DLN: 93493029001491 OMB No. 1545-0047 **Return of Organization Exempt From Income Tax** 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. Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020 C Name of organization D Employer identification number B Check if applicable: Ocean Conservancy ☐ Address change 23-7245152 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1300 19th Street NW No 8th Fl ☐ Amended return ☐ Application pending (202) 429-5609 City or town, state or province, country, and ZIP or foreign postal code Washington, DC  $\,\,$  200361609  $\,\,$ G Gross receipts \$ 39,744,551 Name and address of principal officer: H(a) Is this a group return for Kenneth Donaldson □Yes ☑No subordinates? 1300 19th Street NW No 8th Fl H(b) Are all subordinates Washington, DC 200361609 ☐ Yes ☐No included? 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► www.oceanconservancy.org L Year of formation: 1972 M State of legal domicile: DC **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other lacktriangleSummary 1 Briefly describe the organization's mission or most significant activities: Ocean Conservancy is working to protect the ocean from today's greatest global challenges Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . 17 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 16 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 131 943,195 Total number of volunteers (estimate if necessary) . . . . 6 Total unrelated business revenue from Part VIII, column (C), line 12 **7**a **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 28,163,632 32,994,121 Ravenue 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,564,841 596,849 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 140,029 176,334 30,868,502 33,767,304 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 13,127,817 15,304,252 Expenses 443,183 326,492 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶4,879,554 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 14,330,680 14,932,330 30,099,043 32,093,986 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)

Revenue less expenses. Subtract line 18 from line 12 . 769,459 1,673,318 Net Assets or Fund Balances Beginning of Current Year **End of Year** 49,190,567 52,649,926 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 3,201,951 3,680,879

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Signature of officer Sign Here

Kenneth Donaldson Chief Financial Officer Type or print name and title Print/Type preparer's name

Preparer's signature Check | if 2021-01-26 P00639819 Paid self-employed Firm's name Rogers & Company PLLC Firm's EIN ► 58-2676261 Preparer Use Only Firm's address ▶ 8300 Boone Boulevard Suite 600 Phone no. (703) 893-0300 Vienna, VA 22182

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3).

22 Net assets or fund balances. Subtract line 21 from line 20 .

Cat. No. 11282Y

2,197,363

45,988,616

Form 990 (2019)

☑ Yes ☐ No

1,530,912

48,969,047

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Pa	art III Statement	of Program Service	e Accomplis	hments							
	Check if Sche	dule O contains a respo	nse or note to a	any line in this Part III .		🗹					
1	Briefly describe the o	organization's mission:									
		king to protect the ocea an and the wildlife and o			s. Together with our partners, we	create science-based					
2	Did the organization undertake any significant program services during the year which were not listed on										
	the prior Form 990 o	r 990-EZ?				🗌 Yes 🗹 No					
	If "Yes," describe the	ese new services on Sch	iedule O.								
3	Did the organization	cease conducting, or m	iake significant i	changes in how it conduc	ts, any program						
	services?					🗌 Yes 🗹 No					
	If "Yes," describe the	ese changes on Schedul	e O.								
4	Section 501(c)(3) an		ns are required	to report the amount of	rgest program services, as meas grants and allocations to others,						
4a	(Code:	) (Expenses \$	9,170,470	including grants of \$	153,355 ) (Revenue \$	)					
	See Additional Data										
4b	(Code:	) (Expenses \$	7,024,938	including grants of \$	136,566 ) (Revenue \$	)					
40	`										
40	See Additional Data										
40 4c	See Additional Data (Code:	) (Expenses \$	6,975,221	including grants of \$	1,217,991 ) (Revenue \$	)					
		) (Expenses \$	6,975,221	including grants of \$	1,217,991 ) (Revenue \$	)					
	(Code:	) (Expenses \$ ) (Expenses \$	6,975,221	including grants of \$ including grants of \$	1,217,991 ) (Revenue \$ 23,000 ) (Revenue \$	)					
	(Code: See Additional Data (Code: Climate: Ocean Conservand decision-makers at based work engages pedirectly address the conwildlife - and the people	) (Expenses \$ vancy is working to advance the local, state, national ar ople at all levels: citizens, b cerns of coastal citizens, sh a, businesses and communit	1,643,099 e solutions to addred international levousinesses, NGO prow that ocean and ties that depend or	including grants of \$ ess one of the greatest challe rel to develop, inform and ad- artners, local governments and d climate-related actions are	23,000 ) (Revenue \$ enges facing the ocean: climate change vocate for ocean-specific solutions to to d the state government to advance m possible to protect our incredible ocea s shipping program targets the sixth-la	)  b. We work with key partners  he climate crisis. Our state-  leaningful solutions that  n, coastal environments and					
	(Code: See Additional Data (Code: Climate: Ocean Conservand decision-makers at based work engages pedirectly address the con wildlife - and the people greenhouse gas emission	) (Expenses \$ vancy is working to advance the local, state, national ar ople at all levels: citizens, b cerns of coastal citizens, sh a, businesses and communit	1,643,099 e solutions to addra international lev pusinesses, NGO p now that ocean and ties that depend on the global shippin	including grants of \$ ess one of the greatest challe rel to develop, inform and ad- artners, local governments and d climate-related actions are n them. Ocean Conservancy's	23,000 ) (Revenue \$ enges facing the ocean: climate change vocate for ocean-specific solutions to to d the state government to advance m possible to protect our incredible ocea s shipping program targets the sixth-la	)  b. We work with key partners  he climate crisis. Our state-  leaningful solutions that  n, coastal environments and					
4c	(Code: See Additional Data (Code: Climate: Ocean Conservand decision-makers at based work engages pedirectly address the con wildlife - and the people greenhouse gas emission	) (Expenses \$ //ancy is working to advance the local, state, national ar ople at all levels: citizens, sh cerns of coastal citizens, sh abinesses and communit ons, with the aim of making ces (Describe in Schedu 1,643,099 incl	1,643,099 e solutions to addra international lev pusinesses, NGO p now that ocean and ties that depend on the global shippin	including grants of \$ ess one of the greatest challe yel to develop, inform and ad- artners, local governments al d climate-related actions are n them. Ocean Conservancy's g industry a zero-emissions s	23,000 ) (Revenue \$ enges facing the ocean: climate change vocate for ocean-specific solutions to to d the state government to advance m possible to protect our incredible ocea s shipping program targets the sixth-la	)  b. We work with key partners  he climate crisis. Our state-  leaningful solutions that  n, coastal environments and					

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Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 2	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	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   2	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? <i>If "Yes," complete Schedule D,</i> Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	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	11c		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 2	11d		No
	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	11e	Yes	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	Yes	
	Schedule D, Parts XI and XII 2	12a 12b	Yes	No
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 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		14b	Yes	
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	Yes	
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? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		No
ט	in 163 to fine 20a, and the organization attach a copy of its addition financial statements to this retuin!	20b		

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 . . . . . .

