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Return of Organization Exempt From Income Tax

OMB No 1545-0047

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.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	For the	2016 cale	endar year, or tax year beginning , 2016, and endin		<u> </u>	, 20
В		applicable	C Name of organization Marine Preservation Association	 -	D Employe	er identification number
Ø		change	Doing business as			
		•	Number and street (or P O box if mail is not delivered to street address) Room/su		E Telephon	86-0662511
믐	Name c	•	i '			
ᇤ	Initial re		1707	111		480-991-5500
닏		irn/terminated				. •
님		ed return	Phoenix, AZ 85054		G Gross red	
Ц	Applicat	tion pending	F Name and address of principal officer Brett G. Drewry	1		subordinates? Yes No
_			Address same as C. above	— 1		included? LYes No
<u>I</u>	_	mpt status	□ 501(c)(3)	\dashv		list (see instructions)
<u>J</u>	Website		w.mpaz.org		exemption i	
K			✓ Corporation Trust Association Other L Year of format	on 1990	M State	of legal domicile AZ
ŀ	art I	Sumn				_
	1	Briefly d	escribe the organization's mission or most significant activities: To pro	note the we	lfare and in	nterests of the
့ မွ	;	petroleur	n and energy industry and the related petroleum transportation industry thr	ough efforts	to help th	ese industries
LU14			the problems caused by discharges of oil and petroleum products on water.			
⇔ ८∪≀≀. Governance	2	Check th	his box $lacktriangle$ $lacktriangle$ if the organization discontinued its operations or disposed $lpha$	of more that	า 25% of เ	ts net assets.
ig g	3	Number	of voting members of the governing body (Part VI, line 1a)		3	1
ল আ	4	Number	of independent voting members of the governing body (Part VI, line 1b)		4	1
JUEU 1 Activities &	5	Total nu	mber of individuals employed in calendar year 2016 (Part V, line 2a) .		. 5	
UEL Stivities	6	Total nu	mber of volunteers (estimate if necessary)		6	
n &	7a	Total un	related business revenue from Part VIII, column (C), line 12		. 7a	
	ь	Net unre	lated business taxable income from Form 990-T, line 34-1-18/18/19		. 7b	
Z –			I COLIVED	Prior Y	ear	Current Year
₹.	. в	Contribu	tions and grants (Part VIII, line 1h)	ပါ 9	8,447,356	96,930,29
	9			31	0	
Sevenue	10	_	ent income (Part VIII, column (A), lines 3, 4, and 7d)	ارا	97,856	121,96
ď	11	A	(D 1) (I) (A)	2	07,000	121,000
	12	Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line-12)	1 0	8,545,212	97,052,26
_	13	Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)		7,929,000	97,854,000
	14		paid to or for members (Part IX, column (A), line 4)		7,323,000	
	4-		other compensation, employee benefits (Part IX, column (A), lines 5–10)			
Fxnenses	16a		onal fundraising fees (Part IX, column (A), line 11e)		544,928 0	567,92
Š	l loa		ndraising expenses (Part IX, column (D), line 25) ▶		U	and the second s
Ä	17 b				070.540	0.40.04
	18		spenses (Part IX, column (A), lines 11a-11d, 11f-24e)		273,510	242,01
			penses. Add lines 13–17 (must equal Part IX, column (A), line 25) .	9	8,747,438	98,663,94
_	19	Hevenue	e less expenses. Subtract line 18 from line 12	Posinning of C	(202,226)	(1,611,679 End of Year
o S	20 21 22 22	T -4-1	<u> </u>	Beginning of C		
sse	[20		sets (Part X, line 16)		5,626,567	24,872,84
etA	밑 21		pilities (Part X, line 26)		4,119,572	4,977,52
_			ets or fund balances. Subtract line 21 from line 20	2	1,506,995	19,895,31
	Part II		ture Block			
			ury, I declare that I have examined this return, including accompanying schedules and state			ny knowledge and belief, it i
	rue, corre	ct, and comp	olete Declaration of preparer (other than officer) is based on all information of which prepare	nas any know		
_	_		yett rewing			
	ign	Sign	nature of officer	D	ate . ['.1
Н	ere		Brett Drewry		111	14/17-
		Тур	e or print name and title			
P	aid	Print/T	ype preparer's name Preparer's signature Da	ite	Check [of PTIN
	repar	er			self-emp	
	lse Or		name •	Fin	m's EIN ▶	
J	. JC OI		address ▶	Ph	one no	
M	lav the I		ss this return with the preparer shown above? (see instructions)			Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2016)

Form 990		Page 2
Part I		
1	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
	The Marine Preservation Association is a privately funded, non-profit corporation which supports its members' ability	r to most
	their United States oil spill response requirements by providing funding for and a planning forum for establishing and	
	maintaining efficient, effective oil spill response capabilities.	
	Did the organization undertake any significant program services during the year which were not listed on the	
_	F 000 000 F70	☐ Yes ☑ No
	If "Yes," describe these new services on Schedule O.	_ les ⊡ leo
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
		☐ Yes ☑ No
	If "Yes," describe these changes on Schedule O.	
	Describe the organization's program service accomplishments for each of its three largest program services, expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloc the total expenses, and revenue, if any, for each program service reported.	as measured by ations to others
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	Provided financial assistance in the form of net grants provided to a social welfare organization totaling \$97,854,000 in	n order to
	maintain and increase existing capabilities for mitigating the environmental damage caused by oil spills within specif	
	areas determined by the Board of Directors of the Corporation.	
4b	(Code) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
		·
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
	Total program service expenses ▶	

orm 99	0 (2016)		1	Page (
Part l	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		Yes	No
2	Is the organization required to complete <i>Schedule B</i> , <i>Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		√
4	candidates for public office? If "Yes," complete Schedule C, Part I	3	· · · · · · · · · · · · · · · · · · ·	1
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	✓	
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
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		1
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		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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		1
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
	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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	, , , , , , , , , , , , , , , , , , , ,	14a		✓
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		1
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		1
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		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			

