leasehold improvements				_
d	Equipment		400,830.	165,344.	235,486.
е	Other		869,664.	65,639.	804,025.
Tota	il. Add lines 1a through 1e. (Column (d) must	1,415,649.			

Schedule D (Form 990) 2014

Yes

No

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Page 3

Part VII	Investments - Other Securities. Complete if the organization answered	"Yes" to Form 990	Part IV. line 11b. See Form 9	90. Part X line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year r	luation
(1) Financia	al derivatives			
	held equity interests			
				
<u>(C)</u>				-
(D) (E)				
(F)				
<u>\'</u> (G)				
<u>\</u> -/		-		
	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related. Complete if the organization answered	d "Yes" to Form 990	, Part IV, line 11c. See Form 9	90, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year r	
(1)		1		
(2)				
(3)				
(4)				
(5)				
(6) (7)				
(8)				
(9)				<u> </u>
	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. Complete if the organization answered	d "Yes" to Form 990	Part IV. line 11d. See Form 9	90. Part X. line 15.
		escription	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) Book value
(1)		· · · · · · · · · · · · · · · · · · ·		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)	· <u></u>			
(8)				
	umn (b) must equal Form 990, Part X, col (B)	line 15)		•
Part X	Other Liabilities. Complete if the organization answere line 25.			
1.	(a) Description of liability	(b) Book val	ue * * *	*
	ral income taxes			
	UED SETTLEMENT	3,884,	219.	
(3)				
(4)				
(5)				
<u>(6)</u> (7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 25) ▶ 3,884,	219.	
2. Liability 1	for uncertain tax positions. In Part XIII, provide the is liability for uncertain tax positions under FIN 48	e text of the footnote to	the organization's financial statemen	ts that reports the provided in Part XIII
JSA		, , , , , , , , , , , , , , , , , , , ,		Schedule D (Form 990) 20
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Schedule D (Form 990) 2014

Part XIII - Supplemental Information (continued)

FORM 990, SCH D, PART XI, LINE 2D

OTHER ADJUSTMENTS:

COST OF GOOD SOLD REPORTED AS EXPENSE ON FINANCIAL STATEMENT: \$893,916 FUNDRAISING EVENTS DIRECT EXPENSES REPORTED ON THE FINANCIAL STATEMENT: \$52,012

FOREIGN CURRENCY TRANSLATION GAIN/(LOSS): (\$20,429)

FORM 990, SCH D, PART XII, LINE 2D

FORM 990, SCH D, PART X, LINE 2

OTHER ADJUSTMENTS:

COST OF GOOD SOLD REPORTED AS EXPENSE ON FINANCIAL STATEMENT: \$893,916 FUNDRAISING EVENTS DIRECT EXPENSES REPORTED ON THE FINANCIAL STATEMENT: \$52,012

SEA SHEPHERD IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) FOR ACTIVITIES RELATED TO THEIR TAX-EXEMPT PURPOSE. SEA SHEPHERD IS SUBJECT TO TAXATION ON UNRELATED BUSINESS INCOME ON MERCHANDISE SOLD THAT DOES NOT INCLUDE THE MISSION STATEMENT OF SEA SHEPHERD. MANAGEMENT EVALUATES SEA SHEPHERD'S TAX POSITIONS AND CONCLUDED THAT SEA SHEPHERD HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