Yes

21

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Part	Checklist of Required Schedules (continued)			
			Yes	No
	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		No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
	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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	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		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
	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 current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV			
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a		No
,	A failing member of any marviada described in line 20d: 11 Test, complete senedate 2, 1 and 1 1 1 1 1	28b		No
2	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
а	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
ar	Statements Regarding Other IRS Filings and Tax Compliance			
_	Check if Schedule O contains a response or note to any line in this Part V	• ;		<u>Ц</u>
			Yes	N.

1a

1b

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

 ${f b}$  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

 ${f c}$  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

120

0

1c

Yes

as Extre the number of employees recorded or Form W-3, Transmitted of Wage and Tax Statements, filled for the called year ending with or within the year covered by this return.  If all least one is reported on line 2a, did the organization file all recuired federal employment tax returns?  Note, If the sum of lines 1a and 2a is greater than 250, you may be recuired to e-file (see instructions)  3a ID did not greater than 150, you may be recuired to e-file (see instructions)  3b II "res," has it filed a form 990-If for this year? If "Ye to line 2b, provide an explanation in Schedule C .  3b II "res," has it filed a form 990-If for this year? If "Ye to line 2b, provide an explanation in Schedule C .  3c If filed in the call of the provided that is a bank actor if, securities account, or other financial account; a few the cryptication from the call of the provided to the provided to the call of the provided to the call of the provided to the organization and provided to the call of the provided to the organization have annual gross receipts that are normally greater than 1100,000, and did the organization of the provided to the organization include with every scillation an express scittement that such contributions or gifts were not be described.  If "res," to line 5a or 5b, dd the organization file Form 8866-T?  5c ID of the organization where annual gross receipts that are normally greater than 1100,000, and did the organization of the provided to the separation include with every scillation and express scittement that such contributions on or gifts were normally greater than 150,000, and did the organization of the separation include with every scillation and express scittement that such contributions on or gifts were not be separation or the separation or the separation of	Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
b If a least one is reported on line 2a, did the organization file all required for effice an instruction?  Note: If the sum of lines 2 and 2 is greater than 250, you may be required to effice (see instructions)  3a bit the organization have unrelated business gross income of 51,000 or more during the year?  4a at any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accounts (related as a bank account, securities account, or other financial accounts)?  5b If Year, and the organization have an interest in, or a signature or other authority over, a financial accounts (RBAR).  5c If Year, and the organization have an interest in, or a signature or other authority over, a security (such as a bank account, securities account, or other financial accounts (RBAR).  5c If Year, and the organization have an interest in or a signature or other authority over, a prohibited that was or is a partie account, or other financial accounts (RBAR).  5c If Year, and the organization have an interest in or a signature or other authority over, and the organization have an interest in or a signature or other authority over, and the organization have an interest in or a signature or other authority over a prohibited that where the account of the organization have an organization and partly for goods and services provided to the organization state were not tax deductible or organization under section 170(c).  5c If Year, and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible.  5c If Year, and the organization organization in excess of 575 made partly as a contribution and partly for goods and services provided to the payor?  5c If Year, and the organization include with every solicitation and services provided?  5d If Year, and the organization include with every solicitation and partly for goods and services provided to the payor?  5d If Year, includes the number of forms \$232 filed dur	2a	Tax Statements, filed for the calendar year ending with or within the year covered by	131		
3a bit the organization have unrelated business gross income of \$1,000 or more during the year?  4a A any time during the caterdar year, did the organization have an intensit in or a signature or either authority over, a financial account?  5b if "yes," either the name of the foreign country; levels as a shall account, securities account, or other financial accounts (FBRR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization are annual gross receipts that are normally greater than \$100,000, and did the organization for solid any ordithy the organization in the form \$886-T?  6a Does the organization nave annual gross receipts that are normally greater than \$100,000, and did the organization for solid any ordithy the entity to the country to the solid any contributions that may receive deductible contributions under section \$170(c).  5b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not to tax decurition.  6c but he organization receive any anyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  7b Yes," indicates the number of Forms \$222 filed during the year.  8 bif Hers," indicates the number of Forms \$222 filed during the year.  9 bif the organization received a contribution of cars, boats, airplane, or other vehicles, cid the organization file Form \$999 as required?  7c Indicates the number of Forms \$222 filed during the year.  9 Sponsoring organizations maintaining donor advised funds.  10 bid the organization received a contribution of cars, boats, airplane, or other vehicles, cid the organization file a Form \$99 as required?  7c Indicates the number of some search shouldings at any time during the year?  9 Sponsoring organizations make any taxable distributions under section 4966?  9 Section \$10(c)(29) qualified neoprofit health insurance issuers.  1a include the expanization make any taxable distrib	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		Yes	
table A any time during the calendary 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, secretics account, or other financial accounts (PBAR).  If "Ires," enter the name of the foreign country.  See instructions for fining requirements for FinGH form 114, Report of Foreign Bank and Rinancial Accounts (PBAR).  Sa Was the organization a parry to a prohibited tax shelter transaction at any time during the tax year?  Sa Was the organization have annual gross receipts that are normally greazer than \$100,000, and did the organization solicit any contributions that we nor is a party to a prohibited tax shelter transaction?  If "Ires," did the organization include with every solicitation an express statement that such contributions or gifts were receipted that are normally greazer than \$100,000, and did the organization solicit any contributions that we normally greazer than \$100,000, and did the organization solicit any contributions that we not solicitation and express statement that such contributions or gifts were receipted with the asymptotic protection of the solicitation and party for goods and services provided to the payor?  Organization receive a payment in excess of \$75 made party is a contribution and party for goods and services provided to the payor?  If "Ires," indicate the number of Forms \$232 filed during the year.  Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If the organization were a contribution of cars, boats, alphanes, or other vehicles, did the organization file a Form 1999 as resulted?  The proposed of the payors of the pay	3a	-	3a		No
financial account in a foreign country (such as a bank account, securities account, or other financial account):  See instructions for filing requirements for FinCEN form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization aparty to a prohibited tax shelter transaction of the filing requirements for FinCEN form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5b Was the organization have to a prohibited tax shelter transaction?  5b Was the organization have annual gross receipts that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, to line 5a or 5b, did the organization file Form 8886-T7?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization file form 8886-T7?  6b If Yes, the file organization include with every solicitation an express statement that such contributions or gifts were not trax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8 If Yes, if did the organization notify the donor of the value of the goods or services provided?  7a Ves provided to the payor?  7b If Yes, if did the organization notify the donor of the value of the goods or services provided?  7c In No If Yes, if did the organization notify the donor of the value of the goods or services provided?  7c No If If Yes, if indicate the number of Forms \$232 filed during the year.  6 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c No If If Yes, if the organization file Form \$232 filed during the year.  6 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c No If Wes Prohibited the organization file Form \$232 filed during the year.  7d If the organization filed prohibited in a contribution of quelified indirectly, on a personal benefit contract?  7d No If Wes organization receive a contribution of quelified indirectly, on a personal benefit			3b		
See instructions for filing requirements for FincEN Form 119, Report of Foreign Bank and Financial Accounts (FBAR).  5		financial account in a foreign country (such as a bank account, securities account, or other financial account)?	, a 4a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trensaction?  5		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
tif "Yes," to line 5a or 5b, did the organization file Form 8886-T?  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?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization notify the donor of the value of the goods or services provided?  7 Did the organization notify the donor of the value of the goods or services provided?  8 Did the organization sells, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$252?  8 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 The No of the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 The No of the organization received a contribution of qualified intellectual property, did the organization file form 8599 as required?  8 Sponsoring organization make any tasked intellectual property, did the organization file a Form 1098-C?  9 Sponsoring organizations maintaining donor advised funds.  9 Sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization make any tasked existinutions under section 4966?  9 Did the sponsoring organization make any tasked idistributions under section 4966?  9 Section 501(c)(2) organizations. Enter:  10 Initiation fees and capital contributions included on Part VIII, line 12  11 Did  12 Section 501(c)(12) organizations. Enter:  13 Initiation fees and capital contributions included on Part VIII, line 12.  14 Section 501(c)(12) organization make any tasked institution of soliton organizat	5a		5a		
