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DLN: 93493319039536

OMB No 1545-0047

Department of the

Internal Revenue Servi

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

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

Return of Organization Exempt From Income Tax

► Information about Form 990 and its instructions is at <u>www IRS gov/form990</u>

Open to Public Inspection

		201F 65	1	1-2015 , and ending 12-31-2015				
		pplicable	lendar year, or tax year beginning 01-0 C Name of organization	1-2015 , and ending 12-31-2015)	D Emple	over id	lentification number
_		change	MOTE MARINE LABORATORY INC				, 7566	
_ N	ame ch	ange	Doing business as				/300	43
<u> </u>	itial ret	urn	209 240300 40					
return	nal /termın	ated	Number and street (or P O box if mail is no	t delivered to street address) Room/suite	9	E Teleph	none nu	ımber
<u> </u>	nended		1600 KEN THOMPSON PARKWAY			(941) 388	-4441
Ap	plicatio	n pending	City or town, state or province, country, and SARASOTA, FL 34236	I ZIP or foreign postal code		G Gross	receipt	s \$ 27,590,743
			F Name and address of principal office	er	H(a)	Is this a grou	p retu	rn for
			MICHAEL P CROSBY PHD 1600 KEN THOMPSON PARKWAY			subordinates?	•	☐ Yes 🗸
			SARASOTA,FL 34236		H(b)	No Are all subord	linates	5
I Ta	x-exen	npt status	√ 501(c)(3)	o) 4947(a)(1) or 527	. ,	ıncluded?		Tes NO
J W	ebsite	e:► WV	W MOTE ORG			•		t (see instructions)
K For	n of or	aanızatıon	✓ Corporation Trust Association	Other		Group exemp		umber ► M State of legal domicile FL
K FOII	11 01 01	gariizatioi	Corporation Hust Association	Outlet P				J .
Pa	rt I		mary					
		•	scribe the organization's mission or mo ING THE SCIENCE OF THE SEA THR	9	ANDO	UTREACH		
æ	_							
anc	_							
en.	2 (Check th	ıs box ▶ ┌ ıf the organization disconti	nued its operations or disposed of	more t	han 25% of it	s net	assets
Activities & Governance								
25	3 1	Number	of voting members of the governing boo	y (Part VI, line 1a)			3	29
ţies			of independent voting members of the g				4	28
₹			nber of individuals employed in calenda				5	248
AC			nber of volunteers (estimate if necessa				6	1,843
			elated business revenue from Part VII ated business taxable income from Fori				7a 7b	0
					Ι .	Prior Year	1 75	Current Year
	8	Contr	butions and grants (Part VIII, line 1h)			4,826	,927	12,678,299
Ę	9 Progra		am service revenue (Part VIII, line 2g)			15,142	,973	13,270,176
Ravenue	10	O Investment income (Part VIII, column (A), lines 3, 4, and 7d)					,892	54,786
ď	11		revenue (Part VIII, column (A), lines !			485	,880	457,898
	12	Total 12)	revenue—add lines 8 through 11 (must	equal Part VIII, column (A), line		18,356	,888	26,461,159
	13	Grant	s and similar amounts paid (Part IX, co	lumn (A), lines 1-3)		285	,959	296,680
	14	Benef	ts paid to or for members (Part IX, colo	umn (A), line 4)			0	0
S	15		es, other compensation, employee ben	efits (Part IX, column (A), lines		10,962	,166	10,802,145
Expenses	16a	5-10 Profe	o Ssional fundraising fees (Part IX, colum	n (Δ) line 11e)			0	0
e G	ь		indraising expenses (Part IX, column (D), line 2	, ,,				
Ω	17		expenses (Part IX, column (A), lines 1			9,345	,319	9,828,834
	18		expenses Add lines 13–17 (must equ	•		20,593	-	20,927,659
	19	Rever	ue less expenses Subtract line 18 fro	m line 12		-2,236	,556	5,533,500
Net Assets or Fund Balances					Begini	ning of Current	Year	End of Year
sets	20	Total	assets (Part X, line 16)			50,103	.916	52,856,042
A As	21		liabilities (Part X, line 26)			17,801		16,495,651
ξŽ	22		sets or fund balances Subtract line 2:			32,302	,916	36,360,391
	rt II		ature Block					
my k	nowle	dge and	perjury, I declare that I have examined belief, it is true, correct, and complete nowledge					
		***				2016-11-14		
Sign		Sign	ature of officer			Date		
Her	е		HAEL P CROSBY PHD CEO or print name and title					
		17	rint/Type preparer's name Prepa	arer's signature Da	te	Gha i Fin	PTIN	
Paid	d	[]	REBECCA U STONER REBE	CCA U STONER		Check If self-employed	P005	85910
	- pare	?r ⊢	irm's name ► KERKERING BARBERIO & CO			Firm's EIN ► 5		
	On	11	irm's address ▶ PO BOX 49348			Phone no (94	1) 365-	-4617
			SARASOTA, FL 342306348					
May	the IR	S discu	s this return with the preparer shown a	bove? (see instructions)				. √Yes No

	990 (2015)			Page 3
Par	t IV Checklist of Required Schedules			
	7 11 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 💆	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🐿	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	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 2	11 c		No
	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 3	11 d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

29

Pai	rt IV	Checklist of Required Schedules (continued)
21	Did th	e organization report more than \$5,000 of grants or other

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Pa	rt IV Checklist of Required Schedules (continued)		
21	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	Yes
22	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, Paits I and III	22	Yes

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

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?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

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 🛸 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I.

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

es

Yes

23

24a

24b

24c

24d

25a

25b

26

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28a

28b

28c

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35a

35b

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Yes

Yes

Yes

Form 990 (2015)

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Nο

Nο

Nο

Page 4

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		V			_
		effect if Schedule o contains a response of flote to any line in this	uit	<u> </u>	•	Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	136		103	110
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
		Lie organization comply with backup withholding rules for reportable payments to		tors and reportable			
·		ig (gambling) winnings to prize winners?	• vend		1 c	Yes	
2a	_	the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered	2-	240			
	,	s return	2a	248	2b	Yes	
D		east one is reported on line 2a, did the organization file all required federal emp If the sum of lines 1a and 2a is greater than 250, you may be required to e-file			20	1 63	
За		e organization have unrelated business gross income of \$1,000 or more during	,	, i	3a		No
		s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation			3b		
		y time during the calendar year, did the organization have an interest in, or a si					
	over,	a financial account in a foreign country (such as a bank account, securities acc					
	accou	int)?			4a		No
Ь		s," enter the name of the foreign country 🕨					
	See in	nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank	and	Financial Accounts			
Ea	•	he organization a party to a prohibited tax shelter transaction at any time durin	a tho	tay year?	5a		No
		ne organization a party to a prombited tax shelter transaction at any time durin ny taxable party notify the organization that it was or is a party to a prohibited t					No
			ax 511	eiter transaction?	5b		NO
С	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?			5c		
62	Does	the organization have annual gross receipts that are normally greater than \$10	0.00	0 and did the	6a		No
O.		ization solicit any contributions that were not tax deductible as charitable cont			04		110
b	If"Ye	s," did the organization include with every solicitation an express statement th	at su	ch contributions or gifts			
		not tax deductible?			6b		
7	_	izations that may receive deductible contributions under section 170(c).					
а		ie organization receive a payment in excess of \$75 made partly as a contribution is provided to the payor?		d partly for goods and	7a	Yes	
b		s," did the organization notify the donor of the value of the goods or services pi			7b	Yes	
		re organization sell, exchange, or otherwise dispose of tangible personal proper				1 03	
Ĭ		rm 8282?		· · · · ·	7 c		Νo
d	If"Ye	s," indicate the number of Forms 8282 filed during the year \ldots \ldots	7d				
	D. 111	for the state of t		- I b 6 b t t 2			
е	Dia th	ie organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al benefit contract?	7e		No
f	Did th	ie organization, during the year, pay premiums, directly or indirectly, on a perso	nal b	enefit contract?	7f		No
g	Ifthe	organization received a contribution of qualified intellectual property, did the oi	rganız	ation file Form 8899 as			
	requir	ed?			7g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	, did	the organization file a	7h	Yes	
8		oring organizations maintaining donor advised funds.	•			1 03	
•		donor advised fund maintained by the sponsoring organization have excess bus	ines	s holdings at any time			
	during	g the year?	•		8		
9a	Did th	e sponsoring organization make any taxable distributions under section 49667			9 a		
b	Did th	e sponsoring organization make a distribution to a donor, donor advisor, or rela	ted p	erson [,]	9b		
10	Section	on 501(c)(7) organizations. Enter					
		tion fees and capital contributions included on Part VIII, line 12	10a				
b		receipts, included on Form 990, Part VIII, line 12, for public use of club	10 b				
11	faciliti Section	nes on 501(c)(12) organizations. Enter		1			
		Income from members or shareholders	11a				
		Income from other sources (Do not net amounts due or paid to other sources					
		st amounts due or received from them)..........[11b				
12a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lie	u of Form 1041?	12a		
		s," enter the amount of tax-exempt interest received or accrued during the					
-	year		12b				
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.					
2	Ic tha	organization licensed to issue qualified health plans in more than one state? N o	oto C	ee the instructions for			
d		onal information the organization must report on Schedule O	J.E. 3	ree the instructions for	13a		
b	Enter	the amount of reserves the organization is required to maintain by the states					
		ch the organization is licensed to issue qualified health plans	13b				
С	Enter	the amount of reserves on hand	13 c				
14a	Did th	e organization receive any payments for indoor tanning services during the tax	year	?	14a		No
b	If"Ye	s," has it filed a Form 720 to report these payments? If "No," provide an explana	tion ir	Schedule O	14b		

Part VI	Governance,	Management,	and	Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below,

I OI Cacii	103	response to	Jinica Z tinio	agii 10 below	r, and for a	140 1	csponse to mics	00, 00, 01	TOD DCION
describe	the ci	ırcumstance	s, processes,	or changes	ın Schedule	O. See	e instructions.		

	Check if Schedule O contains a response or note to any line in this Part VI			🗸
Se	ction A. Governing Body and Management	-		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 29			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 28			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
0a	Did the organization have local chapters, branches, or affiliates?	10 a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12 a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
4	Did the organization have a written document retention and destruction policy?	14	Yes	
5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
7	List the States with which a copy of this Form 990 is required to be filed▶			
8	FL Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

State the name, address, and telephone number of the person who possesses the organization's books and records ▶DENA SMITH MOTE MARINE LABORATORY 1600 KEN THOMPSON PARKWAY SARASOTA, FL 34236 (941) 388-4441

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

interest policy, and financial statements available to the public during the tax year

Part VII

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (B) (C) (D) (F) (A) (E) Name and Title Average Position (do not check Reportable Reportable Estimated hours per more than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations from the (W-2/1099for related 2/1099-MISC) organization and Former Highest compensat employee Individual trustee É organizations MISC) related ũ stitutional below organizations employee 更合 dotted line) Trustee See Additional Data Table

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director		Officer	Highest compensated employee		Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table										
1b Sub-Total			•			•				L
c Total from continuation shee d Total (add lines 1b and 1c)	•		٠.	٠.		•		1,072,667	5,500	180,509
Total number of individuals (i \$100,000 of reportable comp	ncluding but not	lımıted t	o the	se I		d abov	e) wh	no received more th	an	

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

compensation from the organization Report compensation for the cale	endar year ending with or within the organization	n's tax year
(A) Name and business address	(B) Description of services	(C) Compensation
SARASOTA BAY EXPLORERS	ECO-TOURISM BOAT TOURS	568,523
1923 LINCOLN DRIVE SARASOTA, FL 34236		
PARADISE ADVERTISING AND MARKETING INC	MARKETING SERVICES	435,212
150 2ND AVE N STE 800 SAINT PETERSBURG, FL 33701		
WILLIS A SMITH CONSTRUCTION INC	BUILDING CONTRACTOR	416,377
5001 LAKEWOOD RANCH BLVD N SARASOTA, FL 34240		
MANCINI DINERS	DINER AT MOTE AQUARIUM	381,265
4411 BEAUCHAMP COURT SARASOTA, FL 34243		
DEVELOPMENT GUILDDDI INC	CAMPAIGN CONSULTANT	237,524
233 HARVARD STREET STE 107 BROOKLINE, MA 02446		
2 Total number of independent contractors (including but not limited to the	nose listed above) who received more than	