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 18

Part l	Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		<u> </u>
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	1	
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, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	√	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	-	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		/
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	<u> </u>	1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	1	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	+
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		/
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Check it conceans a contains a cooperior of field to any into it and tare v	<u></u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	,		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3	3		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
	·	4a		
p	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		-	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-		†
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).		7.0	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	<u> </u>	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f	 	┼
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		├─
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			1
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	4.0		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
ь	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
D	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	 	+
				-

Form 99	7(2016)			Page 🛡
Part \				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response or note to any line in this Part VI			
Section	on A. Governing Body and Management		<u> </u>	. 🗸
	Tru dovorning Dody and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 12			
	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.	ļ		
þ	Enter the number of voting members included in line 1a, above, who are independent . 12			ĺ
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		✓
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	-	1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6 7a	Did the organization have members or stockholders?	6	✓	
1 a	one or more members of the governing body?	7a	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7.4		
~	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	√	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
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		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	<u>-</u>	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			ļ
40	describe in Schedule O how this was done	12c	√	├ ─-
13 14	Did the organization have a written whistleblower policy?	13	<u> </u>	-
15	Did the process for determining compensation of the following persons include a review and approval by	14	V	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	1	\
b	Other officers or key employees of the organization	15b	Ė	1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
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		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Arizona Arizona			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	s only)
40	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.		•	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	:▶	
	Mitzi Callow, 5415 East High Street, Suite 111, Phoenix, AZ 85054, (480) 991-5500			

Form 9	วดก (ว	ขณาคา	

Page 7

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization no	r any relate	d orga	anız	atio	n c	ompe	nsa	ited any currer	it officer, director	r, or trustee.
					C)			1		
(A) Name and Title	(B) Average hours per	box,	Position (do not check more than o box, unless person is both officer and a director/trust			an tee)	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of	
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Rachel Archer	0									
Director	<u> </u>	1	<u> </u>		<u>L</u> _		<u>_</u> _	0	0	0
(2) Jeff Bonnette	0		ļ	ļ	ļ			ļ	<u> </u>	
Director	_	_<	ļ	L_	L.	<u> </u>	<u> </u>	0	0	0
(3) Paul Choucair	0				1	1				
Director	↓	✓	Ļ.	L.	<u> </u>		<u> </u>	0	0	0
(4) Greg DeMarco	0									
Director/Chairperson	<u> </u>	✓	<u> </u>	✓	<u> </u>			0	0	0
(5) Tom Garrett	0			Į.					[
Director	<u> </u>	_	<u> </u>	<u> </u>	<u> </u>			0	0	0
(6) Tom Hardison	0		ł		}		ļ			
Director		✓	Ļ		L_		<u> </u>	0	0	0
(7) Eric Haugstad	00						İ			
Director	<u> </u>	1	_	_		<u> </u>	<u> </u>	0	0	0
(8) Jeff Johnson	0]								
<u>Director</u>	<u> </u>	✓			<u> </u>	<u> </u>		0	0	0
(9) Mitch Masterson	0]	l	ļ			ļ	1	1	
<u>Director</u>		✓		L_		<u></u>	<u> </u>	0	0	0
(10) David McBride	0]		}		j	Ì			
Director	<u> </u>	1	_		L	<u> </u>		0	0	0
(11) Martin Padilla	0									
Director/Treasurer		✓		1		<u> </u>		0	0	0
(12) Jeff Patry	0			l						
Director	<u> </u>	✓	_					0	O	o
(13) Steve Pepper	0]		1						
Director	<u> </u>	✓	_	L	L	L	L	0	0	o
(14) Phil Smith	0]	_	1						
Director	<u> </u>	✓				<u>L</u>	L	0	0	0