to a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7b If "Yes," did the organization notify the donor of the value of the goods or services provided?  5 Did the organization notify the donor of the value of the goods or services provided?  6 Did the organization sell, exchange, or otherwise disposes of tangible personal property for which it was required to file form \$2822.  d If "Yes," indicate the number of Forms \$282 filed during the year.  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c No  f Did the organization received a contribution of qualified intellectual property, did the organization file Form \$899 as required.  If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  No  8 Sponsoring organizations maintaining donor advised funds, Did a donor advised fund maintained by the sponsoring organization has excess business holdings at any time during the year?  9 Sponsoring organization maintaining donor advised funds.  2 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Section \$501(c)(7) organizations. Enter:  a Intaktion fees and capital contributions included on Part VIII, line 12, for public use of club facilities  10 Did  10 Section \$901(c)(29) qualified nonprofit health insurance issuers.  a Is the organization i	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," lidt the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  5 If "Yes," clid the organization notify the donor of the value of the goods or services provided?  6 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$252?  6 If I'ves," indicate the number of Forms \$282 filed during the year.  7 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization received a contribution of qualified intellectual property, did the organization file Form \$899 as required?  8 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form \$108-C?  7 Did the organization make any taxable distributions under section 4966?  8 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  a Initiation fees and capital contributions included on Part VIIII, line 12. for public use of club facilities  10b					
not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the peyor?  b If "Yes," idl the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282?  d If "Yes," indicate the number of Forms \$282 filed during the year.  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c No  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7f No  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  1098-C?  No  Sponsoring organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make and vasable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Sponsoring organization make and trashide distributions under section 4966?  Did the sponsoring organization make and trashide distributions under section 4966?  Sponsoring organization make and contributions included on Part VIII, line 12  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Section 501(c)(12) qualified nonprofit health insurance issuers.  a Is the organization is for additional information the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of reserves the organization is required to maintain by the states in which the organization is for additional information the organization is required to maintain b		solicit any contributions that were not tax deductible as charitable contributions?			No
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If Yes,* did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282?  d If Yes,* indicate the number of Forms 8282 filed during the year		not tax deductible?			
b If "Yes," and it die organization notify the donor of the value of the goods or services provided?  Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$2.82?  To No  If "Yes," indicate the number of Forms \$2.82 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Je No  Joint the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Je No  Joint the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required?  Joint file organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?  Joint file organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(12) organizations. Enter:  Joseph Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Joseph Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Joseph Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Joseph Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Joseph Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Joseph Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Joseph Gross income from ot		•			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 82827 filed during the year . 7d   7d   7d   7d   7d   7d   7d   7d		provided to the payor?		Yes	
Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e No  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7f No  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organization make any taxable distributions under section 4966?  10 Section 501(c)(17) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12. for public use of club facilities  10 Did be sponsoring organizations. Enter:  a Gross income from members or shareholders  b Gross income from members or shareholders  b Gross income from members or shareholders  b Gross income from members or shareholders  11 Did  12a Section 501(c)(21) organization interest received or accrued during the year.  11b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  12b If "Yes," enter the amount of reserves on hand  13c Interest the amount o				Yes	
Polit the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e No  7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7f No  8 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as  7g required?  1 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Spensoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  10 Did the sponsoring organization make a distribution under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter:  1 Initiation fees and capital contributions included on Part VIII, line 12  10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11 Section 501(c)(12) organizations. Enter:  12 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  14 If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  15 In the organization incensed to issue qualified health plans in more than one state?  Note, See the instructions for additional information the organization must report on Schedule O.  15 Is the organization are receive any payments for indoor tanning services during the tax year?  16 No  16 If "Yes," has it filed a Form 720 to rep		Form 8282?			No
7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	d	If "Yes," indicate the number of Forms 8282 filed during the year			
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7g   7h    1 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  7h   7h    8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distribution under section 4966?  9 Did the sponsoring organization make any taxable distribution under section 4966?  9 Did the sponsoring organization make and istribution to a donor, donor advisor, or related person?  9 Did Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Did  10 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  11 In Ital  12 Section 501(c)(12) organizations them.)  12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12 If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  12 It b If "Yes," enter the amount of reserves the organization is required to maintain by the states in which the organization is usualfied health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  13 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in the o	e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12.  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders  Gross income from members or shareholders  In a section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  C Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  C Enter the amount of reserves on hand  If "Yes," has it filed a Form 720 to report these payments?!" "No," provide an explanation in Schedule O.  If "Yes," has it filed a Form 720 to report these payments?!" "No," provide an explanation in Schedule O.  Is the organization and educational institution subject to the section 4968 excise tax on net investment income?  If the Did Interpolation and educational institution subject to the section 4968 excise	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 b Did the sponsoring organization. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b 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.)  11a  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13a  No  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  14b  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  15 No  16 Is the organization and educational institutions subject to the section 4968 excise tax on net investment income?  16 No	g		7g		
Sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Did the sponsoring organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11a  Bection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  Benter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  Center the amount of reserves on hand  Jac  Did the sponsoring organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  If "Yes," see instructions and file Form 4720, Schedule N.  If Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	h				
a Did the sponsoring organization make any taxable distributions under section 4966?	8		8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9	Sponsoring organizations maintaining donor advised funds.			
10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a Initiation fees and capital contributions included on Part VIII, line 12	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders	10	Section 501(c)(7) organizations. Enter:			
11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders	а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
a Gross income from members or shareholders	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11				
against amounts due or received from them.)		<u> </u>			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?	b	· · · · · · · · · · · · · · · · · · ·	_		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
a Is the organization licensed to issue qualified health plans in more than one state?	b				
Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans					
which the organization is licensed to issue qualified health plans		<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	13a		
14a Did the organization receive any payments for indoor tanning services during the tax year?		which the organization is licensed to issue qualified health plans	_		
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		100			No
Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?					140
If "Yes," see instructions and file Form 4720, Schedule N.  16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or exce	ess		No
	16	If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		No