Open to Public

Department of the Treasury Internal Revenue Service

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

OMB No 1545-0047

Name	of the organization				Employer identific	ation number
SEA	SHEPHERD CONSERVATION	SOCIETY			93-079202	1
Par	General Information of Form 990, Part IV, line 14		Outside the l	Jnited States. Complete	e if the organization answer	ered "Yes" on
1	For grantmakers. Does the orga	nızatıon maınta	in records to s	substantiate the amount o	f its grants and other	
	assistance, the grantees' eligibili	ty for the grant	ts or assistance	e, and the selection criter	ia used to award the	
	grants or assistance?					X Yes No
2	For grantmakers. Describe in		ganization's p	rocedures for monitoring	the use of its grants	and other
	assistance outside the United Sta	ates.				
	Asticitus and Design (The fallow		2 table ass b	والمستقل المستقل		
	Activities per Region (The follow	, -			,	T 40 = 1.
	(a) Region	(b) Number of offices in the	(c) Number of employees,	(d) Activities conducted in region (by type) (e.g.,	(e) If activity listed in (d) is a program service,	(f) Total expenditures for
		region	agents, and independent	fundraising, program services, investments.	describe specific type of	and investments
			contractors	grants to recipients	service(s) in region	in region
			in region	located in the region)		
_(1)	SOUTH AMERICA	1.	5	PROGRAM SERVICES	TURTLES	32,001
(0)						
(2)	EAST ASIA AND THE PACIFIC	-	-	PROGRAM SERVICES	DOLPHINS	253,308.
(2)						
73	EUROPE			GRANTMAKING	FAEROES ISLAND	662,741
(4)	CENTRAL AMERICA/CARIBBEAN			GRANTMAKING	DOLPHINS	2 617
_(+)	CENTRAL AMERICA/CARIBBEAN			GRANIMAKING	DOLPHINS	2,617
(5)						,
(6)						
_(7)						
_(8)						
_(9)				-		ļ
					1	
<u>(10)</u>						
(11)						
77						, , , , , , , , , , , , , , , , , , , ,
(12)						
(13)					<u> </u>	
(14)		<u> </u>				
(15)						
(16)		-		 		
(47)						
(17)	Sub-total	 		 		
3a b		1	5.			950,667.
IJ	iotai nom continuation	1	I	1	i	I

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

sheets to Part I Totals (add lines 3a and 3b)

Schedule F (Form 990) 2014

950,667

Schedule F (Form 990) 2014

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 980, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(a) Name of (b) IRS code section and EIN (if applicable) (if applicable)	EIN (c) Region (e) South AMERICA	(d) Purpose of grant	(e) Amount of cash grant d	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	valuation (book, FMV, appraisal,
	SOUTH						other)
57.	SOUTH						٠
100	orq ;	SUPPORT GALA	627, 185				
\$**							
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op oppose to the state of the s							
*4	o Sport						
	***				į		
5 April 10 A	and the second	!					
N. Williams							
***	₩						
*							
1	3						

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt Enter total number of other organizations or entities. က

Schedule F (Form 990) 2014

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Schedule F (Form 990) 2014

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

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

(h) Method of valuation (book, FMV, appraisal, other)																			Schedule F (Form 990) 2014
(h) Me valu (book appr ott																			nedule F (For
(g) Description of non-cash assistance																			Sci
(f) Amount of non-cash assistance																			
(e) Manner of cash disbursement																			
(d) Amount of cash grant																			
(c) Number of recipients																			;
(a) Type of grant or assistance (b) Region																			
	€	2	3	€ €	(2)	9	5	6	9 6	5	£	12)	(13)	(14)	(15)	(16)	(17)	(18)	

Dage	4

Part	V Foreign Forms		
rait	Toroign Forms		
1	Was the organization a US 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 US Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, 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, do not file with Form 990)	Yes	X 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	X 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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X 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	X 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, do not file with Form 990)	Yes	X 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)

PART I, LINE 2 - GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS SEA SHEPHERD RECEIVES REGULAR ACCOUNTING REPORTS AND UPDATES REGARDING THE USE OF FUNDS.

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

Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990

OMB No 1545-0047

Inspection

Name	of the organization					Employer identification	on number
SEA	SHEPHERD CONSERVATION SOC					93-0792021	
Par	Fundraising Activities. Cor	•			"Yes" to Form 9	90, Part IV, line	17.
	Form 990-EZ mers are not				 		· · · · · · · · · · · · · · · · · · ·
1	Indicate whether the organization rai	sed funds through					
а	Mail solicitations	е			non-government g		
b		f			government grant	S	
C	F	g	Spec	cial fundra	ising events		
d							
	Did the organization have a written or key employees listed in Form 990 if "Yes," list the ten highest paid ind compensated at least \$5,000 by the), Part VII) or entity Iividuals or entities	in connec	tion with p	professional fundra	ilsing services?	Yes No fundraiser is to be
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have or control of outlons?	(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
		<u> </u>	Yes	No		COI (I)	-
1			163	140			
2							
3		-					
4							
6							
7			-				
- 8			<u> </u>	<u> </u>			
9							
10							
Tota	·			>			
3	List all states in which the organizategistration or licensing				t contributions or	has been notified	it is exempt from
		 -	-	<u> </u>			
			,				
							