Yes

No

orm 99	90 (20	15)						Page S
Part V	/##1	Statement o						_
		Check if Sched	ule O contains a respon	se or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
rants ounts	1a	Federated cam	paigns 1a					
ant	b	Membership du	ies 1b					
ي ق	С	Fundraising ev	ents 1c	383,474				
ifts. ar A	d	Related organiz	zations 1d	1,190,137				
9 <u>∺</u>	е	Government grant	s (contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions	ons, gifts, grants, and 1f ot included above	11,104,688				
	g	Noncash contributi 1a-1f \$	ons included in lines	927,439		İ		İ
	h	Total. Add lines	s 1a-1f		12,678,299			
				Business Code				
ž L	2a	RESEARCH		541700	6,394,998	6,394,998		
₹ ₹	b	AQUARIUM		713990	3,769,746	3,769,746		
l ce	С	PROTECT OUR RE	EFS - LICENSE PLATE	900099	926,381	926,381		
ΣĘ	d	MEMBERSHIPS		900099	866,191	866,191		
Program Service Revenue	е	EDUCATION AND E	DISTANCE LEARNING	611710	575,974	575,974		
	f	All other progra	am service revenue		736,886	736,886		
<u>~</u>	g	Total. Add lines	s 2a-2f	•	13,270,176			
	3		ome (including dividence ar amounts)		32,583			32,583
	4	Income from inves	stment of tax-exempt bond p	proceeds ►				
	5	Royalties .		•				
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental						
	_	expenses Rental income						
	d	or (loss)	me or (loss)					
	_ u	Net rental income or (loss) (i) Securities		(II) O ther				
	7a	Gross amount from sales of assets other than inventory	393,579	44,081				
	ь	Less cost or other basis and sales expenses	394,664	20,793				
	С	Gain or (loss)	-1,085	23,288				
	d	Net gain or (los	ss)	· · · ·•	22,203			22,203
Other Revenue	8a	events (not inc \$383	luding 6,474 s reported on line 1c) ne 18					
her	h	Lace direct	penses b	146,885				
5	c		(loss) from fundraising e	256,174 events ►	-109,289			-109,289
		Gross income f	rom gaming activities ne 19	,				
	ь	less director	penses b					
			(loss) from gaming activ	/ities				
	100	Cross salas of	unwentery less	•				1
	100	Gross sales of returns and allo		1,025,140				
	b c	_	oods sold b (loss) from sales of inve	457,953	567,187			567,187
		Miscellaneou	s Revenue	Business Code				
	11a							
	b							
	c	• 11 - 11						
	d e	All other reven Total. Add lines	L					
	е			•				
	12	Total revenue.	See Instructions	· · · •	26,461,159	13,270,176		0 512,684

Part IX Statement of Functional Expenses

oction E01/c1/21 and E01/c1/4) organizations must complete	all columns All other	organizations must con	oploto column (A)

	<u>_</u>				
	ot include amounts reported on lines 6b, o, 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	87,790	87,790		
2	Grants and other assistance to domestic individuals See Part IV, line 22	208,890	208,890		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	469,234	135,529	285,230	48,475
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	8,487,204	6,789,521	1,338,030	359,653
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	497,997	401,625	67,599	28,773
9	Other employee benefits	677,698	523,592	116,595	37,511
10	Payroll taxes	670,012	E12 600	119,522	26 901
11	Fees for services (non-employees)	670,012	513,689	119,522	36,801
a	Management				
b	Legal	24,638	11,649	12,989	
c	Accounting	38,200	,	38,200	
d	Lobbying	164,351		·	164,351
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,697,058	1,184,076	91,195	421,787
12	Advertising and promotion	452,815	338,559	3,849	110,407
13	Office expenses	1,102,134	958,383	92,341	51,410
14	Information technology				
15	Royalties				
16	Occupancy	822,312	565,108	253,388	3,816
17	Travel	392,005	357,439	5,014	29,552
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	42,404	38,716	1,227	2,461
20	Interest	182,828	139,529	43,299	
21	Payments to affiliates			. = :	
22	Depreciation, depletion, and amortization	2,326,820	557,653	1,769,167	
23 24	Insurance	476,018	259,208	210,567	6,243
а	EQUIPMENT RENTAL & MAIN	1,287,603	787,128	468,209	32,266
b	SUPPLIES	541,948	538,674	3,274	
c	INTERNAL RENTALS	0	125,577	-134,948	9,371
d	OVERHEAD ALLO CATION	0	2,477,536	-2,477,536	
е	All other expenses	277,700	237,553	26,196	13,951
25	Total functional expenses. Add lines 1 through 24e	20,927,659	17,237,424	2,333,407	1,356,828
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

	990 (2	•			Page 11
Par	ťΧ	Charle of Cabadula O contains a regions of note to any line in this Bart V			_
		Check if Schedule O contains a response or note to any line in this Part X	(A)	· ·	(B)
			Beginning of year		End of year
	1	Cash-non-interest-bearing	1,957,406	1	6,585,957
	2	Savings and temporary cash investments	2,553,984	2	2,558,020
	3	Pledges and grants receivable, net	4,593,825	3	4,450,342
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
SS	7	Notes and loans receivable, net	1,400,000	7	1,300,000
⋖	8	Inventories for sale or use	127,571	8	128,640
	9	Prepaid expenses and deferred charges	77,996	9	33,433
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 58,867,463			00,400
	Ь	Less accumulated depreciation 10b 37,121,224	22,447,344	10 c	21,746,238
	11	Investments—publicly traded securities		11	, ,
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	16,945,790	15	16,053,412
	16	Total assets. Add lines 1 through 15 (must equal line 34)	50,103,916	16	52,856,042
	17	Accounts payable and accrued expenses	1,059,617	17	1,006,783
	18	Grants payable		18	, ,
	19	Deferred revenue	7,538,194	19	7,491,573
	20	Tax-exempt bond liabilities		20	, ,
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
_		persons Complete Part II of Schedule L		22	
Liabi	23	Secured mortgages and notes payable to unrelated third parties	8,595,375	23	7,387,017
_	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			
			607,814	25	610,278
	26	Total liabilities. Add lines 17 through 25	17,801,000	26	16,495,651
Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ↓ and complete lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets	14,382,374	27	16,231,252
Ba	28	Temporarily restricted net assets	7,748,283	28	9,763,008

10,172,259

32,302,916

50,103,916

29

30

31

32

33

34

10,366,131

36,360,391

52,856,042 Form 990 (2015)

Permanently restricted net assets

Capital stock or trust principal, or current funds . .

Total net assets or fund balances

complete lines 30 through 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and

Paid-in or capital surplus, or land, building or equipment fund . . .

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

29

30

31

32 33

34

Prior period adjustments . 8

Other changes in net assets or fund balances (explain in Schedule O) . 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, 10 column (B)) Part XIII Financial Statements and Reporting

-1,474,74936,360,391

Check if Schedule O contains a response or note to any line in this Part XII Yes No

▽ Cash ✓ Accrual COther If the organization changed its method of accounting from a prior year or checked "Other," explain in

1 Accounting method used to prepare the Form 990 Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Νo If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 2b **b** Were the organization's financial statements audited by an independent accountant? Yes

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both

Separate basis Consolidated basis Both consolidated and separate basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c Yes If the organization changed either its oversight process or selection process during the tax year, explain in

Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the 3a Yes Single Audit Act and OMB Circular A-133?

3b

Yes Form 990 (2015)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Software ID: Software Version:

EIN: 59-0756643

Name: MOTE MARINE LABORATORY INC

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

(Code 2,217,472 including grants of \$ 87,790) (Revenue \$ 2,529,458) PROTECT OUR REEFSFLORIDA HAS THE ONLY BARRIER CORAL REEF SYSTEM IN THE CONTINENTAL U.S. IT'S LIKE HAVING THE GRAND CANYON UNDERWATER - A NATURAL TREASURE THAT TOOK MILLIONS OF YEARS TO CREATE AND DESERVES OUR PROTECTION SADLY, CORALS ARE IN DECLINE WORLDWIDE RESEARCH IS HELPING TO UNDERSTAND WHY AND WHAT TO DO ABOUT IT EDUCATION AND CONSERVATION EFFORTS CAN HELP REDUCE HUMAN IMPACT ON THESE PRECIOUS RESOURCES, AND INNOVATIVE CORAL RESTORATION RESEARCH CAN HELP BRING CORAL REEFS BACK FROM THE BRINK OF DISAPPEARING FROM OUR OCEANS TO HELP SUPPORT MARINE RESEARCH, CONSERVATION AND EDUCATION EFFORTS DESIGNED AT SAVING FLORIDA'S REEF, MOTE MARINE LABORATORY SPONSORED THE CREATION OF THE PROTECT OUR REEFS SPECIALTY LICENSE PLATE IN FLORIDA THE PLATE WAS APPROVED BY THE FLORIDA LEGISLATURE IN JULY 2003 MOTE ADMINISTERS THESE FUNDS FOR EACH REEF PLATE PURCHASED BY A FLORIDA-LICENSED DRIVER, \$25 IS USED TO SUPPORT CORAL REEF RESEARCH, CONSERVATION AND OUTREACH PROGRAMS, INCLUDING A SPECIAL PROTECT OUR REEFS GRANTS PROGRAM IN ADDITION TO SUPPORTING MOTE RESEARCH PROGRAMS, THIS PROGRAM ALLOWS OTHER FLORIDA-BASED ORGANIZATIONS TO APPLY FOR FUNDS FOR STUDIES THAT ARE DESIGNED TO HELP UNDERSTAND THE ISSUES OUR REEFS ARE FACING AND INVESTIGATE WAYS TO IMPROVE REEF HEALTH 37 5% OF REVENUES SUPPORTS GRANTS AND AN ADDITIONAL 37 5% OF REVENUES SUPPORTS MOTE CORAL REEF RESEARCH IN 2015, THE PROTECT OUR REEFS LICENSE PLATE SALES RAISED \$336,225 FOR GRANTS FOCUSED ON CORAL REEF RESEARCH, RESTORATION, EDUCATION AND CONSERVATION THESE EFFORTS ARE HELPING SOCIETY GAIN A MORE COMPREHENSIVE PICTURE OF WHY CORALS ARE IN DECLINE AND THE FACTORS THAT KEEP CORALS HEALTHY THE OUTREACH PROGRAMS HELP FLORIDA RESIDENTS AND TOURISTS BETTER UNDERSTAND CORAL REEF ECOSYSTEMS AND HOW HUMAN ACTIVITY AFFECTS THEM AND HOW THEY CAN PROACTIVELY ASSIST IN PROTECTING AND RESTORING CORAL REEFS FLORIDA DRIVERS WHO PURCHASE THE STATE'S PROTECT OUR REEFS SPECIALTY LICENSE PLATE ARE SUPPORTING PROGRAMS LIKE THIS THAT HELP US ATTACK CORAL REEF PROBLEMS ON A NUMBER OF FRONTS AQUACULTURE PARKMOTE AQUACULTURE PARK FACILITY OPERATIONSMOTE HAS A 200-ACRE, STATE-OF-THE-ART AQUACULTURE RESEARCH FACILITY SUPPORTING THE CONSERVATION OF THE WORLD'S FISHERIES AND SUSTAINABLE SEAFOOD PRODUCTION THE PARK INCLUDES MORE THAN 125,000 SQUARE FEET OF RESEARCH AND DEVELOPMENT FACILITIES DEDICATED TO MOTE'S MARINE AND FRESHWATER AQUACULTURE RESEARCH PROGRAM AND TO SUSTAINABLE PRODUCTION OF SIBERIAN STURGEON AND CAVIAR THE STURGEON AND CAVIAR OPERATION, PIONEERED BY MOTE, IS NOW OPERATED BY THE HEALTHY EARTH BRAND OF THE COMPANY SOUTHEAST VENTURE HOLDINGS, WHICH PURCHASED ITS LICENSE IN 2014 MOTE STILL OWNS THE ENTIRE 200-ACRE PARK AND CONTINUES RESEARCH THERE AT THE PARK, MOTE SCIENTISTS STUDY THE GROWTH, SPAWNING, HEALTH AND OTHER CHARACTERISTICS OF SALTWATER SPECIES SUCH AS COMMON SNOOK. POMPANO AND RED DRUM FOR RESTOCKING PROGRAMS. RESEARCH AND TECHNOLOGY DEVELOPMENT FOR SUSTAINABLE SEAFOOD PRODUCTION THROUGH ITS EFFORTS WITH FRESHWATER SIBERIAN STURGEON. IN 2006 MOTE BECAME THE FIRST ORGANIZATION IN FLORIDA TO PRODUCE CAVIAR - DEMONSTRATING THAT LARGE-SCALE AQUACULTURE PRODUCTION USING WATER RECIRCULATING TECHNOLOGIES WAS FEASIBLE IN THE STATE 2015 HIGHLIGHTS MOTE-AQUACULTURED, SALTWATER FISH AND VEGETABLES MADE THEIR WAY INTO SOUTHWEST FLORIDA'S ECO-FRIENDLY FOOD SCENE SEA VEGETABLES AND RED DRUM (REDFISH) GROWN AT MOTE AQUACULTURE RESEARCH PARK USING MARINE AQUAPONICS - RAISING SEAFOOD WHILE USING THE WASTEWATER TO FERTILIZE SALT-LOVING CROPS -WERE SOLD IN 2015 TO RESTAURANTS FROM SARASOTA TO TAMPA, AND ITS SEA PURSLANE AND SALTWORT - EDIBLE SEA VEGETABLES - WERE BEING SERVED IN LOCAL RESTAURANTS AND SOLD AT THE SARASOTA FARMERS MARKET MOTE SCIENTISTS AND THEIR COLLABORATORS WON A SOUTHWEST FLORIDA INNOVATORS' COMPETITION LIKENED TO THE XPRIZE THE PROJECT "HEALTHY EARTH-GULF COAST SUSTAINABLE SEAFOOD SYSTEM" WON THE GULF COAST INNOVATION CHALLENGE'S GRAND PRIZE - A \$375,000 GRANT THE PROJECT AIMS TO BUILD A THRIVING, LOCAL SEAFOOD INDUSTRY, ESPECIALLY BY ENHANCING THE SUSTAINABILITY AND ECONOMIC IMPACT OF THE HERITAGE FISHERY FOR GREY STRIPED MULLET THAT IS BASED IN CORTEZ, FLORIDA MOTE RESEARCHERS, KNOWN INTERNATIONALLY FOR THEIR EXPERTISE WITH SUSTAINABLE FISH FARMING, WILL PLAY A LEAD ROLE IN DEVELOPING AND TESTING THE FISH MEAL AND OIL DERIVED FROM MULLET BYPRODUCTS MOTE HOSTED CHINESE SCIENTISTS FROM THE YELLOW SEA FISHERIES RESEARCH INSTITUTE (YSFRI), WHO MET WITH MOTE'S AOUACULTURE AND FISHERIES SCIENTISTS TO EXCHANGE KNOWLEDGE UNDER A LONG-TERM AGREEMENT DESIGNED TO BENEFIT FISHERIES FIVE YEARS AFTER THE DEEPWATER HORIZON OIL SPILL, MOTE SENIOR SCIENTISTS DR DANA WETZEL AND DR KEVAN MAIN CONTINUED TO ADVANCE RELATED RESEARCH, STUDYING HOW SPECIFIC LEVELS OF OIL COMPONENTS AFFECT FISH UNDER HIGHLY CONTROLLED CONDITIONS IN THE LAB LAB STUDIES HAVE FOCUSED ON RED DRUM, POMPANO, AND SOUTHERN FLOUNDER AT MOTE AQUACULTURE RESEARCH PARK MEMBERSHIPIN 2015, MOTE MARINE LABORATORY AND AQUARIUM WAS FORTUNATE TO CONTINUE STRENGTHENING OUR 7,200 HOUSEHOLD MEMBERSHIP PROGRAM MEMBERSHIP DUES PROVIDE UNRESTRICTED FUNDS THAT ARE PUT TO WHERE THE NEED IS GREATEST ANNUALLY TO SUPPORT MOTE'S OVERALL MISSION OF RESEARCH AND EDUCATION INDIVIDUAL MEMBERSHIP LEVELS BEGIN AT \$65 AND RISE TO \$1,000 MEMBERSHIP BENEFITS INCLUDE UNRESTRICTED VISITS TO MOTE AQUARIUM WITH THE NUMBER OF GUESTS ALLOWED BASED ON INDIVIDUAL MEMBERSHIP LEVELS, DISCOUNTS IN THE AQUARIUM SHOPS, FREE SPECIAL MEMBER-ONLY EVENTS, DISCOUNTS ON EDUCATION PROGRAMS AND CAMPS, FREE AND DISCOUNTED ADMISSIONS TO MORE THAN 100 ZOOS AND AQUARIUMS ACROSS THE UNITED STATES AND MUCH MORE FOR A COMPLETE LIST OF MEMBERSHIP LEVELS, BENEFITS AND OPPORTUNITIES PLEASE VISIT OUR WEBSITE AT WWW MOTE ORG/MEMBERSHIP

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde					1 4.	3000	3, 1	tey Employed	23, mgnest	
(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
ALAN ROSE TRUSTEE	5 00	x						0	0	C
ARTHUR ARMITAGE CHAIRMAN EMERITUS	5 00	x						0	0	C
DEAN EISNER TRUSTEE	5 00	x						0	0	C
EDWARD H JENNINGS TRUSTEE	5 00	x						0	0	(
FREDERICK M DERR PE CHAIRMAN EMERITUS	5 00	x						0	0	(
HOWARD SEIDER JR MD	5 00	x						0	0	(

5 00

5 00

5 00

5 00

Х

Χ

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

JOHN DART

JUDY GRAHAM CHAIRMAN EMERITUS

JAMES D ERICSON

JEANIE STEVENSON

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde					ı ı u	3100	3, 1	tey Employe	es, ingliest	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unle:	ore t ss pe	han erso cer	not one n is and trus			(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
KIRK MALCOLM TRUSTEE	5 00	x						0	0	C
MARY LOU JOHNSON TRUSTEE	5 00	x						0	0	(
MAURICE CUNNIFFE TRUSTEE	5 00	×						0	0	(
NIGEL MOULD TRUSTEE	5 00	×						0	0	(
PAUL CARREIRO TRUSTEE	5 00	x						0	0	C
PENELOPE KINGMAN TRUSTEE	5 00	×						0	0	(
RANDE RIDENOUR	5 00							_	_	_

5 00

5 00

5 00

Х

Χ

TRUSTEE

TRUSTEE

RICHARD O DONEGAN

CHAIRMAN EMERITUS

ROBERT CARTER

GENE BECKSTEIN CHAIRMAN EMERITUS

.....

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

19,760

21,279

5,500

Compensated Employees, and Inde	pendent Co	ntrac	tors	5				1	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unles	ore t ss pe	han rso cer cor/t	not one n is and trus		(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
RONALD CIARAVELLA TRUSTEE	5 00	×					0	0	0
SCOTT COLLINS TRUSTEE	5 00	×					0	0	0
SUSAN C GILMORE TRUSTEE	5 00	×					0	0	0
TRUDO LETSCHERT TRUSTEE	5 00	×					0	0	0
G LOWE MORRISON CHAIRMAN	5 00	×		×			0	0	0
ROBERT ESSNER VICE CHAIRMAN	5 00	×		×			0	0	0

5 00

5 00

40 00

40 00

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285,994

100,001

LT GEN HOWARD G CROWELL JR

.....

CFO & VP, ADMINISTRATION

MICHAEL P CROSBY PHD

TREASURER

SECRETARY

MICKEY CALLANEN

PRESIDENT/CEO

DENA J SMITH

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	and related organizations	
DAVID VAUGHAN PHD	40 00					х		136,365	0	27,91	
SR SCIENTIST											
JOHN REYNOLDS III PHD SR SCIENTIST	40 00					x		127,187	0	33,82	
KENNETH LEBER PHD SR SCIENTIST	40 00					х		134,798	0	23,948	
KUMAR MAHADEVAN PH D OUTREACH	40 00					х		157,420	0	15,549	

130,902

38,237

40 00

ROBERT HUETER PHD

SR SCIENTIST

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hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

described in section 170(b)(1)(A)(vi). (Complete Part II)

D. blic Oberit Otel and D. blic O. . .

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization that normally receives a substantial part of its support from a governmental unit or from the general public

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

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

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

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

A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

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

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

OMB No 1545-0047

2015

Open to Public Inspection

DLN: 93493319039536

59-0756643

Treasury
Internal Revenue Service

Name of the organization

MOTE MARINE LABORATORY INC

SCHEDULE A

(Form 990 or

990EZ)

Part I

1

2

3

Department of the

www.irs.gov/form990.

Employer identification number

An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other listed in your governing organization monetary support support (see (described on lines document? (see instructions) instructions) 1-9 above (see instructions)) Yes No Total Cat No 11285F For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ. Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a)2011 (b)2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 2,729,063 3,007,908 4,217,004 12,678,299 4,826,927 27,459,201 membership fees received (Do not include any unusual grants) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 2,729,063 3,007,908 4,217,004 4,826,927 12,678,299 27,459,201 The portion of total contributions by each person (other than a governmental unit or publicly 3.883.657 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column

6	Public support. Subtract line 5 from line 4							23,575,544
S	ection B. Total Support							
10)	Calendar year fiscal year beginning in) ▶	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 20	15	(f) Total
7	Amounts from line 4	2,729,063	3,007,908	4,217,004	4,826,927	12	2,678,299	27,459,201
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	24,641	38,376	42,874	55,103		32,583	193,577
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10							27,652,778
12	Gross receipts from related activi	ties, etc (see inst	tructions)			12		78,742,380

Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 85 260 %

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

Public support percentage for 2014 Schedule A, Part II, line 14 15 15 90 860 %

16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶▽ b 33 1/3% support test-2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2015. 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 ▶□

b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f) ⊤otal
•	iscal year beginning in)	(4)2011	(5)2012	(6)2010	(4)2011	(0)2010	(1)10ta1
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
-	merchandise sold or services						
	performed, or facilities furnished						
	in any activity that is related to						
	the organization's tax-exempt						
	purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit						
	to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and						
	3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ction B. Total Support				1		I
	Calendar year			1	I	I	
(or f	iscal year beginning in)	(a) 2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years.If the Form 990 is f	or the organization	n's first second	thurd fourth or	fifth tay year ac a	section 501/c	V3) organization
14	•	or the organization	on s mist, second	, tillia, louitii, oi	ilitii tax yeal as a	1 5600001 501(0)(3) organization, ▶ □
	check this box and stop here	lia Cunnant D					
	ction C. Computation of Pub						
15	Public support percentage for 2015	(line 8, column	(f) divided by line	: 13, column (f))		15	
16	Public support percentage from 201	l 4 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ae			
17	Investment income percentage for				nn (f))	14-1	
	· · · · · ·	•		•	···· (1 <i>))</i>	17	
18	Investment income percentage from	n 2014 Schedule	A, Part III, line	1 /		18	
19a	33 1/3% support tests—2015. If the	organization did	not check the bo	ox on line 14, and	l line 15 is more t	than 33 1/3%, a	ind line 17 is not
	more than 33 1/3%, check this box	and stop here. T	he organization q	ualıfıes as a publ	icly supported or	ganızatıon	▶┌
b	33 1/3% support tests—2014. If the	organization did	not check a box	on line 14 or line	19a, and line 16	ıs more than 3	3 1/3% and line
	18 is not more than 33 1/3%, check	this box and st	op here. The orga	nızatıon qualıfıes	as a publicly sup	ported organiz	ation 🕨 🗍
20	Private foundation. If the organizati	on did not check	a box on line 14	. 19a. or 19b. ch	eck this box and	see instruction	s ▶⊤ˈ

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, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and complete Part V.)