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI								
Se	ction	A. Governing Body and Management							
				Yes	No				
1a		the number of voting members of the governing body at the end of the tax year 17							
	body,	ere are material differences in voting rights among members of the governing , or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O.							
b	Enter	the number of voting members included in line 1a, above, who are independent  1b  16							
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other er, director, trustee, or key employee?	2	Yes					
3		he organization delegate control over management duties customarily performed by or under the direct supervision icers, directors or trustees, or key employees to a management company or other person?	3		No				
4	Did th	he organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No				
5	Did th	he organization become aware during the year of a significant diversion of the organization's assets? .	5		No				
6		he organization have members or stockholders?	6		No				
7a	Did th mem	he organization have members, stockholders, or other persons who had the power to elect or appoint one or more bers of the governing body?	7a		No				
b		ny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or ons other than the governing body?	7b		No				
8	the fo	he organization contemporaneously document the meetings held or written actions undertaken during the year by ollowing:							
а	_	poverning body?	8a	Yes					
b		committee with authority to act on behalf of the governing body?	8b	Yes					
	orgar	ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No				
Se	ction	<b>B. Policies</b> (This Section B requests information about policies not required by the Internal Revenue	: Code						
10-	D:4 H	ha averagination have local sharehore by a skillintar 2	10a	Yes	No No				
		he organization have local chapters, branches, or affiliates?  s," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	Tua						
b		oranches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has t	he organization provided a complete copy of this Form 990 to all members of its governing body before filing the	11a	Yes					
b	Descr	ribe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Did th	he organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b		officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to cts?	12b	Yes					
С		the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done	12c	Yes					
13	Did th	he organization have a written whistleblower policy?	13	Yes					
14	Did th	he organization have a written document retention and destruction policy?	14	Yes					
15		he process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The o	organization's CEO, Executive Director, or top management official	15a	Yes					
b		r officers or key employees of the organization	15b	Yes					
	If "Ye	es" to line 15a or 15b, describe the process in Schedule O (see instructions).							
	taxab	he organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a ble entity during the year?	16a		No				
b	in joii	es," did the organization follow a written policy or procedure requiring the organization to evaluate its participation nt venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt s with respect to such arrangements?	166						
<b>C</b> ^	ction	C. Disclosure	16b						
<u> </u>		he states with which a copy of this Form 990 is required to be filed							
=	• •	AL , AR , CA , FL , GA , HI , IL , KS , KY , L , MS , NH , NJ , NM , NY , NC , OK , OR , P, VA , WV , WI							
18		on 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s available for public inspection. Indicate how you made these available. Check all that apply.							
	☑ (	Own website 🔲 Another's website 🗹 Upon request 🔲 Other (explain in Schedule O)							
19		ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest							
20	State	, and financial statements available to the public during the tax year.  the name, address, and telephone number of the person who possesses the organization's books and records:  neth Donaldson 1300 19th St NW 8th Fl Washington, DC 20036 (202) 429-5609							