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd F	lighes	st C	ompensated E	mployees (contin	nued)
					•	C) ition					_
	(A) Name and title	(B) Average			neck	k more than o			(D)	(E)	(F) Estimated
	Name and title	hours per	box, unless person is b officer and a director/tr						Reportable compensation	Reportable compensation from	amount of
		week (list any hours for	익코	ᆵ	오	6		7	from the	related organizations (W-2/1099-MISC)	other compensation
		related	dire	i ii	Officer	Key employee	Highest compensated employee	Former	organization		from the
		organizations below dotted	otor t	iona					(W-2/1099-MISC)		organization and related
		line)	Individual trustee or director	Institutional trustee		8	npen	ĺ			organizations
			ď	štee	ļ		sate				
(15) Bi	rett Drewry	40	-					-	 		
2	irector/President/CEO/Secretary	2	✓		1			L_	329,280	0	78,84
(16)		ļ	<u> </u>	}	1				}		
(47)		ļ	 	 	-	-		-	 		
<u>un</u>		 									
(18)		<u> </u>			 				 		
			ļ	<u> </u>	<u> </u>	_		L.			
<u>(19)</u>		ļ	1	1	1		ĺ				
(20)		 		-	├-	-	l 	-	 	 	
(20)		 	1	ļ				ļ			
(21)					†	<u> </u>	-			-	
]	<u> </u>	<u> </u>	↓_		_			
(22)		 	1	-				i			
(23)		-	 	 	┢╌	\vdash	 —	├-	 		
3537		f	1								
(24)											
		ļ	ļ <u>.</u>	<u> </u>	<u> </u>	<u> </u>		Ļ	<u> </u>		
(25)		ļ									
1b	Sub-total		L	<u> </u>	<u> </u>	- -	L	<u> </u>	329,280	0	78,84
C	Total from continuation sheets to Part	VII, Section	n A					•	0	 	
d		<u></u>			<u>.</u>		<u> </u>		329,280	0	78,84
2	Total number of individuals (including bu		d to th	nose	e lis	ted	above	e) w	ho received m	ore than \$100,0	00 of
	reportable compensation from the organ	ization >							1		
3	Did the organization list any former o	fficer, direc	ctor.	or ti	rust	ee.	kev e	emr	olovee, or high	nest compensate	Yes No
	employee on line 1a? If "Yes," complete								-		, , , , , , , , , , , , , , , , , , ,
4	For any individual listed on line 1a, is the										
	organization and related organizations	greater th	an \$	150	,000)? [f "Ye	s, "	complete Sch	nedule J for su	, , , , , , , , , , , , , , , , , , ,
5	Individual				Hion	· fro	 m an				4 🗸
3	for services rendered to the organization										
Section	on B. Independent Contractors		- <u>-</u> -					_			
1	Complete this table for your five highest										
	compensation from the organization. Re	port compe	ensati	on f	or t	he c	alenc	lar y	year ending wif	th or within the c	rganization's tax
	year.							т_		 	
	(A) Name and business ad	dress						1	(B) Description of s	services	(C) Compensation
None							_	†			
						_					
_								┼-			
2	Total number of independent contract	ors (includi	na bi	ut r	not	lımı	ted to) o ti	hose listed ah	ove) who	
_	received more than \$100,000 of compens							1	0	- : -,	

Form 9		<u> </u>						Page 9
Part	VIII	Statement of Reve						
		Check if Schedule O	contains a resp	ponse or note to	o any line in this (A) Total revenue	Part VIII (B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts s	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		96,930,295				.
Am Am	C	Fundraising events .	· · · · · · · · · · · · · · · · · · ·					
ia i	d	Related organizations						
ns,	e	Government grants (con						
er S	f	All other contributions, gi	ا بند					
를 돌	_	and similar amounts not inc	L					
S E	y ⊢ h	Noncash contributions include Total. Add lines 1a-1	•		06 020 205			
		Total. Add lines 1a-1	· · · · ·	Business Code	96,930,295			
Program Service Revenue	2a							-
Re	b					· <u> </u>		
içe	С							
Sen	d							
am	е							
'ogr	f	All other program sen						
<u>~</u> _	g	Total. Add lines 2a-2					<u> </u>	
	3	Investment income and other similar amo			121.000			424.000
	4	Income from investment			121,966			121,966
	5							
			(ı) Real	(II) Personal		······································		
	6a	Gross rents						
'	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (
	7a	Gross amount from sales of	(i) Secunties	(II) Other				
		assets other than inventory						
	b	Less: cost or other basis and sales expenses .						
	C	Gain or (loss)						
		Net gain or (loss)	L					
	~	rect gain or (1033) .		· · · · ·				
Other Revenue	8a	Gross income from fuevents (not including \$	•	;				
er Re		of contributions reporte See Part IV, line 18						
Ě	Ь	Less: direct expenses			<u> </u>		L	<u></u>
		Net income or (loss) f		events . ►				
	9a	Gross income from ga					1	
		See Part IV, line 19 .			[
		Less: direct expenses					ļ	
	1	Net income or (loss) f		ivities				-
	lua	Gross sales of in returns and allowance						
			_					
	b	Less: cost of goods s Net income or (loss) f			 			1
	ا ر	Miscellaneous F		Business Code				
	11a			-				1
	b							
	C		-					
	d	All other revenue .						
	е	Total. Add lines 11a-						
	12	Total revenue. See in	nstructions	<u>.</u> >	97,052,261			121,966

Part IX Statement of Functional Expenses

Section	n 501(c)(3) and 501(c)(4) organizations must com	nplete all columns. A	ll other organizatio	ns must complete co	olumn (A).				
	Check if Schedule O contains a response or note to any line in this Part IX								
	t include amounts reported on lines 6b, 7b, , 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	97,854,000							
2	Grants and other assistance to domestic individuals. See Part IV, line 22								
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	417,224							
6	Compensation not included above, to disqualified	417,224		•					
Ū	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			!					
7	Other salaries and wages	117,205							
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)	10,651							
9	Other employee benefits	1,624							
10	Payroll taxes	21,223							
11	Fees for services (non-employees):								
а	Management								
b	Legal	74,984							
C	Accounting	17,000							
d	Lobbying								
e 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.)								
12	Advertising and promotion	9,308							
13	Office expenses	17,989							
14	Information technology	7,407							
15	Royalties	7,101							
16	Occupancy	31,329							
17	Travel	31,598							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings .	23,390							
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization .	3,340							
23	Insurance	5,949							
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				:				
	line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O.)								
а	Dues and Subscriptions	13,985							
b	Payroll and Retirement Plan Processing	5,620							
C	Taxes and Licenses	114		ļ					
d	All all and an area and area a								
e 05	All other expenses Total functional expenses. Add lines 1 through 24e	***************************************		 					
25	Joint costs. Complete this line only if the	98,663,940	· · · · · · · · · · · · · · · · · · ·	1					
26	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)								