							

• • •		• SEA SHE G (Form 990 or 990-EZ) 2014	PHERD CONSERVAT	ION SOCIETY	93-	0792021 Page 2
Pa		Fundraising Events. Complete than \$15,000 of fundraising even	it contributions and gros			eported more
	<u>.</u>	gross receipts greater than \$5,00	00. (a) Event #1 TORONTO (event type)	(b) Event #2 CAPE MAY (event type)	(c) Other events 2.	(d) Total events (add col (a) through col (c))
Revenue	1	Gross receipts			18,059.	63,524
Rev		Less Contributions			6,661.	30,503
		Gross income (line 1 minus			11,398.	33,021
	4	Cash prizes			!	
	5	Noncash prizes	21,283.		23,845.	45,128
nses	6	Rent/facility costs	11,760.		693.	12,453
Orrect Expenses	7	Food and beverages			253.	253
Direc	8	Entertainment				
	9	Other direct expenses	270.		9,534.	9,804
	10 11	Direct expense summary. Add lines 4 Net income summary. Subtract line 1				67,638 -34,617
Pa	rt		anization answered "			rted more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
 Rè	1	Gross revenue				
benses	2	Cash prizes				
ıă	3	Noncash prizes				
Direct	4	Rent/facility costs				
_	5	Other direct expenses		0/ 1		
	6	Volunteer labor	I — — — — — — — — — — — — — — — — — — —	% Yes% No	Yes% No	
	7	Direct expense summary. Add lines	2 through 5 in column (d)		
_	8	Net gaming income summary. Subtr	act line 7 from line 1, co	olumn (d)		
9	a I	Enter the state(s) in which the organiza s the organization licensed to conduct f "No," explain:		th of these states?		Yes No
	-					
10	aν	Were any of the organization's gaming	licenses revoked, susp	pended or terminated duri	ng the tax year?	. Yes No

b If "Yes," explain

, SEA SHEPHERD CONSERVATION SOCIETY

93-0792021

Sched	ule G (Form 990 or 990-EZ) 2014			Page 3
11	Does the organization conduct 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	y		_
	formed to administer charitable gaming?		Yes	No No
13	Indicate the percentage of gaming activity conducted in:			_
а	The organization's facility	13a		%
	An outside facility	- 1		%
14	Enter the name and address of the person who prepares the organization's gaming/special events book records			
	Name ▶			
	Address ►			
15 2	Does the organization have a contract with a third party from whom the organization receives g	amino		
13 a	revenue?		Yes	No
h	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the		
	amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address of the third party			
•	in too, onto the contract of t			
	Name ▶			
	Address ►			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
a	The state of the s	ceeds to	0	
_	retain the state gaming license?			No
b				
_	or spent in the organization's own exempt activities during the tax year ▶ \$			
Par	Supplemental Information. Provide the explanation required by Part I, line 2b, columns Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additio (see instructions).			_
			•	

Schedule G (Form 990 or 990-EZ) 2014

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

2014

Open To Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

SEA SHEPHERD CONSERVATION SOCIETY 93-0792021 Types of Property (d) (a) (b) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art - Works of art. Art - Historical treasures Art - Fractional interests Books and publications Clothing and household 6 Cars and other vehicles Boats and planes. Intellectual property R 4,660. FMV Securities - Publicly traded 10 Securities - Closely held stock . . . Securities - Partnership, LLC, 11 or trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 Collectibles....... 18 19 Food inventory...... Drugs and medical supplies 20 21 22 Historical artifacts 23 Scientific specimens. 24 Archeological artifacts 236. Χ 45,128. FMV Other ► (VARIOUS ITEMS) 25 Other ►(_____) 26 27 Other ►(_____) 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required 30a Х b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 Χ 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Х **b** If "Yes," describe in Part II 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) (2014)