	I, complete Sections A and D, and complete Part V)			
Se	ction A. All Supporting Organizations			
	Averally of the community of community of community of community of the community of community o		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		
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	2		
	509(a)(1) or (2)			<u> </u>
3а	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		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	3 c		
4a	If "Yes," explain in Part VI what controls the organization put in place to ensure such use Was any supported organization not organized in the United States ("foreign supported organization")?			l
	If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?	4b		
	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			
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	4c		
	organization was used exclusively for section 170(c)(2)(B) purposes			l
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	5b		
c	the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	J.		
	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 II 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		
c	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 .	9 c		
0a	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 determine whether the organization had excess business holdings)	10 b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11 a		
	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		

Part IV	Supporting	Organizations	(continued

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Section	n R	Tyne	T Si	innorting	Orga	nization	_

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		

Section C. Type II Supporting Organization	Section	C.	Type	II	Supporting	Organization	s
--	---------	----	------	----	------------	--------------	---

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or			
	trustees of each of the organization's supported organization(s)?			
	If "No," describe in Part VI how contiol or management of the supporting organization was vested in the same persons			
	that controlled or managed the supported organization(s)	1		

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes." describe in Part VI the role the organization's supported organizations played in this regard	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satis	fy the Integral Part Test during the year (see instructions)

- The organization satisfied the Activities Test Complete line 2 below
- The organization is the parent of each of its supported organizations. Complete line 3 below

С		i ne orga instructi	nization supported a governmental entity. Describe in Part VI now you supported a government entity (see ons)	эe
2	<u>A ctivit</u>	ies Test	_Answer (a) and (b) below.	Y
а			all of the organization's activities during the tax year directly further the exempt purposes of the	

	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a	
	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	
3	Parent of Supported Organizations Answer (a) and (b) below.		

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of 3a each of the supported organizations? Provide details in Part VI
- **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

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
i	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		
,	Other expenses (see instructions)	7		
;	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)
	Aggregate fair market value of all non-exempt-use assets (see	1		
_	instructions for short tax year or assets held for part of year)	—		
a L	A verage monthly value of securities	1a 1b		
b	A verage monthly cash balances			
C	Fair market value of other non-exempt-use assets	1c 1d		+
d	Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors	La		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	quired)		
6 Other distributions (describe in Part VI) See instru	ictions		
·	20010115		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		T	T
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
<u>c</u>			
d From 2013			
e From 2014			
f Total of lines 3a through e g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
d From 2014			
e From 2015			
			(F 000 000 F7) /2.01 F

DLN: 93493319039536

Employer identification number

59-0756643

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

MOTE MARINE LABORATORY INC

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

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

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

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

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

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Par	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.
1 2 3	Provide a description of the or Political expenditures Volunteer hours	ganization's direct and indirect po	blitical campaign act	civities in Part IV ▶	\$
Par	t I-B Complete if the or	ganization is exempt und	er section 501 (c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization	under section 4955	>	\$
2	Enter the amount of any excise	e tax incurred by organization ma	nagers under sectio	n 4955 >	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form	4720 for this year?		☐ Yes ☐ No
4 a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt und	er section 501(c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed t	o other organization:	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter h	ere and on Form 112	!0-POL, line 17b ►	\$
4	Did the filing organization file	orm 1120-POL for this year?			Yes No
5	Enter the names, addresses all organization made payments amount of political contribution separate segregated fund or a	om the filing organization's f to a separate political orga	unds Also enter the nization, such as a		
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2					
3					
4					
5					
6					
For P	Paperwork Reduction Act Notice, s	ee the instructions for Form 990 or	990-EZ.	Cat No 50084S Schedule C (I	Form 990 or 990-EZ) 2015

Subtract line 1f from line 1c If zero or less, enter -0-

(150% of line 2d, column (e))

Grassroots lobbying expenditures

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

A Check ightharpoonup [if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,

	Limits on Lobb	box A and "limited control" provisions apply bying Expenditures means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public lobbying) Total lobbying expenditures to influence a legi			
b	Total lobbying expenditures to inituence a legi-	164,351		
c	Total lobbying expenditures (add lines 1a and	164,351		
d	Other exempt purpose expenditures		20,763,306	
e	Total exempt purpose expenditures (add lines	20,927,657		
f	Lobbying nontaxable amount Enter the amoun	t from the following table in both columns	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000			
	Craceworks portovable amount (orter 35% of			
g	Grassroots nontaxable amount (enter 25% of	ine II)	250,000	
h	Subtract line 1g from line 1a If zero or less, e	nter -0-	0	

reporting section 4911 tax for this year?

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

	4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000			
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000			
_c	Total lobbying expenditures	110,967	133,687	158,196	164,351	567,201			
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000			
e	Grassroots ceiling amount					1,500,000			

Return Reference

	filed Form 5768 (election under section 501(h)).		-1	/1-	`
or e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	<u>(b</u>	
ctiv	ity	Yes	No	A mou	ınt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	163			
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				
а	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
ar	t III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	01 (c)(5), c	or secti	on
			_	Yes	<u> </u>
L	Were substantially all (90% or more) dues received nondeductible by members?		-	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		<u> </u>	2	_
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
aı	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				
	Dues, assessments and similar amounts from members	1			
1	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).	_	I		
	Current year	2 a			
2 a	·	2a 2b			
a b	Current year Carryover from last year Total	2b 2c			
a b c	Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2b			
1 2 a b c 3	Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	2b 2c 3			
2 a b c	Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2b 2c			

Explanation

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SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at $\underline{www.irs.gov/form990}$.

OMB No 1545-0047

Open to Public

DLN: 93493319039536

Department of the Treasury Internal Revenue Service Name of the organization MOTE MARINE LABORATORY INC

Inspection **Employer identification number**

						756643		
Pa	rt I Organizations Maintaining Donor				unds o	or Accounts	·.	
	Complete if the organization answere	(a) Donor advised fund		•	(b)	Funds and oth	or account	
1	Total number at end of year	(a) Donor advised fund	us		(6)	Funds and oth	er account	5
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor a funds are the organization's property, subject to				nor advis	sed	☐ Yes	□No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?			, ,		purpose	┌ Yes	□ No
Pa	rt II Conservation Easements. Comple	ete if the organization	ı a	answered "Yes"	on Forn	n 990. Part I	•	1 110
1	Purpose(s) of conservation easements held by th	_						
	Preservation of land for public use (e.g., recreducation)		_	Preservation of	an histor	ically importai	at land area	<u>.</u>
	Protection of natural habitat	I F	_	Preservation of				1
	Preservation of open space	ı		Preservation of	a Certifie	a mstone stru	cture	
_	·				+l <i>6</i>		.	
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	neia a qualifiea conserva	ati	on contribution in	tne form	or a conserva	tion	
	,					Held at the	End of the	e Year
а	Total number of conservation easements				2a			
b	Total acreage restricted by conservation easeme	ents			2b			
c	Number of conservation easements on a certified	historic structure includ	de	dın (a)	2c			
d	Number of conservation easements included in (historic structure listed in the National Register	c) acquired after 8/17/06	6,	and not on a	2d			
3	Number of conservation easements modified, tra	nsferred, released, exting	gu	ııshed, or termınat	ted by th	e organization	during the	
	tax year ▶							
4	Number of states where property subject to cons	ervation easement is loc	at	ted ▶				
5	Does the organization have a written policy regar violations, and enforcement of the conservation of	ding the periodic monito		•	ndling of	⊏ ∨	es □N	lo
6	Staff and volunteer hours devoted to monitoring, year		ıol	lations, and enfor	cing cons	•	•	
	>							
7	A mount of expenses incurred in monitoring, inspenses	ecting, handling of violati	101	ns, and enforcing	conserva	tion easemen	ts during th	ne year
8	Does each conservation easement reported on II	ne 2(d) above satisfy the	e r	equirements of se	ction 17		_	
9	(B)(I) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization repor				•		and .	lo
	balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	sements						
εŪ	t III Organizations Maintaining Collect Complete if the organization answere				or Oth	ier Similar	ASSETS.	
1a	If the organization elected, as permitted under SI works of art, historical treasures, or other similar	FAS 116 (ASC 958), not assets held for public ex	t to xh	o report in its reve hibition, education	, or resea	arch in furthera		
	service, provide, in Part XIII, the text of the foot If the organization elected, as permitted under SI						e cheet	
b	works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public ex		•				lic
((i) Revenue included on Form 990, Part VIII, line	L			> \$			
(i	i) Assets included in Form 990, Part X							
2	If the organization received or held works of art, to following amounts required to be reported under S				for financ			
а	Revenue included on Form 990, Part VIII, line 1					▶ \$		
	·							

Assets included in Form 990, Part X

Part	31111	Organizations Maintaining (continued)	Collections of A	rt, His	toric	al Tr	easures, or C	Other Similar As	sets
3		g the organization's acquisition, acc ction items (check all that apply)	ession, and other rec	ords, ch	ieck ar	y of th	ne following that	are a significant use	of its
а		Public exhibition		d	Г	Loan	or exchange prog	ırams	
b		Scholarly research		е	Г	Other	-		
c		Preservation for future generations							
4	Provi Part :	de a description of the organization XIII	's collections and exp	olaın hov	v they	furthe	r the organizatior	ı's exempt purpose ı	n
5	asset	g the year, did the organization soli is to be sold to raise funds rather th	an to be maintained a						☐ No
Par	t IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form !	990, F	art I	V, line 9, or rep	ported an amount	on Form 990,
1a		e organization an agent, trustee, cus ded on Form 990, Part X?	stodian or other interi	mediary	for co	ntrıbut	ions or other ass	ets not Yes	√ No
b	If'	"Yes," explain the arrangement in P	art XIII and complete	e the fol	lowing	table		A mo	unt
c	Ве	ginning balance					1c		
d	A d	ditions during the year					1d		
e	Dis	stributions during the year					1e		
f	En	dıng balance					1f		
2 a	Did th	ne organization include an amount o	n Form 990, Part X, I	ine 21,	for esc	row or	custodial accou	nt liability? Yes	☐ No
<u>ь</u>		es," explain the arrangement in Part							Ц
Pa	rt V	Endowment Funds. Comple							
1.	Pogur	oning of year balance	(a)Current year 618,670	(b) Pno	or year 618,0	-	(c)Two years back 615,933	(d)Three years back 614,327	(e)Four years back 614,696
1a b	_	nning of year balance ributions	010,070		010,	,40	013,933	014,327	014,090
c		nvestment earnings, gains, and	418		2 /	555	-4,109	6,395	5,879
	losse		410		-,	,55	4,103	0,333	3,073
d		ts or scholarships · · · ·							
e		r expenditures for facilities programs	1,268		2,0)25	6,216	4,789	6,248
f	• A dmi	nistrative expenses				_			
g		of year balance	617,820		618,0	570	618,040	615,933	614,327
,									
2	Provi	de the estimated percentage of the	current year end bala	nce (lın	e 1g, d	olumr	n (a)) held as		
а	Board	d designated or quasi-endowment ▶							
b	Perm	anent endowment ▶ 99 070 %							
c	,	oorarily restricted endowment ► percentages on lines 2a, 2b, and 2c	0 930 % should equal 100%						
3а		here endowment funds not in the po nization by	ssession of the organ	ization t	that ar	e held	and administere	d for the	Yes No
	• •	nrelated organizations			•			3a(-
b		elated organizations es" on 3a(ii), are the related organiz	ations listed as requi	red on 9	 Schedi	le D2		3a(i	'
4		ribe in Part XIII the intended uses							<u>' </u>
	t VI	Land, Buildings, and Equip			Circ rar				
		Complete if the organization		orm 9	90, Pa	rt IV	, line 11a.See	Form 990, Part X,	line 10.
		Description of property			(a) st or oth (investr	er bası:	(b) Cost or other bas (other)	Accumulated (c) depreciation	(d)Book value
1a	Land						7,498,1	90	7,498,190
b	Buildir	ngs							
							34,088,4	85 22,527,860	11,560,625
		hold improvements		.				05 12 - 11 1	0.51-
	Equipr Other	nent		.			14,560,3	95 12,541,135	2,019,260
	C LIPE						i i	i	