<ul> <li>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.</li> <li>Isist all of the organization's current key employees, if any. See instructions for definition of "key employee."</li> <li>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 organizations.</li> <li>List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations.</li> <li>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 \$100,000 of reportable compensation from the organizations.</li> <li>Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.</li> <li>(A)  Name and title          (B)  Average hours per week (list any hours per week (list any hours per week (list any hours below dotted line)          (C)  Name and title          (D)  Reportable compensation from the organization and any officer and a director/trustee)          (D)  Reportable compensation from the organization of the organization of the organization from th</li></ul>	Form 990 (2019)											Pag	ge <b>7</b>
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear.  ■ 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 organizations.  ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above.  ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ (B)  Name and title  ■ (C)  Position (do not check more than subject or the organization or any related organization or trustee) and the organization or			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,		
La Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear.  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 furrent key employees, if no. See instructions for definition of "key employee."  List all of the organization's furrent key employees, if any. See instructions for definition of "key employee."  List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 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 organization and any related organization or any current officer, director, or trustee.  (A)  Name and title  A Reportable compensation from the organization or any related organization or any new powers of the organization or any new powers or trustees or trustees that received, in the capacity as a former director, or trustee.  (B)  A Reportable compensation or trustee of the organization or trustee.  (C)  (B)  A Reportable compensation or from the organization or end to the compensation organization organizat	Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				. [	
■ 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, more than \$10,000 of reportable compensation from the organization, more than \$10,000 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 for the order in which to list the persons above.  □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ (A)  Name and title  ■ (B)  Average hours per week (list any hours for related organizations below dotted line)  ■ (C)  Reportable compensation from the organization from the organization of the organization has not officer and a director/trustee)  ■ (D)  Reportable compensation from the organization organization organization (W-2/1099-MISC)  ■ (F)  Estimated organization organizations (W-2/1099-MISC)  ■ (F)  Estimated organizations (W-2/1099-MISC)  ■ (F)  Estimated organization organizations (W-2/1099-MISC)  ■ (F)  Estimated organizations (W-2/1099-MISC)  ■ (F)  Estimated organization organization organization organization organization organization organization orga	Section A. Officers, Directors, Tru	istees, Key E	mploy	ees,	an	d H	lighe	st C	Compensated En	nployees			
■ 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 freportable compensation 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. See instructions for the order in which to list the persons above.  □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ Check this box if neither the organization nor any related organization organization from the organization of related organizations below dotted line)  ■ Check this box if neither the organization below dotted line)  ■ Check this box if neither the organization or any related organization of from the organization of from the organization of the compensation from the organization and related organizations below dotted line)  ■ Check this box if neither the organization or any related organi	year.		•						, ,		-	n's ta	Κ
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 organization and any related organization.      ● List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization.      ● List all of the organization than \$10,000 of reportable compensation from the organization nor any related organization and any related organization compensated any current officer, director, or trustee.	of compensation. Enter -0- in columns (D), (	E), and (F) if no	compe	nsati	on w	/as	oaid.		.,				
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 from the organization and any related organizations.  ■ List all of the organization from the organization and any related organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.  ■ List all of the organization's <b>former directors or trustees</b> that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organizations.  ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization nor any related organization nor any related organization nor any related organization nor any neither the organization nor any neither than the organization nor any neither the organization nor any neither the organization nor any neither than the organization n													
■ 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. See instructions for the order in which to list the persons above.  Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  (A)  Name and title  (B)  Average hours per week (list any hours below dotted line)  (C)  (D)  (E)  Reportable compensation from the organization (do not check more than one box, unless person is both an officer and a director/trustee)  (C)  (D)  (E)  Reportable compensation from the organization (W-2/1099-MISC)  (W-2/1099-MISC)  MISC)  MISC)  (F)  Estimated amount of other compensation from the organization and related organizations organizations.													
Average hours per week (list any hours for related organizations) below dotted line)    Continue to the person of the order in which to list the persons above.    Continue to the order in which to list the persons above.	of reportable compensation from the organiz	ation and any re	elated o	rgani	zatio	ons.			. ,	·	·		
(A) Name and title  (B) Average hours per week (list any hours for related organizations below dotted line)  (B) Average hours per week (list any hours for related organizations below dotted line)  (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (B) Average hours per week (list any hours for related organization (W-2/1099-MISC)  (B) Reportable compensation from the organizations (W-2/1099-MISC)  MISC)  (F) Estimated amount of other compensation from the organization and related organizations organizations)	organization, more than \$10,000 of reportab	le compensatio	n from t								Э		
Name and title  Average hours per week (list any hours for related organizations below dotted line)  Name and title  Average hours per week (list any hours for related organizations below dotted line)  Position (do not check more than one box, unless person is both an officer and a director/trustee)  Officer	Check this box if neither the organizatio	n nor any relate	d organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.			
it steed		Average hours per week (list any hours	than o is b	ne bo oth a direct	o no ox, u n of or/t	t che inles ficer	s pers	on	Reportable compensation from the organization	Reportable compensation from related organizations	Estimat amount of compensa from th organizatio relate	mated t of oth ensatio	n
See Additional Data Table		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		, ,		ated	
	See Additional Data Table												
													—
													—

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Part	· · · · · · · · · · · · · · · · · · ·		, Key I	-mpl			and	nıgl			1	(conti		<u> </u>
	<b>(A)</b> Name and title	(B) Average hours per week (list any hours for related	•	ne bo	ox, u n off or/ti	che inles icer rust	ss pers and a ee)	son	( <b>D</b> ) Reportation compens from torganize (W-2/1)	able sation the ation	(E) Reportable compensation from related organizations (W-2/1099-	,	Estima Estima amount o compens from i	ated f other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensate	Former	MISC	SC) MISC)			organization and related organizations	
See A	dditional Data Table						ê					+		
												+		
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					Ш							$\perp$		
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								$\vdash$				+		
1b St	ıb-Total			<u> </u>	Щ		<u> </u>   ▶					$\perp$		
с То	otal from continuation sheets to Pa	rt VII, Section	Α				•		2,852	162		0		579,120
2	Total number of individuals (including of reportable compensation from the compensation		to thos		ed al	20V	e) who	rec				<u>~ </u>		373,120
													Yes	No
3	Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule J</i>			ee, k	ey er •	mplo •	oyee,	or hi •	ghest comp	ensated • •	employee on	3		No
	For any individual listed on line 1a, is organization and related organizations individual										n the		V	
5	Did any person listed on line 1a receiv services rendered to the organization?									n or ind	ividual for	5	Yes	 No
Sec	ction B. Independent Contracto	ors										3		NO
	Complete this table for your five higher from the organization. Report compen											npens	ation	
		(A) nd business addre		•							(B)		(C Compen	
	ure International Limited								Wa		ction analysis		•	467,175
	d Canal Square Grand Canal H 662881													
	ne Sachs								Ма	rketing				247,839
New Yo	dison Ave 17th Floor ork, NY 10016													
	Wonks LLC rroll Avenue								Pol	icy Coun	sel			240,000
Newpo	rt, RI 02840 e Advisors Inc								Pol	icy Coun:	sel			230,000
1320 1	9th St NW Suite 300									,				
Washington, DC 20036  Beacon Red Engine Marketing								214,721						
2300 Clarendon Blvd Suite 925 Arlington, VA 22201														
2 To	otal number of independent contractors compensation from the organization <b>&gt;</b> 1		not lim	ited t	o the	ose	listed	abov	ve) who rece	eived m	ore than \$100,00	00 of		
	3											- 1	Form <b>99</b> 6	<b>0</b> (2019)