Form **990** (2016)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year 41,389 1 26,089 2 2 35,527,158 24,778,745 3 3 4 4 17,262 31,130 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 6 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . 6 7 Notes and loans receivable, net Inventories for sale or use 8 9 Prepaid expenses and deferred charges . . . 9 28,266 27,726 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less. accumulated depreciation 10b b 12,492 10c 63,469 9,153 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11. 12 13 13 Investments—program-related. See Part IV, line 11. 14 14 15 15 Other assets. See Part IV, line 11 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 35,626,567 16 24,872,843 17 Accounts payable and accrued expenses 17 183,798 211,979 18 18 6,315,000 4,169,000 19 19 7,608,774 571,748 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 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 25 12,000 24,800 Total liabilities. Add lines 17 through 25 . . . 26 14,119,572 26 <u>4,977,</u>527 Organizations that follow SFAS 117 (ASC 958), check here ▶ **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 21,506,995 27 19,895,316 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds . 33 33 21,506,995 19,895,316 35.626.567 24.872.843

om 99	0 (2016)			Pag	ge 12
Part	XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u>.</u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		97,052	2,261
2	Total expenses (must equal Part IX, column (A), line 25)	2		98,66	3,940
3	Revenue less expenses. Subtract line 2 from line 1	3		(1,611	,679)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		21,500	<u>6,995</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	}			
	33, column (B))	10		19,89	<u>5,316</u>
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII		<u>· · · · · · · · · · · · · · · · · · · </u>		_Ц
			r	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	-1-1-			
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piain	ın		
_					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				✓
	If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:	pilea (זכ		
	•				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?		. 2b	1	
b	If "Yes," check a box below to indicate whether the financial statements for the year were audited.	d on	·	V	6 T
	separate basis, consolidated basis, or both:	50 011	a		100
	Separate basis Consolidated basis Both consolidated and separate basis				. Ž.
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	versial	ht		
·	of the audit, review, or compilation of its financial statements and selection of an independent account			1	
	If the organization changed either its oversight process or selection process during the tax year, ex			Š	100
	Schedule O.	.1			1
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in	2000	
	the Single Audit Act and OMB Circular A-133?		. За		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	ergo th		1	<u> </u>
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		

Form **990** (2016)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 20**16**

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► 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.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

If the organization answered "Yes," 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

	ee separate mstructions,				
	ection 501(c)(4), (5), or (6) org of organization	anizations. Complete Part III		Fanlaussides	Aidiantian mumbau
	•				ntification number
	Preservation Association				86-0662511
Part 1	I-A Complete if the Provide a description of definition of "political call	e organization is exempt unif the organization's direct and mpaign activities")	indirect political ca	ampaign activities in Part	IV. (see instructions for
2		ty expenditures (see instructions	s)		}
3	Volunteer hours for polit	ical campaign activities (see inst	tructions)		
Part	I-B Complete if th	e organization is exempt u	nder section 501	(c)(3).	
1		excise tax incurred by the organ			
2		excise tax incurred by organiza)
3		red a section 4955 tax, did it file			
4a	Was a correction made?		•		Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt u			(c)(3).
1	Enter the amount direct activities	tly expended by the filing orga			
2	Enter the amount of the	e filing organization's funds con	tributed to other or	ganizations for section	
3	Total exempt function	expenditures. Add lines 1 and	2. Enter here and	on Form 1120-POL,	
4	Did the filing organization	n file Form 1120-POL for this ye	ear?		Yes No
5	Enter the names, address organization made paym the amount of political controls.	ses and employer identification nents. For each organization liste ontributions received that were d fund or a political action comm	number (EIN) of all sed, enter the amount promptly and directly	section 527 political organi paid from the filing organ y delivered to a separate p	zations to which the filing ization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Schedule	C./Fo	ന്ന മമറ	or gg() ₋ Fア	2016
oci lectule	O 150	טפפ וווו	UI 331	J-L4.	2010

Page 2

Par	Complete if the organization section 501(h)).	is exempt	under section 50)1(c)(3) and file	d Form 5768 (elec	ction under
A	Check ► ☐ if the filing organization beloname, address, EIN, expense					up member's
в	Check > [] if the filing organization che	cked box A	and "limited cont	rol" provisions a	apply.	
	Limits on Lobby	ing Expendi	tures		(a) Filing	(b) Affiliated
	(The term "expenditures" mea	ans amounts	paid or incurred.))	organization's totals	group totals
	Total lobbying expenditures to influence p	ublic opinion	(grass roots lobby	ing)		
b		-		•		
C		-		• •		
d		•				
e	-					
f	Lobbying nontaxable amount. Enter the		,			
•	columns.	io airioani i	rom the following	tubic iii botii		
		The lebbrine		·:		
	If the amount on line 1e, column (a) or (b) is:		nontaxable amount	IS:		
	Not over \$500,000		mount on line 1e.	4500.000		
	Over \$500,000 but not over \$1,000,000		s 15% of the excess			
	Over \$1,000,000 but not over \$1,500,000		s 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess or	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000				
ξ	•			· · · · · ·	<u> </u>	
r						
i	Subtract line 1f from line 1c If zero or less					
j	If there is an amount other than zero of	on either line	1h or line 1i, did	the organization	n file Form 4720	□у □ и.
	reporting section 4911 tax for this year?	<u> </u>	<u> </u>	<u> </u>		∐ Yes ∐ No
	(Some organizations that made a sec	tion 501(h) el	Period Under sec lection do not have tructions for lines	e to complete al	l of the five column	s below.
	Lobbying	Expenditure	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
28	Lobbying nontaxable amount					
ı	Lobbying ceiling amount (150% of line 2a, column (e))					
	: Total lobbying expenditures					
	Grassroots nontaxable amount					,
	Grassroots ceiling amount (150% of line 2d, column (e))					
1	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