27087/LLS

Schedule M (Form 990) (2014)

Part II

Page 2

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SEA SHEPHERD CONSERVATION SOCIETY

Employer identification number 93-0792021

FORM 990, PART III, LINE 2 - NEW SERVICES

SEA SHEPHERD UNDERTOOK NEW PROGRAMS, "OPERATION PACUARE" AND "OPERATION

GRINDSTOP 2014," WHICH ARE DESCRIBED MORE FULLY IN PART III, LINE 4D,

PROGRAM SERVICE ACCOMPLISHMENTS.

FORM 990, PART III, LINE 3 - CEASED CONDUCTING OR SIGNIFICANT CHANGES ORGANIZATION CEASED CONDUCTING ONE OF ITS PROGRAM SERVICES, THE DAM GUARDIAN CAMPAIGN, WHICH TOOK PLACE IN 2012 AND 2013. THIS GROUND CAMPAIGN DOCUMENTED THE PLIGHT OF SEA LIONS WHO ARE BEING KILLED FOR EATING SALMON IN THE COLUMBIA RIVER NEAR THE BONNEVILLE DAM. WHILE SEA SHEPHERD CONTINUED TO MONITOR THIS ISSUE IN 2014, NO GROUND CAMPAIGN TOOK PLACE SO WE COULD FOCUS OUR RESOURCES ELSEWHERE.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

TURTLE PROTECTION CAMPAIGN - OPERATION PACUARE, SUMMER 2014 - FALL 2014

ON AUGUST 15, 2014 SEA SHEPHERD LAUNCHED OPERATION PACUARE IN COSTA RICA.

THE SUCCESSFUL ANTI-POACHING CAMPAIGN INCLUDED 62 VOLUNTEERS LOCAL TO

COSTA RICA AND FROM OTHER NATIONS AROUND THE WORLD. THESE BRAVE

VOLUNTEERS SAVED NEARLY 3,000 ENDANGERED SEA TURTLES FROM POACHERS. OVER

THE COURSE OF THE CAMPAIGN, SEA SHEPHERD'S VOLUNTEERS ENSURED 269

LEATHERBACKS, 1,163 GREEN, AND 1,546 HAWKSBILL HATCHLINGS WERE

SUCCESSFULLY RELEASED INTO THE OCEAN - FOR A TOTAL OF 2,978 SEA TURTLES

SAVED.

PILOT WHALE DEFENSE CAMPAIGN - OPERATION GRINDSTOP 2014 - SUMMER 2014 -

FALL 2014

OPERATION GRINDSTOP 2014 OPPOSED THE "GRIND," A RITUAL MASS SLAUGHTER IN WHICH ENTIRE PODS OF PILOT WHALES AND OTHER DOLPHINS ARE DRIVEN TO SHORE AND BRUTALLY KILLED. IN ALL OF 2014, 51 CETACEANS WERE KILLED IN THE FAROES (46 PILOT WHALES AND FIVE RARE BOTTLENOSE WHALES THAT STRANDED AND WERE KILLED WHILE BEACHED. 13 OF THE PILOT WHALES WERE KILLED IN MAY, BEFORE SEA SHEPHERD ARRIVED IN THE FAROES). SEA SHEPHERD'S PRESENCE SAVED MORE THAN 1,000 CETACEANS.