		(2019)								Page <b>9</b>
Part	VIII				a resno	onse or note to any	line in this Part VIII			$\square$
		STREET TO STREET			<u> </u>		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
10	1a	Federated campa	aigns		1a	280,981	L	revenue		512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	Ŀ	<b>b</b> Membership dues	s.		<b>1</b> b					
9.00	c	Fundraising even	its .		1c					
iffs, ar A	c	d Related organiza			1d					
s, G	e	e Government grants			1e	1,387,500				
ion r Si	f	<ul> <li>All other contribution</li> <li>and similar amounts</li> <li>above</li> </ul>	ns, gi s not	ifts, grants, included	1f	31,325,640				
tributio Other	g	Noncash contributio	ns inc	cluded in						
Contra		lines 1a - 1f:\$			<b>1</b> g	268,295				
ة ت	'	<b>h Total.</b> Add lines :	1a-1f	f	• •	· · · •	32,994,121			1
	2a					Business Code				
Ven	ь									
Program Service Revenue										
rvic	С									
× ×	d									
grai	e									
Ğ	_									
		All other program								
	⊢	Total. Add lines 2 Investment income				nterest, and other	1			
	s	imilar amounts) .				•		7		690,287
	l	Income from invest Royalties		t of tax-exe			121 121	5		131,125
		,		(i) Re		(ii) Personal				
	6a	Gross rents	6a							
		Less: rental								
	l	expenses Rental income	6b				_			
		or (loss)	6c				<u> </u>			
	a	Net rental income	or (	(i) Secur		(ii) Other				
		Gross amount		.,			-			
		from sales of assets other	7a	5,	883,809					
		than inventory Less: cost or	<del></del>							
	-	other basis and sales expenses	7b	5,	977,247	,				
	c	Gain or (loss)	7c		-93,438	3				
	l	Net gain or (loss)	$\Box$		-			8		-93,438
<u>a</u>		Gross income from fu (not including \$	ındrai	ising events of						
Other Revenue		contributions reported See Part IV, line 18		line 1c).						
Rev		Less: direct expen			8a 8b		_			
er		Net income or (los				ents				
	0-	Gross income from	aami	na activitios						
		See Part IV, line 19			9a					
	l	Less: direct expen			9b					
	С	Net income or (los	ss) fr	om gaming	activiti	ies	1			
	10a	Gross sales of inve	entor	y, less						
		Less: cost of good			10a 10b					
	l	Net income or (los				orv ▶				
		Miscellaneo	us Re	evenue		Business Code				
	11:	<b>a</b> CC rebates and re	eward	ds		90009	45,209	9		45,209
	b									
	6	•								
	c									
	d	All other revenue	•							
	e	Total. Add lines 1	1a-1	.1d		•	45,209	9		
	12	Total revenue. S	ee in	structions			33,767,304	4	0	0 773,183
										Form <b>990</b> (2019)

Form 990 (2019)				Page <b>10</b>
Part IX Statement of Functional Expenses				<del>-</del>
Section 501(c)(3) and 501(c)(4) organizations must of	complete all columns.	. All other organizatio	ns must complete co	lumn (A).
Check if Schedule O contains a response or note to a	ny line in this Part IX			🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	910,970	910,970		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	619,942	619,942		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	2,629,498	2,014,836	228,092	386,570
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	9,694,152	7,426,805	842,434	1,424,913
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	438,129	335,715	38,004	64,410

1,649,236

893,237

98,937

99,927

393,585

326,492

89,156

4,945,398

678,606

9,418

4,595,765

1,285,361

1,145,039

690,457

127,574

92,230

360,155

320,722

32,093,986

5,201,051

0

1,263,717

684,438

393,585

4,527,701

558,809

5,886

2,675,326

957,487

1.061,494

640,079

92,255

232,584

231,200

180,876

24,813,728

2,881,382

23

143,061

77,482

98,937

99,927

89,156

2,098

2,403

260,622

162,714

27,265

16,441

17,619

92,207

40,524

1,405

2,286

2,400,704

36,407

158,027

242,458

131,317

326,492

259,670

117,699

1,129

165,160

56,280

33,937

17,700

87,047

88,117

-183,162

4,879,554

2,283,262

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1,659,817

9 Other employee benefits . .

11 Fees for services (non-employees):

**f** Investment management fees .

12 Advertising and promotion .

.

e Professional fundraising services. See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

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

25 Total functional expenses. Add lines 1 through 24e

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).

**19** Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization .

21 Payments to affiliates . . .

expenses on Schedule O.)

 ${f g}$  Other (If line 11g amount exceeds 10% of line 25, column

10 Payroll taxes .

c Accounting .

**d** Lobbying .

13 Office expenses .

15 Royalties .

**17** Travel .

20 Interest .

23 Insurance .

a Subscriptions

c Prof. fund allocation

e All other expenses

**b** List rental

d

16 Occupancy .

14 Information technology

**b** Legal .

a Management . .

Notes and loans receivable, net . .

Prepaid expenses and deferred charges

basis. Complete Part VI of Schedule D

Investments—publicly traded securities .