	(election under section 501(h)).	1 4	<u> </u>	(In)
	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ption of the lobbying activity.	Yes	a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?			
d	Mailings to members, legislators, or the public?		<u> </u>	
e	Publications, or published or broadcast statements?		ļ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-		
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912			
b	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
c d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5),	or se	ection
	501(c)(6).			Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1 🗸
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 1
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			
	III-B Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes."	OR (b) Par	t III-A, line 3, is
1	Dues, assessments and similar amounts from members	 ts of	1	
а	Current year		2a	
b	Carryover from last year		2b 2c	
C	Total		3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion c excess does the organization agree to carryover to the reasonable estimate of nondeductible lob and political expenditure next year?	bying	4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
Par	t IV Supplemental Information			
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gi	oup lis	st); Pa	ırt II-A, lines 1 and
2 (see	e instructions); and Part II-B, line 1. Also, complete this part for any additional information.			

Schedule C (For	n 990 or 990-EZ) 2016	Page 4
Part IV	Supplemental Information (continued)	
		•

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.

OMB No 1545-0047 2016

Open to Public Inspection

Employer identification number

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

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

Marine Preservation Association 86-0662511 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X

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Page	4

Part	Organizations Maintaining C	ollections of A	Art, Hist	torical T	reasures,	or Ot	her Similar As	sets (co	ontinu	ıed)
3	Using the organization's acquisition, ac collection items (check all that apply).	cession, and oti	her recor	ds, chec	k any of the	e follow	ring that are a s	gnifican	t use	of its
а	☐ Public exhibition		d	☐ Loan	or exchang	e progr	rams			
b	☐ Scholarly research		е	Other						
C	☐ Preservation for future generations									
4	Provide a description of the organizatio XIII.	n's collections a	and expla	in how th	ney further	the org	anization's exen	npt purp	ose ın	Part
5	During the year, did the organization so assets to be sold to raise funds rather the							_	es 🗆] No
Part										
	Complete if the organization a 990, Part X, line 21.						•		n Forr	m
1a	Is the organization an agent, trustee, of included on Form 990, Part X?							ot 🗌 Y	es [] No
b	If "Yes," explain the arrangement in Part	t XIII and comple	ete the fo	llowing ta	able:		Aı	mount		
С	Beginning balance					10				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount	on Form 990, Pa	art X, line	21, for e	scrow or cu	ustodia	account liability	? 🗌 Y	es [No
b	If "Yes," explain the arrangement in Part	t XIII. Check here	e if the ex	kplanatio	n has been	provide	ed on Part XIII .]
Part	V Endowment Funds.									
	Complete if the organization a	inswered "Yes"	" on For	m 990, F	Part IV, line	e 10.				
		(a) Current year	(b) Pri	or year	(c) Two year	s back	(d) Three years back	(e) Fou	ır years	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships							†		
e	Other expenditures for facilities and							 		
•	programs							İ		
f	Administrative expenses									
	End of year balance			· · · · · · · · · · · · · · · · · · ·						
9	Provide the estimated percentage of the	ourrent veer en	d bolone	o (line 1e	oolumn (a	// bold	20:			
2	Board designated or quasi-endowment	Lurrent year er	oz	e (iiile ig	i, coluitiit (a	,,, riela	as.			
a	Permanent endowment		70							
b		%								
С	Temporarily restricted endowment ▶	%	000/							
0-	The percentages on lines 2a, 2b, and 2c	•		-ation th	at ara bald		ministered for the			
3a	Are there endowment funds not in the organization by:	possession of the	ie organi	zation th	at are neid	anu au	ministered for th	ie	V	A1 -
	· · ·							0-0	Yes	No
	(i) unrelated organizations							3a(i)	+	
	(ii) related organizations							3a(ii)	4—	
b	If "Yes" on line 3a(ii), are the related org						<i></i>	3b		L
4	Describe in Part XIII the intended uses of		on's end	owment t	unds.					
Part										
	Complete if the organization a	answered "Yes	" on For	ı		e 11a.	See Form 990,	Part X,	line	10.
	Description of property	(a) Cost or of (investm		1 ' '	or other basis other)		Accumulated epreciation	(d) Bo	ok valu	e
1a	Land									
b	Buildings									
c	Leasehold improvements									
d	Equipment				34,373		33,149			1,224
e	Other				38,249		30,320			7,929
Total.	Add lines 1a through 1e. (Column (d) mu	ıst equal Form 9	90, Part .	X, columi)c.) .	' 			9,153
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Complete if the organization answered "Yes" on Form 990, Part IX, line 11b. See Form 990, Part X, line 12. (a) Description of security (b) Book value (c) Object of ord-of-year market value (b) Cost or end-of-year market value (c) Cost or end-of-year market value (d) Cost or end-of-year market value (e) Cost or end-of-year market value (f) Cost or end-of-year market value (g) Description of envestment (g) Descript	Part VII	Investments - Other Securities		rm 000 Part IV lis	no 11h Soo Form	2 000 Part V line 12
(i) Francial derivatives (2) Closely-held equity interests (3) Closely-held equity interests (3) Closely-held equity interests (4) Closely-held equity interests (5) Closely-held equity interests (6) Closely-held equity interests (7) Closely-held equity interests (8) Closely-held equity interests (8) Closely-held equity interests (9) Closely-held equity interests (1) Closely-he				+'		
22 Closely-held aquity interests			ry 	(b) Book value		
(S) Cher (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B						
(3) (3) (5) (6) (6) (7) (8) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9						W.
(3) (3) (5) (6) (6) (7) (8) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	(3) Other					<u> </u>
Column C	(A)				ļ	
Discreption Discreption						
(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)						
(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)				 		
Gi Gi Gi Gi Gi Gi Gi Gi						
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12) ▶				-		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12) ▶ Part XI Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description of investment (b) Book value (c) Method of variable to Cost or end-of-year market value (c) Method of variable to Cost or end-of-year market value (c) Method of variable to Cost or end-of-year market value (c) Method of variable to Cost or end-of-year market value (c) Method of variable to Cost or end-of-year market value (c) Method of variable to Cost or end-of-year market value (c) Method of variable to Cost or end-of-year market value (c) Method of variable to Cost or end-of-year market value (c) (c) Method of variable to Cost or end-of-year market value (c) (c) (c) (c) (c) (c) (c) (c) (c) (c)						
Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.		(h) must equal Form 900 Part Y col (R) line 12)				
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2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						