OPERATION TOXIC GULF - SUMMER 2014

SEA SHEPHERD TEAMED UP WITH OCEAN ALLIANCE FOR THE SECOND CONSECUTIVE

YEAR TO RESEARCH THE LONG-TERM ENVIRONMENTAL IMPACT IN THE GULF FOLLOWING

THE 2010 DEEPWATER HORIZON OIL SPILL, AND THE USE OF TOXIC CHEMICALS THAT

DISPERSED OIL THROUGHOUT THE WATERS AND FOOD CHAIN. THE FINDINGS FROM THE

YEARS OF RESEARCH WILL BE USED TO NOT ONLY DETERMINE THE CURRENT HEALTH

AND BALANCE OF THE GULF OF MEXICO'S ECOSYSTEM, BUT ALSO TO DETERMINE WAYS

TO HELP THE GULF RECOVER.

ANTI-POACHING - GUATEMALA

IN 2014, SEA SHEPHERD SUCCESSFULLY HALTED SEVERAL LARGE-SCALE POACHING OPERATIONS IN GUATEMALAN WATERS DURING THREE WEEKS OF ANTI-POACHING PATROLS IN COOPERATION WITH OFFICIALS FROM GUATEMALA'S NAVY AND DEPARTMENT OF FISHERIES. SEA SHEPHERD HELPED WITH THE PATROLS CONDUCTED BY GUATEMALAN OFFICIALS, JOINING MEMBERS OF THE FISHERIES DEPARTMENT AND NAVY. THESE PATROLS WERE ARRANGED BASED ON AN AGREEMENT BETWEEN SEA SHEPHERD AND GUATEMALAN AUTHORITIES, IN ACCORDANCE WITH GUATEMALAN LEGISLATION. THROUGH THE USE OF INTELLIGENCE, THE SEA SHEPHERD CREW AND

Employer identification number 93-0792021

GUATEMALAN OFFICIALS WERE ABLE TO LOCATE AND HALT POACHING OPERATIONS.

WHEN NOT ON PATROL, THE SEA SHEPHERD CREW GAVE TALKS AT SCHOOLS,

SPREADING AWARENESS AND EMPHASIZING THE URGENT NEED FOR OCEAN

PROTECTION.

SEA SHEPHERD GALAPAGOS

SINCE 2006, SEA SHEPHERD HAS HAD A PERMANENT PRESENCE IN THE GALAPAGOS.

WE USE ANTI-POACHING SURVEILLANCE TECHNOLOGY, LEGAL TRAINING AND POLICE

DOG-SNIFFING INSPECTIONS TO PROTECT THIS UNESCO WORLD HERITAGE SITE FROM

POACHERS AND WILDLIFE TRAFFICKERS. ON MAY 8, 2014, SEA SHEPHERD GALAPAGOS

AND THE MINISTRY FOR INTERNAL AFFAIRS OF ECUADOR SIGNED A FORMAL

AGREEMENT TO CONTINUE OUR UNIQUE K9 POLICE UNIT, SPECIALIZING IN THE

DETECTION OF WILDLIFE TRAFFICKING, THROUGH 2017.

OUTREACH & COASTAL CLEANUPS

IN 2014, VOLUNTEERS WITH SEA SHEPHERD CHAPTERS CONDUCTED SHORELINE CLEANUPS AT RIVERS, LAKES AND OCEANFRONT BEACHES THROUGHOUT NORTH AMERICA. MUCH MORE THAN AN EYESORE, TRASH IN THE WATER AND ON THE SHORE CAN BE DEADLY TO MARINE WILDLIFE, WHO BECOME ENTANGLED IN IT OR MISTAKENLY CONSUME IT AS FOOD.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

TAX RETURN WAS REVIEWED BY MANAGEMENT PRIOR TO FILING AND EMAILED TO BOARD MEMBERS AFTER COMPLETION.

FORM 990, PART VI, LINE 12C

BOARD MEMBERS AND SENIOR STAFF WILL ANNUALLY DISCLOSE AND PROMPTLY UPDATE

ANY DISCLOSURES PREVIOUSLY MADE ON AN ANNUAL CONFLICT DISCLOSURE

Name of the organization
SEA SHEPHERD CONSERVATION SOCIETY

Employer identification number 93-0792021

OUESTIONNAIRE FORM PROVIDED BY THE ORGANIZATION.