Investments—other securities. See Part IV, line 11

Inventories for sale or use .

b Less: accumulated depreciation

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1,638,751

1,599,493

Page **11** 

497,510

39,258

Form 990 (2019)

33,738,152

6 7

8

10c

11

12

1,152,390

166,832

30,620,899

	<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1 Cash-non-interest-bearing	6,274,899	1	6,531,283

 <b>5</b>			
2 Savings and temporary cash investments	200,181	2	200,206
3 Pledges and grants receivable, net	9,132,525	3	10,371,276
4 Accounts receivable, net	48,763	4	50,394
5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	

10a

10b

# Assets 10a Land, buildings, and equipment: cost or other 11

12

	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,594,078	15	1,221,847
	16	Total assets. Add lines 1 through 15 (must equal line 34)	49,190,567	16	52,649,926
	17	Accounts payable and accrued expenses	1,979,794	17	1,668,360
	18	Grants payable	18,300	18	610,866
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Ś	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity			
<u> </u>		or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties,	1,203,857	25	1,401,653

	15	Other assets. See Part IV, line 11	1,594,078	15	1,221,847
	16	Total assets. Add lines 1 through 15 (must equal line 34)	49,190,567	16	52,649,926
	17	Accounts payable and accrued expenses	1,979,794	17	1,668,360
	18	Grants payable	18,300	18	610,866
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties	23		
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24).  Complete Part X of Schedule D	1,203,857	25	1,401,653
	26	Total liabilities. Add lines 17 through 25	3,201,951	26	3,680,879
Fund Balances	27	Organizations that follow FASB ASC 958, check here  and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions	25,418,354	27	30,425,611
Ba	28	Net assets with donor restrictions	20,570,262	28	18,543,436
or Fund	29	Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. Capital stock or trust principal, or current funds		29	
ssets	30	Paid-in or capital surplus, or land, building or equipment fund		30	
15.51	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net A	32	Total net assets or fund balances	45,988,616	32	48,969,047
⇒	33	Total liabilities and net assets/fund balances	49,190,567	33	52,649,926

3h

Form 990 (2019)

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.

#### Additional Data

Software ID:

members, supporters, partners and the ocean and coastal-concerned through our website, email, direct mail, social media, reporter outreach, and our

Software Version:

**EIN:** 23-7245152 Name: Ocean Conservancy

## Form 990 (2019)

Form 990, Part III, Line 4a: Science, policy and outreach: Ocean Conservancy uses the best available knowledge, science, public opinion polling and political science to inform our conservation. advocacy and outreach to advance conservation solutions that benefit the ocean and the people and communities that depend on it. Truly durable conservation solutions are possible when we have a foundation of justice and equity across our conservation, advocacy and outreach priorities and that real leadership and durable conservation change requires meaningful partnerships with citizens, businesses, scientists, decision-makers and governments - at the local, state, national and international level. We reach our

Form 990, Part III, Line 4b:

Marine ecosystem protection: Ocean Conservancy works at the local, state, federal and international level to advance conservation solutions, using the best available science and community knowledge, to protect ecosystems and the communities that depend on them. We advance protections for culturally and ecologically important Arctic

ecosystems, working in partnership with Indigenous communities. We work at the regional, national and international level to rebuild ecologically important fisheries, partnering with fishermen and local communities to advance durable protections through meaningful, innovative approaches to management and policy outcomes in the face

of the biodiversity and climate crisis.

Trash Free Seas: Ocean Conservancy empowers citizens, businesses, governments and NGOs at the local, state, national and international level to reduce the global plastic footprint and to stop the flow of 11 million tons of trash and plastic flowing into the ocean annually. We implement and organize the International Coastal Cleanup, one of the

largest single day volunteer events on behalf of the ocean, responsible for preventing and removing more than 300 million pounds of trash and plastic from our ocean, coasts

and waterways, and engaging millions of volunteers on behalf of the ocean. We partner with cities and municipalities to implement innovative ocean plastic reduction efforts and are spearheading an ocean plastic river capture project in Vietnam. We work with and enable the private sector, through our Trash Free Seas

Form 990, Part III, Line 4c:

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation week (list person is both an officer from the from related compensation and a director/trustee) organizations from the any hours organization

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

	any nours							organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Daniel Oros Chair	2.00	Х		х				0	0	0	
Suzanne Woolsey Vice Chair	2.00	х		х				0	0	0	
Edward Miller Treasurer	2.00	Х		х				0	0	0	
W Bowman Cutter	2.00			×				0	0	0	

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Vice Chair
Edward Miller
Treasurer
W Bowman Cutter
Secretary
Thomas Allen

Director

Director

Director

Director

Director

Director

Jeremy Milo

Jenny Flores

Colin le Duc

William Martin

Bonnie Crabtree

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer compensation week (list from the from related

and a director/trustee)

organization

organizations

0

0

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0

0

0

0

58,092

27,395

8,657

23,423

425,936

268,281

158,697

196,619

from the

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

	1			, , ,				ا معندما	1 (1) 2/4 000		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Jeanie Nelson Director	2.00	Х						0	0	0	
Michael Orbach Director	2.00	Х						0	0	0	
John Sargent	2.00	х						0	0	0	

Michael Orbach	2.00	Х			0	
Director		Λ.				
John Sargent	2.00					
Director	••••••	X			0	
Oswald Schmitz	2.00	v			0	
Director		^				

2.00

2.00

50.00

45.00

24.00

45.00

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any hours

and Independent Contractors

Lawrence Wagenberg

Janis Searles Jones

**Emily Woglom** 

Lawrence Amon

Kenneth Donaldson

......

VP Finance & Admin/ CFO beg 1/1/2020

Director

Director

CEO

**EVP** 

CFO

Tom Weaver

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) organizations from the

organization

151,916

140,312

140,199

136,109

134,408

47,051

46,401

46,507

20,760

46,016

0

0

0

0

0

any hours

45.00

40.00

40.00

40.00

40.00

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

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Sarah Humphries  VP, Resource Development	45.00				х			242,955	0	39,927
Chris Dorsett VP Conservation Policy & Programs	45.00				х			205,678	0	50,544
Julia Roberson VP Communications	45.00				х			197,806	0	23,423
Scott Highleyman  VP Arctic Programs	45.00				х			165,405	0	47,847
George Leonard	45.00				Х			153,653	0	47,092

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VP Communications
Scott Highleyman
VP Arctic Programs
George Leonard