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

21,746,238

XIII 🔼

Part VII Investments—Other Securities. C See Form 990, Part X, line 12.	Complete if the orga	nızatıon answered 'Y	es' on Form 990, Part IV, line 11b.
(a) Description of security or catego (including name of security)	ry	(b) Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives			, , , , , , , , , , , , , , , , , , , ,
(2)Closely-held equity interests			
(3) O ther			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related.	•		
Complete if the organization answer	ed 'Yes' on Form 99		
(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
			Cost of cita of year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. Complete if the organiza	tion answered 'Yes' on	Form 990, Part IV, line	e 11d See Form 990, Part X, line 15
	scription		(b) Book value
(1) BENEFICIAL INTEREST IN MOTE MARINE FOUN (2) DUE FROM MOTE MARINE FOUNDATION	DATION, INC		14,468,605 326,769
(3) DONATED ASSETS HELD FOR SALE			103,105
(4) PATENTS			96,254
(5) CONSTRUCTION IN PROGRESS			448,401
(6) INVESTMENT IN DEFERRED COMPENSATION PL	_A N		610,278
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15)		▶ 16,053,412
Part X Other Liabilities. Complete if the or	rganızatıon answere	d 'Yes' on Form 990	, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.	42.5		
1. (a) Description of liability	(b) Book valu	ie l	
Federal income taxes			
DEFERRED COMPENSATION PAYABLE	610	,278	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	610	,278	
2. Liability for uncertain tax positions In Part XIII, pro			
organization's liability for uncertain tax positions under	TIN 48 (ASC /40) C	neck here if the text of '	the roothote has been provided in Part

Schedule D (Form 990) 2015

1

2

Part XIII

information

PART V, LINE 4

Return Reference

25,703,759

	Donated services and use of facilities	2b	4,500		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)				
		2d	-1,474,751		
е	Add lines 2a through 2d		 	2e	-1,471,527
3	Subtract line 2e from line 1			3	27,175,286
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)	4b	-714,127		
c	Add lines 4a and 4b			4c	-714,127
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)	 [5	26,461,159
	Reconciliation of Expenses per Audited Financial St			-	
	Complete if the organization answered 'Yes' on Form 990,			1	
1	Total expenses and losses per audited financial statements			1	21,646,284
1 2				1	21,646,284
	Total expenses and losses per audited financial statements			1	21,646,284
2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25		 	1	21,646,284
2 a	Total expenses and losses per audited financial statements A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities		 	1	21,646,284
2 a b	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2a 2b	 	1	21,646,284
2 a b c	Total expenses and losses per audited financial statements	2a 2b 2c 2d	 4,500	1 2e	21,646,284 718,625
2 a b c d	Total expenses and losses per audited financial statements	2a 2b 2c 2d	 4,500		
2 a b c d	Total expenses and losses per audited financial statements	2a 2b 2c 2d	 4,500	2e	718,625
2 a b c d e	Total expenses and losses per audited financial statements	2a 2b 2c 2d	 4,500	2e	718,625
2 a b c d e 3	Total expenses and losses per audited financial statements	2a 2b 2c 2d	 4,500	2e	718,625
2 a b c d e 3 4	Total expenses and losses per audited financial statements	2a 2b 2c 2d	 714,125 	2e	718,625

2a

-1,276

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional

Explanation

SUPPORT PROGRAM ACTIVITIES AT THE KEYS FACILITY

ALL ENDOWMENT FUNDS ARE HELD IN PERPETUITY WITH THE INCOME USED AS FOLLOWS 1-THE CULTURAL ENDOWMENT FUND INCOME IS USED TO SUPPORT OPERATIONS FOR THE AQUARIUM 2- THE KEYS ADVISORY BOARD ENDOWMENT FUND INCOME IS USED TO

Total revenue, gains, and other support per audited financial statements

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments .

Supplemental Information

Schedule D (Form 990) 2015	Page 5
Part XIII Supplemental	Information (continued)
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN NET ASSETS OF MOTE MARINE FOUNDATION, INC -1,474,751
PART XI, LINE 4B - OTHER ADJUSTMENTS	COST OF GOODS SOLD NETTED WITH SALES INCLUDED IN PART VIII FORM 990 -457,953 SPECIAL EVENTS EXPENSES INCLUDED IN PART VIII FORM 990 -256,174
PART XII, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD NETTED WITH SALES INCLUDED IN PART VIII FORM 990 457,953 SPECIAL EVENTS EXPENSES INCLUDED IN PART VIII FORM 990 256,174 ROUNDING -2
•	

Schedule D (Form 990) 2015

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DLN: 93493319039536

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" on 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

2015

Open to Public Inspection

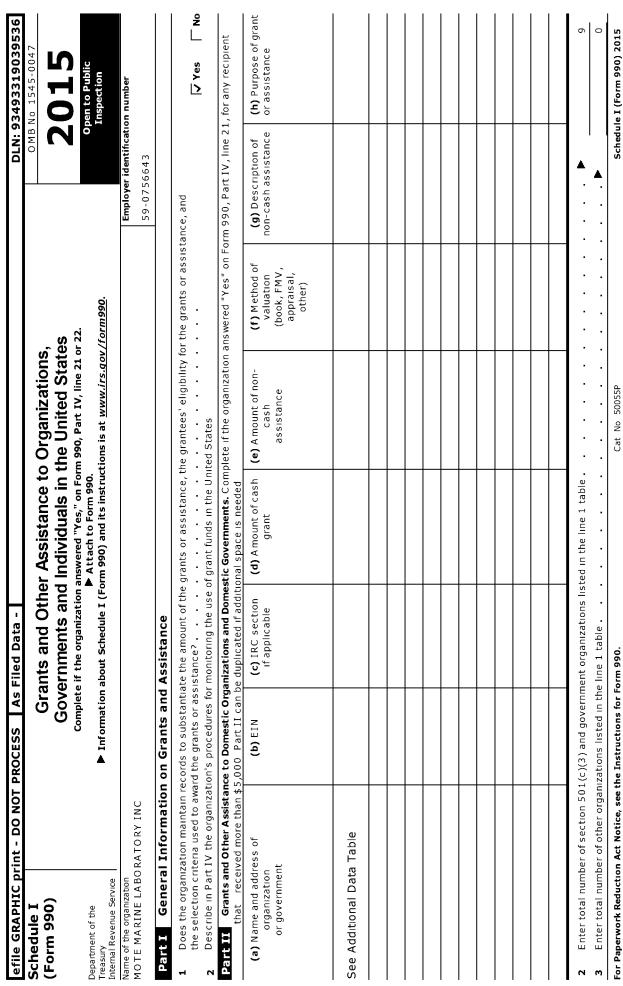
ame of the organization OTE MARINE LABORATORY INC			Employer ide	ntification number					
OTE MARINE LABORATORT INC			59-0756643	3					
Part I Fundraising Activities.Com Form 990-EZ filers are not rec			on Form 990, Part IV	, line 17.					
Indicate whether the organization raised	funds through any of t	he following activities C	heck all that apply						
a Mail solicitations	Il solicitations e Solicitation of non-government grants								
b Internet and email solicitations	Internet and email solicitations f								
c Phone solicitations		g Special fundrais	sing events						
d In-person solicitations									
Did the organization have a written or ora or key employees listed in Form 990, Pa services?			1 6 4	es No					
b If "Yes," list the ten highest paid individed to be compensated at least \$5,000 by to		aisers) pursuant to agree	ements under which the f	undraiser is					
(i) Name and address of individual or entity (fundraiser)	y (iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization					
1	Yes No								
2									
3									
4									
5									
6									
7									
8									
9									
0									
otal	•								
List all states in which the organization is registration or licensing	registered or licensed	to solicit contributions (I or has been notified it is e	rexempt from					

Part II	Fundraising	Events

Fundraising Events.

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

		(a) Event #1	(b) Event #2	(c)O ther events	(d) Total events
		OCEANIC EVENING (event type)	RUN FOR THE TURTLES (event type)	2 (total number)	(add col (a) through
Revenue	_				
Reve	1 Gross receipts	352,639	87,775	89,945	530,359
	2 Less Contributions	268,449	51,231	63,794	383,474
	Gross income (line 1 minus line 2)	84,190	36,544	26,151	146,885
	4 Cash prizes				
	5 Noncash prizes				
Se	6 Rent/facility costs				
Expenses	7 Food and beverages	113,712		24,718	138,430
	8 Entertainment	26,970			26,970
Direct	9 Other direct expenses	40,685	33,105	16,984	90,774
△	10 Direct expense summary Add lines 4	,			256,174
Dar	11 Net income summary Subtract line 1 rt III Gaming.	0 from line 3, column (c	1)	<u> ▶</u>	-109,289
	Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on I	Form 990, Part IV, line	e 19, or reported mor	e than \$15,000 on
Revenue		(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c)O ther gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1 Gross revenue				
Expenses	2 Cash prizes				
	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes% No		│ Yes <u></u> %	
	7 Direct expense summary Add lines 2	through 5 in column (c	i)		
	8 Net gaming income summary Subtra	ct line 7 from line 1, col	umn (d)		
9 a	Enter the state(s) in which the organizat				Yes No
b	If "No," explain				
10a		censes revoked, suspe	nded or terminated during	the tax year?	Yes No
b	If "Yes," explain				



Page 2	

Schedule <u>I</u> (Form 990) 2015					Page 2
Part III Grants and Other Assistance to Domestic Individuals. Complete of the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated of additional space is needed	Domestic Individuals. Cor Itional space is needed	mplete if the organization	n answered "Yes" on Forr	n 990, Part IV, line 22	
(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(e)Method of valuation (book, FMV, appraisal, other)
(1) SCHOLARSHIPS	49	52,900			
(2) STIPENDS	40	155,990			

Supplemental 1	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
rence	Explanation
5	GRANTS ARE AWARDED TO ELIGIBLE ORGANIZATIONS THROUGH MOTE MARINE LABORATORY'S PROTECT OUR REEFS PROGRAM USING FUNDS COLLECTED FROM REEF LICENSE PLATE SALES THE FINAL DECISION AS TO WHICH PROPOSALS WILL BE FUNDED AND UNDER WHAT CONDITIONS WILL BE MADE BY MICHAEL CROSBY, PH D, THE PRESIDENT AND CHIEF EXECUTIVE OFFICER OF MOTE TO ASSIST HIM, DR CROSBY HAS ASSEMBLED A GRANTS ADVISORY COMMITTEE OF EIGHT INDIVIDUALS WITH BROAD AND DIVERSE BACKGROUNDS IN CORAL REEF RESEARCH, EDUCATION, CONSERVATION AND MANAGEMENT THE COMMITTEE EVALUATES AND RANKS EACH OF THE

Return Reference

PART I, LINE 2

PROPOSALS SUBMITTED OUTSIDE EXPERTS ARE ALSO CONSULTED TO PEER REVIEW THE PROPOSALS AS NECESSARY THE COMMITTEE MAKES RECOMMENDATIONS TO DR. CROSBY AS TO WHICH PROPOSALS SHOULD BE SELECTED AND IN WHAT AMOUNTS. A LIMITED

and student's financial need, academic merit and recommendations stipends are awarded to participants in several EXPERIENCE AND MEET OTHER SPECIFIC CRITERIA SUCH AS UNDERSERVED, UNDERREPRESENTED STUDENTS OR ALUMNI AT A SPECIFIC RESEARCH EXPERIENCE FOR UNDERGRADUATES (REU) PROGRAMS AT MOTE MARINE LABORATORY THE FUNDING AGENCY DETERMINES 52,000 FOR A TWO TO THREE MONTH INTERNSHIP A SCHOLARSHIP COMMITTEE AWARDS SCHOLARSHIPS BASED ON PROGRAM NEED NUMBER OF SCHOLARSHIP GRANTS ARE AWARDED TO INDIVIDUALS EACH YEAR THE SCHOLARSHIP AWARD RANGES FROM \$500 TO FHE APPLICATION CRITERIA, BUT USUALLY THE STUDENTS ARE SELECTED IF THEY HAVE NOT HAD ANY PREVIOUS RESEARCH

JNIVERSITY THE STIPENDS CAN RANGE FROM \$500 TO \$5,250 DEPENDING ON GRANT AND LENGTH OF INTERNSHIP

Schedule I (Form 990) 2015

Additional Data

Software ID: Software Version:

	EIN: 59-0756643	ame: MOTE MARINE LABORATORY INC	
מסוראמות אבו אוחוי	EIN:	Name:	

ORY INC	

- Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.
 - (d) Amount of cash | (e) Amount of non- |(f) Method of valuation

(g) Description of

(h) Purpose of grant or assistance

- (book, FMV, appraisal,

assistance

14,998

501(C)(3)

53-0206027

SMITHSONIAN INSTITUTION

(c) IRC section ıf applıcable

(**b**) EIN

(a) Name and address of

or government organization

23,539

501(C)(3)