Schedu	e D (Form 990) 2016			Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue	er Return.	
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		. 1	97,052,261
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
С	Recoveries of prior year grants	<u> </u>	, 23 m	
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		. 2e	
3	Subtract line 2e from line 1		. 3	97,052,261
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
c	Add lines 4a and 4b		. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			97,052,261
Part			s per Return.	
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.		
1	· ·		. 1	98,663,940
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	S A San	
С	Other losses			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		. 2e	(
3	Subtract line 2e from line 1		. 3	98,663,940
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		. 4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)	. 5	98,663,940
Part	Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 11.			
MPA c	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part loes not believe there are any material uncertain tax positions and accordingly ts. MPA has filed for and received income tax exemptions in the jurisdictions	y, will not recognize any li	ability for unrec	y, MPA has
filed In	nternal Revenue Service Form 990 tax returns as required and all applicable re	turns in those jurisdiction	ns where it is rec	quired.
		·	·	·····
				

Schedule D (For	m 990) 2016	Page 5
Part XIII	Supplemental Information (continued)	
•		

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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990. ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

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OMB No 1545-0047

Open to Public Inspection

Employer identification number

Marine Preservation Association							86-0662511
Part I General Information on Grants and Assistance	n on Grants and	Assistance					:
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ain records to sub	stantiate the amou	unt of the grants or	assistance, the g	grantees' eligibility fo	or the grants or assistance	e, and
the selection criteria used to award the grants or assistance?	award the grants	or assistance?					· · · · Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	nization's procedur	es for monitoring	the use of grant fu	nds in the United	States.		
Part II Grants and Other As	ssistance to Do	mestic Organiz	ations and Dom	nestic Governm	nents. Complete i	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form	rered "Yes" on Form
990, Part IV, line 21,	tor any recipient	that received m	ore than \$5,000.	Part II can be d	uplicated if addition	990, Paπ IV, line 21, for any recipient that received more than \$5,000. Paπ II can be duplicated it additional space is needed.	
1 (a) Name and address of organization or government	(9) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Marine Spill Response Corp.							
220 Spring St., Herndon, VA 20170	62-1437621	501(c)(4)	97,854,000				Oil Spill Response
(2)							
(6)							
(4)							
(9)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	n 501(c)(3) and gov	ernment organiza	tions listed in the li	ine 1 table			0
3 Enter total number of other organizations listed in the line 1 table	organizations listed	I in the line 1 table					←
For Paperwork Reduction Act Notice, see the Instructions for Form 990	see the Instruction	s for Form 990.		Ö	Cat No 50055P		Schedule I (Form 990) (2016)

(f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. determines to provide to grantee organizations. In connection with the submission of each grant request, grantee organizations also submit documentation as to how period, together with sufficient detailed information as to the costs and purposes of the items of expenses for which such funds are requested, in accordance with a the previous grant funds have been expended, the amount of unexpected funds the grantee organization then has on hand and an affirmative statement to the effect mutually agreeable time schedule which will provide the Corporation sufficient opportunity to carefully review such requests and secure any funds the Corporation The complete name and mailing address of the organization listed in Part II is Marine Spill Response Corporation, 220 Spring Street, Suite 500, Herndon, VA 20170. The purpose of providing grant funding to this organization is to maintain and increase existing capabilities for mitigating the environmental damage caused by oil The Corporation has defined the procedures for monitoring the use of grant funds to entities in the United States by requiring the execution of a grant agreement Corporation may request grantee organizations to provide an independent, third-party audit of specified past expenditures of funds granted by the Corporation. that stipulates such procedures. These include the requirement that grantee organizations provide the Corporation with requests for funds covering a specific that the previous period's grant funds have been expended for the items for which such funds were requested to the extent funded by the Corporation. The (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance spills within specified geographic areas determined by the Board of Directors of the Corporation. (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of (a) Type of grant or assistance Part IV Part III က S 9 N