FORM 990, PART VI, LINE 19

THE ORGANIZATION WILL PROVIDE ITS GOVERNING DOCUMENTS, CONFLICT OF

INTEREST POLICY AND FINANCIAL STATEMENTS UPON REQUEST.

FORM 990, PART XI, LINE 8

PRIOR PERIOD ADJUSTMENT:

2013 AUDIT ADJUSTMENTS:

ACCRUED SETTLEMENT: (\$2,550,000)

ACCOUNTS PAYABLES ADJUSTMENT: (\$62,984)

ASSET ADJUSTMENT: \$110,753

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS OR FUND BALANCES:

IMPAIRMENT LOSS ON BUILDING: \$381,465

FOREIGN CURRENCY TRANSLATION GAIN/(LOSS): \$(20,429)

FORM 990, PART V, LINE 3B

THE ORGANIZATION IS CURRENTLY IN THE PROCESS OF GATHERING INFORMATION NEEDED TO ACCURATELY PREPARE THE 2014 FORM 990-T AND WILL FILE THE FORM AS SOON AS THE INFORMATION BECOMES AVAILABLE.

FORM 990, PART XII, LINE 2C

THE BOARD HAS RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND SELECTION OF

AN INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED.

FORM 990, PART VI, LINE 15A

THE GOVERNING BOARD REVIEWS AND APPROVES COMPENSATION WITH THE ASSISTANCE

OF THE BOARD ADVISOR.

ATTACHMENT	1			

FORM 990, PART III - PROGRAM SERVICE, LINE 4C

DOLPHIN DEFENSE CAMPAIGN: OPERATION INFINITE PATIENCE, FALL 2014 - WINTER 2015

EACH YEAR SEA SHEPHERD SENDS GROUND CREWS -VOLUNTEERS FROM AROUND THE WORLD - TO TAIJI, JAPAN. THIS SMALL TOWN LOCATED IN SOUTHEASTERN JAPAN, THE FOCUS OF THE ACADEMY AWARD-WINNING FILM THE COVE, WHERE UP TO 2,000 DOLPHINS AND OTHER SMALL CETACEANS ARE KILLED AND CAPTURED EVERY YEAR. THROUGHOUT THE SIX-MONTH 2014-2015 HUNT SEASON, OUR COVE GUARDIANS DOCUMENTED AND LIVE STREAMED EACH HUNT, CAPTURE FOR CAPTIVITY AND SLAUGHTER IN TAIJI, EXPOSING THE CRUEL HUNT OF MARINE MAMMALS AND APPLYING PRESSURE ON JAPAN TO END THE SLAUGHTER. OUR CAMPAIGN HAS SUCCESSFULLY REDUCED THE NUMBER OF CETACEANS KILLED, DUE TO THE CONTINUOUS PRESENCE OF OUR COVE GUARDIANS THROUGHOUT THE HUNT SEASON AND HAS THRUST THE WORLD'S SPOTLIGHT UPON THE HUNTS. THIS ONGOING CAMPAIGN CONTINUES TO KEEP WORLDWIDE MEDIA, GOVERNMENT AND PUBLIC ATTENTION ON THE IMPORTANT ISSUE OF THE SLAUGHTER AND CAPTIVITY OF THESE HIGHLY INTELLIGENT AND SOCIALLY COMPLEX CETACEANS.

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SEA SHEPHERD CONSERVATION SOCIETY	· · ·	93-0792 ATTACHMEN	
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERV	ICES		
DESCRIPTION	GRANTS	EXPENSES	REVENUE
TURTLE PROTECTION CAMPAIGN - OPERATION PACUA		870,327.	
PILOT WHALE DEFENSE CAMPAIGN - OPERATION GRI		662,741.	
ANTI-POACHING - GUATEMALA		57,037.	

ATTACHMENT 3

697,871.

47,326.

2,335,302.

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

TOTALS

SEA SHEPHERD GALAPAGOS

OUTREACH & COASTAL CLEANUPS

AMOUNT DESCRIPTION

32,563.

32,563. TOTAL