59-0624458

WASHINGTON, DC 20013 PO BOX 37012 MRC 1205

UNIVERSITY OF MIAMI 4600 RICKENBACKER

CAUSEWAY

6,128

501(C)(3)

59-1083502

FT LAUDERDALE, FL 33314

3301 COLLEGE AVENUE

NOVA UNIVERSITY MIAMI, FL 33149

- non-cash assistance

- PROTECT OUR REEFS
 - GRANT

- PROTECT OUR REEFS
- PROTECT OUR REEFS GRANT

II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.	(b) EIN (c) IRC section (d) Amount of cash grant (e) Amount of non- (f) Method of valuation cash grant (f) Method of valuation of valuation of cash assistance cash assistance other) (h) Purpose of grant cash assistance other)	59-2976169 THE STATE OF PROTECT OUR REEFS GRANT GRANT	59-6046500 501(C)(3) 6,000 PROTECT OUR REEFS	59-2696402 501(C)(3) 9,875 PROTECT OUR REFF
Form 990,Schedule I, Part II, Grants and Other Assistar		THE STATE FLORII		
Form 990, Schedule I, Part	(a) Name and address of organization orgovernment	UNIVERSITY OF NORTH FLORIDA 1 UNF DRIVE JACKSONVILLE, FL 32224	FLORIDA INSTITUTE OF TECHNOLOGY 150 W UNIVERSITY BLVD MELBOURNE, FL 32901	REEF RELIEF PO BOX 430 KEY WEST FI 33041

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.	t II, Grants and	Other Assistance	to Domestic Orga	inizations and Do	mestic Governme	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(d) Amount of cash (e) Amount of non- (f) Method of valuation cash (book, FMV, appraisal, assistance other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JACKSONVILLE UNIVERSITY 2800 UNIVERSITY BLVD JACKSONVILLE,FL 32211	59-0624412	501(C)(3)	7,429				PROTECT OUR REEF GRANT
FLORIDA ATLANTIC UNIVERSITY 777 GLADES RD BOCA RATON,FL 33431	65-0385507	THE STATE OF FLORIDA	6,665				PROTECT OUR REEF GRANT

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.

DLN: 93493319039536 OMB No 1545-0047

2015

reas	rtment of the sury nal Revenue Service	► Information about Schedule J (Fo	orm 990)) and its instructions is at <u>www.irs.</u>	<u>70v/form990</u> . 0	pen t Insp	o Pul ectio	
Na	me of the organiz TE MARINE LABORAT				Employer identificat	ion nui	mber	
Do	TT Ougsti	ons Posseding Componention			59-0756643			
Pd	Irt I Questi	ons Regarding Compensation					V	T N
1a		ropiate box(es) if the organization prov Section A , line 1a Complete Part III					Yes	No
	First-clas	s or charter travel	Г	Housing allowance or residence for	personal use			
	Travel for	companions	Ė	Payments for business use of person		ĺ	İ	İ
	Tax idemi	nification and gross-up payments	Ē	Health or social club dues or initiat	ion fees	ĺ	Ì	ĺ
	Discretion	nary spending account	Ē	Personal services (e g , maid, chau	ffeur, chef)	ļ	į	ļ
b		xes in line 1a are checked, did the org or provision of all of the expenses de:				1b		
2		ation require substantiation prior to re ees, officers, including the CEO/Exec				2		
3	organization's	, if any, of the following the filing organ CEO/Executive Director Check all th ed organization to establish compensa	at apply	Do not check any boxes for method	ds			
	✓ Compensi	ation committee	✓	Written employment contract				
	Independ	ent compensation consultant	✓	Compensation survey or study				
	✓ Form 990	of other organizations	√	Approval by the board or compensa	ation committee			
4	During the year or a related org	r, did any person listed on Form 990, I Ianization	Part VII	, Section A , line 1a with respect to t	he filing organization	า		
а	Receive a seve	rance payment or change-of-control p	payment	:7		4a		No
b	Participate in,	or receive payment from, a supplemen	tal nond	qualified retirement plan?		4b		No
c	Participate in,	or receive payment from, an equity-ba	sed con	npensation arrangement?		4c		Νo
	If "Yes" to any	of lines 4a-c, list the persons and pro	vide the	e applicable amounts for each item ii	n Part III			
5	For persons lis	, 501(c)(4), and 501(c)(29) organizat ted on Form 990, Part VII, Section A, contingent on the revenues of			any			
а	The organization	on?				5a		Νo
b	Any related org	ganization?				5b		No
	If "Yes," on line	e 5a or 5b, describe in Part III						
6	•	ted on Form 990, Part VII, Section A, contingent on the net earnings of	line 1a	, did the organization pay or accrue a	any			
а	The organization	on?				6 a		No
b	Any related org	ganization?				6b		Νo
	If "Yes," on line	e 6a or 6b, describe in Part III						
7		ted on Form 990, Part VII, Section A, described in lines 5 and 67 If "Yes," d			n-fixed	7		No
В		ints reported on Form 990, Part VII, p nitial contract exception described in				8		No

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

es, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.	Page 2
	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Page 2		
(Form 990) 2015	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.	ividual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

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

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

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age	
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(F) Compensation in column(B) reported as deferred on prior

(E) Total of columns

(D) Nontaxable benefits

(C) Retirement and other deferred compensation

(B) Breakdown of W-2 and/or 1099-MISC compensation

(A) Name and Title

Other reportable compensation

Bonus & incentive compensation

> (I) compensation 285,994

 $\widehat{\Xi}$

Form 990

305,754

1,104

18,656

164,276

11,503

16,408

0

0

1 MICHAEL P CROSBY PHD

PRESIDENT/CEO

136,365

2 DAVID VAUGHAN PHD

SR SCIENTIST

127,187

Ξ

3 JOHN REYNOLDS III PHD

SR SCIENTIST

 $\overline{\equiv}$

0

58,746

7,787

16,161

134,798

4 KENNETH LEBER PHD

SR SCIENTIST

Ξ Ξ 156,429

5 KUMAR MAHADEVAN PH D

130,902 0

6 ROBERT HUETER PHD

SR SCIENTIST

0

0

161,012

18,213

15,612

0

0

Schedule J (Form 990) 2015

169,139

21,825

16,412

172,969

4,841

991

0

Explanation

Return Reference

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

DLN: 93493319039536

2015

OMB No 1545-0047

SCHEDULE M **Noncash Contributions** (Form 990)

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

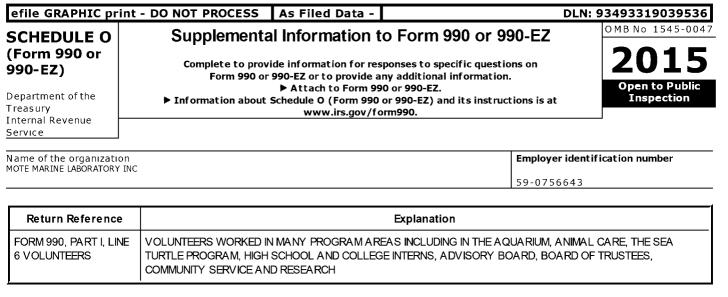
Open to Public Inspection

	ne of the organization E MARINE LABORATORY INC				Emplo	yer ident if icat	ion nu	mber	
					59-07	56643			
Pä	art I Types of Property								
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d Method of d oncash contrib	etermı	_	ts
1	Art—Works of art								
2	Art—Historical treasures .								
3	Art—Fractional interests								
4	Books and publications				<u> </u>				
	Clothing and household goods								
	Cars and other vehicles	X	3	•	_	MARKET VAL			
	Boats and planes	X	10	19,995	FAIR	MARKET VAL	.UE		
	Intellectual property		4.2	200 420	NVCE				
	Securities—Publicly traded .	X	12	389,139	NYSE				
	Securities—Closely held stock . Securities—Partnership, LLC,								
12	or trust interests				1				
	Qualified conservation contribution—Historic								
14	structures								
15	contribution—Other Real estate—Residential .								
	Real estate—Commercial								
	Real estate—Other								
	Collectibles								
	Food inventory								
	Drugs and medical supplies .								
	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
410	Other ► (CROSOFT HARDWARE	Х	1	82,406	FAIR	MARKET VAL	.UE		
26	D SOFTWARE) Other►(X	1	4,720	FAIR	MARKET VAL	.UE		
	UARIUM)								
	Other ► ()								
	Other ► () Number of Forms 8283 received				29				
	for which the organization comple	tea roim 8	283, Part IV, Donee ACKII	owieagement				Yes	No
30a	a During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1 thro	ough 28, that		165	No
	ıt must hold for at least three ye	ars from th	e date of the initial contribu	tion, and which is not requ	ired to	be used			1
	for exempt purposes for the enti	re holding p	period?				30a		No
ı	If "Yes," describe the arrangeme	ent in Part i	II						
31	Does the organization have a gif	t acceptan	ce policy that requires the r	eview of any non-standard	contri	butions?	31	Yes	<u> </u>
32a	Does the organization hire or us contributions?	e third part		to solicit, process, or sell	nonca:	sh • •	32a		No
ı	f "Yes," describe in Part II								
33	If the organization did not report describe in Part II	: an amount	in column (c) for a type of	property for which column	(a) ıs c	hecked,			

Page 2

Schedule M (Form 990) (2015)

Return Reference Explanation



Return Reference	Explanation
FORM 990, PART III, LINE 4A	RESEARCH MOTE IS AN INDEPENDENT, NONPROFIT 501(C)(3) MARINE RESEARCH ORGANIZATION WITH FIVE FLORIDA CAMPUSES FROM SARASOTA TO KEY WEST AS OF DECEMBER 2015, MOTE HAS 25 RESEARCH PROGRAMS CONDUCTING WORLD-LASS SOIENCE NOT ONLY IN DUR HOME COMMUNITY OF SOUTHWEST FLORIDA, BUT IN THE OCEANS AROUND ALL SEVEN CONTINENTS MOTE HAS BEEN COMMITTED TO INNOVATIVE MARINE RESEARCH SINCE DR EUGENIE CLARK FOUNDED THE LAB IN 1955 MOTE REMAINS ONE OF THE FEW INDEPENDENT MARINE RESEARCH SINCE DR EUGENIE CLARK FOUNDED THE LAB IN 1955 MOTE REMAINS ONE OF THE FEW INDEPENDENT MARINE LABS IN THE WORLD HAVING A GLOBAL IMPACT AS SUCH, WE NURTURE THE SCIENTIFIC INNOVATION AND FLEXIBLITY NEEDED TO A DDRESS THE MOST PRESSING OCEAN ISSUES OF OUR TIME MOTERS MISSION IS TO CONTINUALLY ADVANCE MARINE AND ENVIRONMENTAL SCIENCE THROUGH RESEARCH EDUCATION AND PUBLIC OUTBREACH LEADING TO NEW DISCOVERIES REVITALIZATION AND SUSTAINABILITY OF EARTH'S OCEAN RESOURCES AND TO A GREATER PUBLIC UNDERSTANDING OF OUR MARINE ECOSYSTEMS MOTE IS FIRST AND FOREMOST A GLOBAL LEADER IN DIVERSOR IN EACH TO A CHARLES OF MARINE BIODIVERSHY. HEALTHY HABITATS AND NATURAL RESOURCES MOTE IS ALSO UNIQUE AS ONE OF THE FEW INDEPENDENT SCIENTIFIC ORGANIZATIONS IN THE WORLD THAT COMBINES MARINE RESEARCH WITH PUBLIC OUTBREACH FEATURING AN AQUIARIUM, ALONG WITH FORMAL AND INFORMAL EDUCATION PROFRAMS OUR VISION INCLUDES POSITIVELY IMPACTING PUBLIC POLICY BY BUILDING A MORE OCEAN-LITERATE SOCIETY. (VIEW MOTES 2020 VISION & STRATEGIC PLAN AT WWW MOTE ORGANIZATIONS IN THE WORLD THAT COMBINES MARINE RESEARCH WITH PUBLIC OUTBREACH FEATURING AN AQUIARIUM, ALONG WITH FORMAL AND INFORMAL EDUCATION PROFRAMS OUR VISION INCLUDES POSITIVELY IMPACTING PUBLIC POLICY BY BUILDING A MORE OCEAN-LITERATE SOCIETY. (VIEW MOTES 2020 VISION & STRATEGIC PLAN AT WWW MOTE ORGANIZATIONS IN THE WORLD THAT TOO WITH A WORLD THAT THOUGH AND ADDITION OF THE PUBLIC OVER 60 VEARS, MOTE HAS GROWN FROM A TIME BASIC BIOLOGY, BUT TODAY MOTES RESEARCH ORGANIZATION. FOR 60 VEARS, MOTE HAS GROWN FROM A TIME BASIC BIOLO