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

OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

<u>Marine</u>	Preservation Association	86-06	62511		
Part	Questions Regarding Compensation				
1a	Check the appropriate box(es) if the organization pr	rovided any of the following to or for a person listed on For provide any relevant information regarding these items.	m	Yes	No
	 ✓ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account 	 ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☑ Health or social club dues or initiation fees ☐ Personal services (such as, maid, chauffeur, chef) 			
b		the organization follow a written policy regarding payme spenses described above? If "No," complete Part III		√	
2		or to reimbursing or allowing expenses incurred by a O/Executive Director, regarding the items checked on lii		✓	
3	organization's CEO/Executive Director. Check all related organization to establish compensation of	ganization used to establish the compensation of the that apply. Do not check any boxes for methods used by a the CEO/Executive Director, but explain in Part III.	a		
	 ✓ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations 	 ✓ Written employment contract ✓ Compensation survey or study ✓ Approval by the board or compensation committee 			
4	During the year, did any person listed on Form 99 organization or a related organization:	0, Part VII, Section A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-contri	ol payment?	4a		✓
b	Participate in, or receive payment from, a supplen	nental nonqualified retirement plan?	4b		✓
С	Participate in, or receive payment from, an equity- If "Yes" to any of lines 4a-c, list the persons and r	based compensation arrangement?	4c		✓
	, co to any or minos ha of not the personne and p	state and approache amounts for such risk minimum.	300 - 100 m		
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) For persons listed on Form 990, Part VII, Section a compensation contingent on the revenues of:				
а	The organization?		5a		
b	Any related organization?		5b		
	If "Yes" on line 5a or 5b, describe in Part III.		:	1	ı
6	For persons listed on Form 990, Part VII, Section a compensation contingent on the net earnings of:	A, line 1a, did the organization pay or accrue any			
а	The organization?		6a		
b	Any related organization?		6b		
7		ion A, line 1a, did the organization provide any nonfixe	ed 7		
8	to the initial contract exception described in	, paid or accrued pursuant to a contract that was subject Regulations section 53.4958-4(a)(3)? If "Yes," descril	ре		
	ın Part III		8		
9	If "Yes" on line 8, did the organization also for Regulations section 53 4958-6(c)?	ollow the rebuttable presumption procedure described	in		

Schedule J (Form 990) 2016

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

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

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

Note: The sum of columns (B)(I)—(III) to	or ea	ch listed individual mu	st equal the total am	ount of Form 990, Pa	T VII, Section A, line 1	a, applicable columi	n (U) and (E) amount	s for that individual.
(B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontavable (F) Total of columns (F) Compensation		(B) Breakdown o	W-2 and/or 1099-MIS	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(G)-(I)(G)	in column (B) reported as deferred on pnor Form 990
	Ξ	244,800	000'99	18,480	55,200	23,647	408,127	
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Schedule J (Form 990) 2016

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2016

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Marine Preservation Association	86-0662511
Reference core Form 990, Part VI, Section A, Line 6: The organization is organized as a non-profit corp	poration with
members. Members of the organization elect the members of the organization's governing body, but or	lo not approve
significant decisions of the governing body, nor may receive a share of the organization's profits or ex	cess dues or a
share of the organization's net assets upon the dissolution of the organization.	
Reference core Form 990, Part VI, Section A, Line 7a: The organization has two classes of members, "	voting" and "non-
voting." The voting members are entitled to vote for the election of the organization's governing body	while the non-
voting members do not have these voting rights.	
Reference core Form 990, Part VI, Section B, Line 11b: The organization's governing body and/or com	mittees with the
authority to act on behalf of the governing body have reviewed and approved the information and data	contained within the Form 990,
including Parts I through III and VII through XII before filing. The Form 990 is prepared by MPA and re-	viewed by the President before filing.
Reference core Form 990, Part VI, Section B, Line 12c: On an annual basis, the organization distribute	
certification as to adherence to its conflict of interest policy. All directors, officers and employees are	
conditions of the policy and the annual certification requirement. Management monitors transactions	
basis for evidence of conflicts, and the organization is subject to annual audit of its financial statemer	
basis by an independent auditing firm, the performance of which may also lead to the identification of	
Individuals suspecting violation of this policy are directed to report violations to the Chairperson of the	
Audit & Governance Committee. Should the suspected activity involve the committee chair, individua	
report such violations to the Chairperson of the organization's Board of Directors. Upon confirmation	
a conflict, the committee and then full Board reviews the transaction(s) in question in order to deliberate	
the proper course of action. During such deliberations, the person(s) involved in the transaction(s) or	conflict(s) do not
participate in these final discussions and decision.	

Schedule O (Form 990 or 990-EZ) (2016)	Page
Name of the organization	Employer identification number 86-0662511
Marine Preservation Association	80-0002511
Reference core Form 990, Part VI, Section B, Lines 15a & 15b: Compensation for the F	President/CEO of the organization
is reviewed and approved by the organization's Compensation Committee, comprised	solely of independent
directors of the organization's governing body. The process for determining the level	of compensation includes review
of similarly qualified individuals in functionally comparable positions of similarly situa	ated organizations, including, but not
limited to, comparability and reliance upon a compensation study performed by an inc	dependent consulting firm to
establish the compensation of the immediately preceding President/CEO of the organi	ization. The results of the
deliberations and decisions by the organization's Compensation Committee for such or	compensation arrangements
are documented and ultimately reflected in a written employment agreement. The abo	ove process was last
completed for the current tax year. There were no other compensated officers or key	employees of the organization.
Reference core Form 990, Part VI, Section C, Line 19: The organization makes these d	documents available to the public
upon request as required by law.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Marine Preservation Association

Partl

Related Organizations and Unrelated Partnerships

1

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990.