	Explanation
Reference	
Return Reference FORM 990, PART III, LINE 4A	RESEARCH HIGHLIGHTS FROM 2015. HISTORIC FUNDRAISING CAMPAKEN LAUNCHES, NEARS ITS GOAL IN JANUARY 2015. MOTE CELEBRATED THE PUBLIC LAUNCH OF OCEANS OF OPPORTUNITY. THE CAMPAIGN FOR MOTE MARRINE LABORATORY - A MULTI-MILLION-DOLLAR, COMPREHENSIVE PUNDRAISING EFFORT TO SUPPORT AND GROW MOTES RESEABORATORY - A MULTI-MILLION-DOLLAR, COMPREHENSIVE PUNDRAISING FFORT TO SUPPORT AND GROW MOTES RESEABORATORY - A MULTI-MILLION-DOLLAR, COMPREHENSIVE PUNDRAISING FFORT TO SUPPORT AND GROW MOTES RESEABORATORY - A MULTI-MILLION FFORTS INTO THE FUTURE BY THE YEARS BIND, THE CAMPAIGN HAD RAISED MORE THAN \$40 MILLION AND WAS CLOSING IN ON ITS \$50 MILLION GOAL. EVEN BEFORE COMPLETION, IT IS ALREADY THE MOST SUCCESSFUL FOR COMPLETION. THE MOST SUCCESSFUL PUNDRAISING FFORT IN THE NORTH FORT THE PURD PURD THE PURD TH
	THESE ECOLOGICALLY AND ECONOMICALLY IMPORTANT FISHES MOTE SCIENTISTS PARTICIPATED IN THE PLAN'S DEVELOPMENT AND PRAISED THIS MAJOR, COLLABORATIVE STEP FORWARD FOR SHARK AND RAY CONSERVATION IN CUBAN WATERS - A MAJOR AREA OF FOCUS FOR MOTE'S CENTER FOR SHARK RESEARCH

Reference	Explanation
FORM 990, PART III, LINE 4A	AND ASSERDITE SOLL OF RESIDIATION AND SERVICES AND A LA SAMER COLLEGIC TALLED A RECORD THE BABY SOLLAR PROVIDED SOME AND AND AND AND AND AND AND AND AND AND
	ENDANGERED SEA TURTLES ALONG 35 MILES OF SARASOTA COUNTY BEACHES SINCE 1981 SEA TURTLE NESTING TAKES PLACE FROM MAY THROUGH OCTOBER ON FLORIDA'S GULF COAST IN 2015, THERE WERE 2,475 NESTS, WHICH BEAT THE 2012 RECORD BY SIX NESTS MOTE'S MULTI-DECADE MONITORING EFFORTS PROVIDE DATA THAT RESOURCE MANAGERS CAN USE TO UNDERSTAND AND PROTECT SEA TURTLE POPULATIONS LONG-TERM DATA ARE PARTICULARLY IMPORTANT BECAUSE SEA TURTLES ARE LONG-LIVED SPECIES IT TAKES ABOUT 30 YEARS FOR HATCHLINGS BORN ON OUR BEACHES TO RETURN TO NEST AS ADULTS

Return Reference	Explanation
Return Reference FORM 990, PART III, LINE 4A	Explanation TRANSLATING AND TRANSFERRING SCIENCE CORAL REEFS UNDER THREAT CORAL REEFS WORLDWIDE ARE FACING SEVIREE THREATS FROM DISEASE. CLIMATE CHANGE AND ESPECIALLY OCSAN ACDIFICATION (CA) IN 2016, MOTE HOSTED A FLORIDA ROUNTABLE AND AN INTERPATIONAL WORKSHOP TO PRING RESEARCHEST TOGETHEFT OF JUTA A SPOTLIGHT ON THE RATE AND SERV WAY'S TO ADDRESS THEM FLORIDA HAS THE ONLY BARRIER CORAL REEF ALONG THE CONTINENTAL US. WHICH HELE AT A TIRAC MILLIONS OF VISITORS, SUPPORTS VITAL FISHERES AND CONTINENTAL US. WHICH HELE AT A TIRAC MILLIONS OF VISITORS, SUPPORTS VITAL FISHERES AND CONTINENTAL US. WHICH HELE AT A TIRAC MILLIONS OF VISITORS, SUPPORTS VITAL FISHERES AND CONTINENTAL TO AN INCIDENT THE ATT A TORAL REEF ORGANISMS. NOLULINOS THEAT THE AND THE SHOWS THAT CORAL REEF ORGANISMS. NOLULINOS THEAT THE ACHIEVE AND MISSES OF THE ACHIEVE AND CONTINENTAL WAY. A PROFIDENT THE GROWING AND BULLIDING THEAT CARROWAY THE AND THE ACHIEVE AND CONTINENTAL TO AN INDER REY STEPS IN PROQUENCIAL OF THE FLORIDA KEYS. OATHAW EA HARDON THE MENT GENERATION OF CONTINENTAL AND SHORT THE CONTINENTAL ORGANISMS. NOLULINOS THE STEPS IN PROQUENCY THE HENT GENERATION OF COCKET AND CONTINENTAL AND AND AND THE ACHIEVE AND AND THE ACHIEVE AND AND THE ACHIEVE AND AND THE ACHIEVE AND AND THE ACHIEVE AND AND THE ACHIEVE AND AND THE ACHIEVE AND AND THE ACHIEVE AND AND THE ACHIEVE AND AND THE ACHIEVE AND AND THE ACHIEVE A
	TESTING WATER SAMPLES TO CHECK FOR ELEVATED RED TIDE COUNTS, MOTE SCIENTISTS ALSO USE AUTONOMOUS UNDERWATER VEHICLES TO PATROL THE COAST, SEEKING OUT BLOOMS AND DETECTING BLOOM MOVEMENTS. THE INFORMATION THEY GATHER CONTRIBUTES TO RED TIDE STATUS UPDATES PROVIDED BY FWC AT
	MY FWC COM/REDTIDESTATUS AND TO HARMFUL ALGAL BLOOM OPERATIONAL FORECAST PROVIDED BY THE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION'S NATIONAL OCEAN SERVICE.

Return Reference	Explanation
FORM 990, PART III, LINE 4B	AQUARIUM MOTE AQUARIUM IS THE PUBLIC OUTREACH ARM OF MOTE MARINE LABORATORY, DISPLAYING MORE THAN 100 MARNE SPECIES WITH A FOCUS ON LOCAL MARINE LIFE WHILE MOTE MARINE LABORATORY WAS ESTABLISHED IN 1955. THE AQUARIUM OPENED IN 1980 ON CITY ISLAND IN SARASOTA BAY MOTE AQUARIUM IS THE MAIN YE WILE THROUGH WHICH MOTE MARINE LABORATORY COMMUNICATES ITS CUTTING-EDGE RESEARCH FINDINGS. LOCATED ON MOTES MAN CAMPUS IN SARASOTA, FLA. THE AQUARIUM HAS PLAYED A KEY ROLE IN MOTES OUTREACH FEFORTS SINCE 1980 BY PRESENTING EXHIBITS AND PROGRAMS THAT REFLECT ONGOING RESEARCH IN THE LABORATORY AND THAT STIMULATE CURROSITY, DISCOVERY, EXP. ORATION AND STEWARDSHIPO A QUARTED ENVIRONMENTS. IN 2015, 31, 174, 55 QUESTED THE AQUARIUM, WITH OUR TRAVELING EXHIBIT (MOTE MOBILE) REACHING MORE THAN 95,000 PEOPLE THROUGHOUT FLORIDA VISITORS CAN SEE SHARKS, MANATEES, SEA TURTLES, SEAHORSES, RAYS, SKATES AND IN DERTEBRATES MOTE AQUARIUM ALSO INCLUDES WINDOWS INTO MOTES WORKING LABORATORIES. NOTE: INTRODUCED ITS NEWEST SPECIAL EXHIBIT ON BABY LIFE CYCLES OF THE SEA, "WHICH IS A FAMILY-FRIENDLY, EDUCATIONAL EXHIBIT INTIME VISITORS TO DISCOVER OCAN ANIMAL "ROMAN DEATH OR PREPODUCTION, BABIES OF MANY SPECIES AND THE SURVIVAL CHALLENGES FACING NEW GENERATIONS OF MARINE LIFE THESE TOPICS ARE CENTRAL TO MARINE RESEARCH AROUND THE GLOBE, INCLUDING THE WORLD-LABORATION SO FEMALE HIS THE SURVIVAL CHALLENGES FACING NEW GENERATIONS OF MARINE LIFE THESE TOPICS ARE CENTRAL TO MARINE RESEARCH AROUND THE GLOBE, INCLUDING THE WORLD-LABORATION SO FEMALE HIS TOWN THE ALSO NEW 12015 WAS THE ADDITION OF THE NEW EXHIBIT. PLAYER OF THE GLOBE, INCLUDING THE WORLD-LABORATION SO FEMALE HIS THE SURVIVAL CHALLENGES FACING NEW GENERATIONS OF MARINE LIFE THOSE TOPICS ARE CENTRAL TO MARINE RESEARCH AROUND THE GLOBE. INCLUDING THE WORLD-LABORATION SO FEMALE HIS THAT WOTE ALSO NEW 12015 WAS THE ADDITION OF THE NEW EXHIBIT SURVIVAL CHARLENGES FACING NEW SEASON. THE WORLD-LABORATION SO FEMALE AND THE SURVIVAL CHARLENGES FACING MAY SEED AND THE SURVIVAL CHARLENGES FACING MAY

Return Reference	Explanation
FORM 990, PART III, LINE 4B	MOTE HAS BEEN REHABILITATING SICK AND INJURED SEA TURTLES SINCE 1995 WE HAVE TREATED MORE THAN 560 SEA TURTLE PATIENTS AND RELEASED APPROXIMATELY 299 OF THOSE TURTLE PATIENTS OUT OF THAT NUMBER, 203 SEA TURTLES SUFFERED FROM FIBROPAPILLOMA TUMORS AND 71 WERE BEEN RELEASED FIBROPAPILLOMA TUMORS ARE BELIEVED TO BE CAUSED BY A VIRUS AND, BECAUSE THE TRANSMISSION MECHANISM FOR THIS DISEASE REMAIN UNKNOWN, THE FACILITIES WHERE THESE TURTLES ARE TREATED ARE SEPARATE FROM OUR OTHER TURTLE TREATMENT FACILITIES MOTE IS ONE OF ONLY FOUR FACILITIES IN FLORIDA THAT IS ABLE TO PROVIDE THIS SPECIALIZED CARE MOTE DOES PROVIDE LONG-TERM CARE TO A LIMITED NUMBER OF MARINE MAMMALS AND SEA TURTLES THAT ARE DEEMED BY FEDERAL AND STATE OFFICIALS AS NOT ABLE TO SURVIVE IN THE WILD DUE TO THE NATURE OF THEIR INJURIES HOWEVER, OUR PRIMARY GOAL IS TO PROVIDE THE MOST HUMANE TREATMENT POSSIBLE FOR LIVE-STRANDED DOLPHINS, WHALES, AND SEA TURTLES, RIHABILITATE AND RELEASE THEM THIS STRATEGY CREATES A BETTER SCIENTIFIC UNDERSTANDING OF THESE ANIMALS AND THEIR NEEDS IN ORDER TO SUPPORT CONSERVATION OF THESE SPECIES IN THE WILD TRIPADVISOR NAMES MOTE 5TH BEST U.S. AQUARIUM TRAVELERS HAVE SPOKEN AND TRIPADVISOR HAS NAMED MOTE AQUARIUM IN THE TOP 10 LIST OF BEST U.S. AQUARIUM SIN THE 2015 TRAVELERS CHOICE AWARDS MOTE PLACED 5TH IN THE U.S. LIST THIS YEAR, UP FROM 10TH LAST YEAR THIS YEAR, MOTE IS ALSO NAMED THE 15TH BEST AQUARIUM IN THE ETOP 10 LIST OF BEST U.S. AQUARIUMS IN THE 2015 TRAVELERS. AWARD WINNERS WERE DETERMINED USING AN ALGORITHM THAT TOOK INTO ACCOUNT THE QUANTITY AND QUALITY OF REVIEWS FOR ZOOS AND AQUARIUMS IN THE U.S. AND WORLDWIDE OVER 12 MONTHS

Return Reference	Explanation
FORM 990, PART III, LINE 4C	EDUCATION MOTE MARINE LABORATORY'S COMMITMENT TO SUPPORTING A MORE OCEAN-LITERATE SOCIETY BEGINS WITH CHLDREN - BUT IT DOESN'T STOP THERE IN ADDITION TO THE MANY PROGRAMS WE OFFER THAT ARE GEARED TOWARD TODAY'S YOUTH, WE ALSO OFFER PROGRAMS TO PROVIDE ADULTS WITH LIFELONG OPPORTUNITIES FOR PUBLIC ENGAGEMENT IN MARINE SCIENCE, LIKE AN ANNUAL SPECIAL LECTURE SERIES AND SCIENCE CAFES MOTES ANNUAL SPECIAL LECTURE SERIES, GRACIOUSLY SPONSORED BY LOCAL PHILANTHROPISTS, SHOWCASES AN EXCITING SPEAKER LIST OF TOP SCIENTISTS AND EXPLORERS EACH YEAR THAT DRAWS THOUSANDS OF LOCAL RESIDENTS TO LEARN MORE ABOUT OCEAN-RELATED TOPICS MOTE ALSO PRESENTS ON-SITE EXPERIENCES FOR STUDENTS THROUGH SCHOOL AND PUBLIC PROGRAMS, SUMMER CAMPS AND INTERNSHIP PROGRAMS - INCLUDING THE NATIONAL SCIENCE FOUNDATION-FUNDED RESEARCH EXPERIENCES FOR NOTE ALSO PRESENTS ON-SITE EXPERIENCES FOR STUDENTS THROUGH SCHOOL AND PUBLIC PROGRAMS, SUMMER CAMPS AND INTERNSHIP PROGRAMS - INCLUDING THE NATIONAL SCIENCE FOUNDATION-FUNDED RESEARCH EXPERIENCES FOR UNDERGRADUATES (REU), WHICH ALLOWS UNDERGRADUATE COLLEGE STUDENTS THE OPPORTUNITY TO UNDERTAKE SCIENTIFIC STUDIES UNDER THE DIRECT MENTORSHIP OF A PH D - LEVEL RESEARCHER IN 2015, MOTE CELEBRATED ITS TWELFTH SUCCESSFUL YEAR OF HOSTING THIS NATIONAL SCIENCE FOUNDATION-FUNDED PROGRAM, WHICH IS DESIGNED TO ENCOURAGE STUDENTS INTERESTED IN STEM FIELDS IN 2015, NINE STUDENTS WERE GIVEN THE OPPORTUNITY TO STUDY MARINE SCIENCE AT MOTE THANKS TO THE GENEROSITY OF KETH AND LINDA MONDA FOUR OF THE STUDENTS WERE PART OF MOTES REU PROGRAM AND FIVE OF THE STUDENTS WERE PART OF MOTES AND THE NATURE CONSERVANCY'S HIGH SCHOOL STUDENTS WERE PART OF MOTES AND THE NATURE CONSERVANCY'S HIGH SCHOOL STUDENTS WERE PART OF MOTES AND THE NATURE CONSERVANCY'S HIGH SCHOOL STUDENTS WERE PART OF MOTES AND THE CONSERVANCY'S HIGH SCHOOL STUDENTS WERE PART OF MOTES AND THE CONSERVANCY'S HIGH SCHOOL STUDENTS WERE PART OF MOTES AND EXPERIENCES OF RESEARCH AND SCHOOL STUDENTS WHO PARTICIPATED FOR THE CONSERVANCY'S HIGH SCHOOL STUDENTS WH

Return Reference	Explanation	
FORM 990, PART VI, SECTION	THE PRESIDENT/CEO IS A VOTING BOARD MEMBER WHEN ISSUES ARISE THAT MAY CAUSE A CONFLICT	
A, LINE 1	OF INTEREST, HE RECUSES HIMSELF	ı

Return Reference	Explanation
FORM 990, PART VI,	THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM WITH INFORMATION FROM THE ANNUAL AUDIT
SECTION B, LINE 11	AND SENIOR MANAGEMENT THE FINAL FORM 990 IS REVIEWED BY THE CEO AND CFO PRIOR TO FILING, FORM 990
	IS SIGNED BY THE CEO AND PROVIDED TO THE BOARD OF TRUSTEES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	TRUSTEES, OFFICERS AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ANNUALLY INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST A CONFLICT OF INTEREST POLICY AND DISCLOSURE STATEMENT IS DISTRIBUTED AT THE ANNUAL BOARD MEETING OR OTHER TIMES AS NEEDED ALL SIGNED DISCLOSURES ARE COLLECTED WITH A FOLLOW UP UNTIL RETURNED THEY ARE REVIEWED BY THE PRESIDENT OR CFO AND BROUGHT TO THE AUDIT COMMITTEE IF NEEDED FOR DETERMINATION

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION FOR THE CEO IS DETERMINED BY THE CEO EVALUATION/COMPENSATION COMMITTEE THE COMMITTEE BASES THEIR DECISION ON COMPENSATION DATA FROM COMPARABLE INSTITUTIONS AND A COMPREHENSIVE WRITTEN SUMMARY OF ACTIVITIES BY THE CEO THE COMPENSATION FOR THE CFO IS DETERMINED BY THE CEO AFTER A BOARD APPROVED BUDGET RATE OF INCREASE ALL DELIBERATION AND DECISIONS ARE CONTEMPORANEOUSLY SUBSTANTIATED

Return Reference	Explanation
	THE GOVERNING DOCUMENTS INCLUDING THE ARTICLES OF INCORPORATION AND BY-LAWS, THE CONFLICT OF
SECTION C, LINE 19	INTEREST POLICY, THE FORM 990 AND THE ANNUAL AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST THE ANNUAL AUDITED FINANCIAL STATEMENT IS ALSO AVAILABLE ON WWW MOTE ORG

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN BENEFICIAL INTEREST IN NET ASSETS OF MOTE MARINE FOUNDATION, INC -1,474,751 ROUNDING 2

Return Reference	Explanation
FORM 990, PART XII, LINE 2C AUDIT REVIEW	THERE HAS BEEN NO CHANGE IN THE AUDIT REVIEW PROCESS FROM THE PRIOR
PROCESS	YEAR

efile GRAPHIC print -	efile GRAPHIC print - DO NOT PROCESS As Filed Data -	-				DLN: 93493319039536	36
SCHEDULE R	Related Or	Organizations and Unrelated Partnerships	nd Unrelated I	Partnerships		OMB No 1545-0047	7
(Form 990)	► Complete if the org	► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37	on Form 990, Part I	v, line 33, 34, 35b, 3	6, or 37.	2015	
Department of the Treasury Internal Revenue Service	► Attach to Form 990. ► Info	Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.	R (Form 990) and its	instructions is at <u>w</u>	ww.irs.gov/form990.	Open to Public Inspection	
Name of the organization MOTE MARINE LABORATORY INC					Employer identification number	on number	
Part I Identificatio	Identification of Disregarded Entities Complete	$1 ext{ 59-0/5}$ is if the organization answered "Yes" on Form 990, Part IV, line 33.	nswered "Yes" on	Form 990, Part IN	59-0756643 /, line 33.		
Name, address, and EIN	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income End-	(e) End-of-year assets Direc	(f) Direct controlling entity	
Part II Identification or more relate	Identification of Related Tax-Exempt Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.	ations Complete if the etax year.	organization ans	vered "Yes" on Fo	orm 990, Part IV, line	34 because it had one	l
Name, address, anα	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	Direct controlling Section 512(b) entity (13) controlled entity	12(b) trolled y?
(1)MOTE MARINE FOUNDATION INC 1600 KEN THOMPSON PARKWAY SARASOTA, FL 34236 59-2226800	J	PROVIDES FUNDS TO SUPPORT MOTE MARINE LABORATORY	근	501(C)(3)	LINE 11A, I		02
For Danapaork Bediction Act Notice	Notice see the Instructions for Form 990		NO 50135V	> 10		Schodule P (Form 990) 2015	<u>ا</u> ا

Identification of Related Organizations Taxable as a Partnership Complete If the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

0 0	l		l	1	ĺ
(k) Percentago					
al or ging er?	٩				
(U) Senera nanag partne					
Code V-UBI (amount in box 120 of Schedule K-1 (Form 1065)	Yes				
ionate ons?	No				
(h) Disproprt allocati	Yes				
(g) Share of end-of-year assets					
Share of total income					
Predominant Share of Share of Dispropritionate Code V-UBI General or Percentage unrelated, total income end-of-year allocations tax under tax under sections 512- sections 512- 514)	<u> </u>				
(d) Irect trolling ntity					
(c) Legal domicle (state or foreign country)					
Pnmary activity Legal D domicile con (state or foreign country)					
Name, address, and EIN of Prelated organization					

Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) (e) Direct controlling Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	Section 512 (b)(13) controlled entity?	512 3) led
(1)MOTE AQUACULTURE INC 1600 KEN THOMPSON PARKWAY SARKOTA, FL 34236 65-0628959	MARINE AND ENVIRONMENTAL RESEARCH	J-F				100 000 %	Yes	o Z
						Schedule R (Form 990) 2015	1 990) 20	1

Schedule R (Form 990) 2015		Page 3	e
Part V Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	<u>*</u>	Yes No	٥
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			[
a Receipt of (i) interest, (ii)annuities, (iii)royalties, or(iv)rent from a controlled entity.	1a	z	٩
b Gift, grant, or capital contribution to related organization(s)	1P	Z	No

schedule R (Form 990) 2015	Д	Page 3	ı
Part V Transactions With Related Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	Yes	§	
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) Interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	LG.	£	
b Gift, grant, or capital contribution to related organization(s)	q.	õ	
c Giff, grant, or capital contribution from related organization(s)	.c Yes		
d Loans or loan guarantees to or for related organization(s)	d Yes		
e Loans or loan guarantees by related organization(s)	e Yes		
f Dividends from related organization(s)	<u> </u>	2	
g Sale of assets to related organization(s)	6.	No	
h Purchase of assets from related organization(s)	4 .	No	
i Exchange of assets with related organization(s)	<u></u>	N _o	
j Lease of facilities, equipment, or other assets to related organization(s)	ij Yes		
k Lease of facilities, equipment, or other assets from related organization(s)	¥	No	
I Performance of services or membership or fundraising solicitations for related organization(s)	II Yes		
		_	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m Yes		

7	J rease of facilities, equipment, of other assets to reface of ganifactority)	
_	k Lease of facilities, equipment, or other assets from related organization(s)	
_	I Performance of services or membership or fundraising solicitations for related organization(s)	
-	m Performance of services or membership or fundraising solicitations by related organization(s)	•
-	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	
-	o Sharing of paid employees with related organization(s)	
_	p Reimbursement paid to related organization(s) for expenses	•
٦	q Reimbursement paid by related organization(s) for expenses	•
-	r Other transfer of cash or property to related organization(s)	

and transaction thresholds	(d) Method of determining amount involved
overed relationships	(c) Amount involved
this line, including co	(b) Transaction
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	(a) Name of related organization

Other transfer of cash or property from related organization(s) .

7

n on who must complete this line, including covered relationships and transaction thresholds	(d) Method of determining amount involved
vered relationships	(c) Amount involved
hıs lıne, ıncludıng co	(b) Transaction type (a-s)
on who must complete t	

Method of determining amount involved	

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Yes

19 1p

Yes

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1n Yes

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1s Yes

Page 4

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Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

)											
(a) Name, address, and EIN of entity	(b) Рптагу асtivity	(c) Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-	Are all sec 501((e) Are all partners section Sol(c)(3) organizations?	Share of total income	Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?	(k) Percentage ownership
			514)	Yes	No			Yes	Ŷ		Yes No	
												1 .
										Sched	Schedule R (Form 990) 2015	990) 2015

Part VIII Supplemental Information

Return Reference

Provide additional information for responses to questions on Schedule R (see instructions)

Explanation