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

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

2016

OMB No 1545-0047

Open to Public Inspection Employer identification number 86-0662511

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling entity Schedule R (Form 990) 2016 ŝ 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. Yes (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section 501(c)(4) (c)
Legal domicile (state
or foreign country) Cat No 50135Y (c)
Legal domicile (state or foreign country) Tennessee (b) Primary activity Oil Spill Response (b)
Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (1) Marine Soill Response Corporation, 220 Spring Street, Suite 500. (a)
Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization Herndon. Virginia 20170. 62-1437621 Part II ව © $\boldsymbol{\epsilon}$ 0 € 9 8 ල € 9 9 E

Page 2

Schedule R (Form 990) 2016

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. Part III

(k) ' Percentage ownership									art IV,	Section 512(b)(13) controlled entity?	Yes No								Schedule R (Form 990) 2016
(j) General or managing partner?	Yes No		_						1 990, Pa	(h) Percentage Sectownership	۲								le R (Forn
Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									"Yes" on Form	(g) (herce of share of end-of-year assets owne									Schedu
(h) Disproportionate allocations?	Yes No								answered										
Share of end-of- Disproportionate year assets allocations?						-			anization e tax year	(f) Share of total nust)									
			<u> </u> -						the organical	(e) Type of entity (C corp, S corp, or trust)									
(f) Share of total income									plete if trust di										
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)									Trust. Com	(d) Direct controlling entity			:						
									ation or	micile gn country)									
(d) Direct controlling entity									s a Corporations treated	(c) Legal domicile (state or foreign country)									
(c) Legal domicile (state or foreign									s Taxable a	(b) Primary activity									
(b) Prmary activity									rganizations or more relate		i								
P									elated C	organizatior									
(a) Name, address, and EIN of related organization									Identification of Related Organizations Taxable as a Corporation or Trust. Complete if 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									
Z		(I)	2	(6)	(4)	(2)	(9)	6	Part IV	_		(1)	(2)	(6)	(4)	(2)	(9)	(a)	

	rganizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.
Form 990) 2016	Transactions With Related Organizations. Con
Schedule R (F	Part V

Yes No	\ -		>	>	>		>	>	>	>	>	>	>	>	>	>		>	>	>	>	holds.	involved							
_	7	2 2	2	1d	1e		#	19	£	;	÷	1k	=	Ē	ŧ	10		1p	19	+	18	n thres	amount							1
(2)	: \1-II s									· · · · ·								· · · · ·	· · · · · ·			ships and transaction	(d) Method of determining amount involved	\$97.854.000 Net Cash Grants						2400 (000 cm cl.) a chih chic
-	nizations listed in Pan				•	•											• • • •					uding covered relation	(c) Amount involved	\$97.854.000						
	or more related orga					· · · · ·																omplete this line, incl	(b) Transaction type (a-s)	q						
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	1 During the tax year, did the organization engage in any of the following transactions with one of more related organizations listed in Parts II-17?	b Gift grant, or capital contribution to related organization(s)	c Giff, grant, or capital contribution from related organization(s)	d Loans or loan guarantees to or for related organization(s)	e Loans or loan guarantees by related organization(s)		f Dividends from related organization(s)	g Sale of assets to related organization(s)		i Exchange of assets with related organization(s)	j Lease of facilities, equipment, or other assets to related organization(s)	k Lease of facilities, equipment, or other assets from related organization(s)	l 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)				p Reimbursement paid to related organization(s) for expenses	q Reimbursement paid by related organization(s) for expenses	r Other transfer of cash or property to related organization(s)	s Other transfer of cash or property from related organization(s)	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	(1) Marine Spill Response Corporation	(2)	(3)	(4)	(5)	(9)	

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 gloss revenue) that was not a related organization. See instructions regarding excusion of containing participations and the containing sections and the containing sections are contained to the containing sections and the containing sections are contained to the containing sections and the containing sections are contained to the containing sections and the containing sections are contained to the containing sections and the containing sections are contained to the containing sections and the containing sections are contained to the containing section are contained to the containing section are contained to the containing section are contained to the containing section are contained to the containing section are contained to the containing section are contained	gaintailoir. Jea		egal all ig exclusi	3 5 5 10	an interest in the	in contract.	į	5	3	149
(a) Name, address, and EIN of entity	(b) Pnmary activity	(c) Legal domicile	(a) Predominant	(e) Are all partners			(n) Disproportionate	Code V—UBI		Percentage
		(state or foreign country)	income (related, unrelated, excluded from tax under	section 501(c)(3) organizations?	total income	_	allocations?	10	managing partner?	ownership
			sections 512-514)	Yes No			Yes No		Yes No	
(1)	,									
(2)	,									
(6)						:				:
(4)	,									
(5)										
(9)	,									
Œ	,							-		
(8)										
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(13)										
(14)										
(15)	-									
(16)										
								Sche	dule R (For	Schedule R (Form 990) 2016

Doxt VIII	Supplemental Information.
Part VII	Provide additional information for responses to questions on Schedule R. See Instructions.
The Marine	Spill Response Corporation ("MSRC") has been reported as an organization related to the filing organization Marine
Preservatio	n Association ("MPA") based upon the definition of control as provided within the instructions for Schedule R,
Related Org	panizations and Unrelated Partnerships. Under this definition, MPA is deemed to 'control', and hence deemed
to be the 'p	arent' of MSRC. MSRC is fully responsible for directing its own operational activities and functions independently
of MPA. Ho	wever, under their respective corporate organizational documents, MPA has the authority to elect and/or
remove a m	ajority of MSRC's directors. Under MPA's organizational documents, this authority is delegated to a special committee
comprised	of a designated subset of MPA directors who also meet certain citizenship eligibility criteria, as required by the
United State	es Shipping Act of 1916, as amended.
••••	