Chief Scientist

Teresa Parsons

Kelly Luck

Malissa Lash

Jeffrey Watters

Michelle Frey

Director Program Development

Director, Foundation & Gov't Support

Sr. Director, Resource Development

Sr. Director, Conservation Policy

Sr. Director, Digital Outreach

......

and Independent Contractors

and Independent Contractors (A)

Trishna Gurung

Sr. Director, Communications

week (list any hours for related organizations below dotted line)
 40.00

(B)

Average hours per

p	th er an
or director	Individual trustee

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

Institutional

(C)

Position (do not check more

han one box, unless rson is both an officer d a director/trustee) employee

compensation from the organization (W-2/1099-MISC) 134,188

(D)

Reportable

(E)

Reportable

compensation

from related

organizations

(W- 2/1099-

MISC)

Estimated

amount of other

compensation

from the

organization and

related

organizations

45,985

Name and Title

efile GRAPHIC print - DO NOT			nt - DO NOT PROCESS	O NOT PROCESS As Filed Data - DLN:						
SC	HED	ULE A	Public (	Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047		
	m 99		Complete if the or	ganization is a sect 4947(a)(1) nonexe ▶ Attach to Form !	ion 501(c)(3) c empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2019		
		f the Treasury	► Go to <u>www.irs</u>	. <u>gov/Form990</u> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection		
Nam	e of ti Conse	he organiza	tion				Employer identific	ation number		
Oceai	Conse	i valicy					23-7245152			
	rt I		for Public Charity Statual private foundation because				See instructions.			
1 <b>1</b>	organiz		onvention of churches, or as	•			(A)(i)			
2		•	escribed in section 170(b)(1			. ,, ,	. , . ,			
			. , ,		•	, ,				
3		·	or a cooperative hospital serv	-			-			
4	Ц	name, city,	esearch organization operate and state:	a in conjunction with	a nospital descri	ibed in <b>section</b> :	170(b)(1)(A)(III). E	nter the nospital's		
5		-	ation operated for the benefit (iv). (Complete Part II.)	of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	ped in <b>section 170</b>		
6			tate, or local government or	_						
7	<b>✓</b>		ation that normally receives a <b>(O(b)(1)(A)(vi).</b> (Complete		s support from a	governmental u	init or from the genera	al public described in		
8			ty trust described in <b>section</b>	•	(Complete Part I	I.)				
9			ural research organization de rant college of agriculture. Se					ege or university or a		
10		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. See section 509(a)(2). (Complete Part III.)								
11		An organiza	ation organized and operated	exclusively to test for	r public safety. S	ee section 509	(a)(4).			
12		more public	ation organized and operated cly supported organizations d I through 12d that describes	escribed in section 5	<b>09(a)(1)</b> or <b>se</b>	ction 509(a)(2	). See <b>section 509(</b> a			
а		<b>Type I.</b> A so	supporting organization opera n(s) the power to regularly a <b>Part IV, Sections A and B.</b>	ated, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by			
b		Type II. A manageme	supporting organization super nt of the supporting organiza plete Part IV, Sections A a	tion vested in the san						
С		Type III f	unctionally integrated. A sorganization(s) (see instruction	upporting organizatio				ted with, its		
d		Type III n	on-functionally integrated integrated. The organization (s). You must complete Par	I. A supporting organi generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar			
e		Check this	box if the organization receiv or Type III non-functionally	ed a written determin	ation from the I		pe I, Type II, Type II	[ functionally		
f	Enter	r the number	of supported organizations				<u> </u>			
g			ing information about the su	·	r '			T		
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
Tota		l. B. '	tion Act Notice, see the In	-4 f	Cat. No. 11285		 	 90 or 990-EZ) 2019		

	(Complete only if you ch			of Part I or if th	ne organization f		
	If the organization failed	d to qualify unde	er the tests listed	d below, please	complete Part II	I.)	
	Section A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not	18,615,990	24,058,239	36,557,965	28,163,632	32,994,121	140,389,947
2	include any "unusual grant.") Tax revenues levied for the						
2	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	18,615,990	24,058,239	36,557,965	28,163,632	32,994,121	140,389,947
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						24,516,535
	(f)						
	Public support. Subtract line 5 from line 4.						115,873,412
	Section B. Total Support	T 1		T			
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	<b>(f)</b> Total
7	Amounts from line 4	18,615,990	24,058,239	36,557,965	28,163,632	32,994,121	140,389,947
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	559,032	588,022	824,503	767,978	821,412	3,560,947
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						143,950,894
12	10 Gross receipts from related activities,	etc. (see instruction	ons)			12	45,209
13	First five years. If the Form 990 is for	or the organization	n's first, second, th	ird, fourth, or fifth	tax year as a sect	tion 501(c)(3) orga	nization,
	check this box and <b>stop here</b>						,
	Section C. Computation of Publi						
	Public support percentage for 2019 (li			column (f))		14	80.500 %
	Public support percentage for 2018 Sc					15	71.710 %
	33 1/3% support test—2019. If the						
	and <b>stop here.</b> The organization qual  33 1/3% support test—2018. If the	ifies as a publicly s	supported organiza	ation			. ▶ 🗹
17a	box and <b>stop here.</b> The organization 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— <b>2019.</b> If the order meets the "facts	ganization did not s-and-circumstanc	check a box on lin es" test, check this	ie 13, 16a, or 16b, s box and <b>stop he</b>	and line 14 <b>re.</b> Explain	. ▶□
Ь	organization	st—2018. If the o zation meets the "	rganization did no facts-and-circums	t check a box on li tances" test, check	ne 13, 16a, 16b, c this box and <b>sto</b>	or 17a, and line o here.	▶□
18	supported organization Private foundation. If the organizat						▶□
	instructions						ightharpoons

Р	art III Support Schedule for							
	(Complete only if you cl						er Part II. If	
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)			
30	Calendar year	( ) 2015	(1) 2016	( ) 2247	(1) 2010	( ) 2010	(O.T.)	
	(or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not include any "unusual grants.").							
2	Gross receipts from admissions,							
	merchandise sold or services							
	performed, or facilities furnished in any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that are							
	not an unrelated trade or business							
4	under section 513  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							
<b>L</b>	3 received from disqualified persons Amounts included on lines 2 and 3							
D	received from other than disqualified							
	persons that exceed the greater of							
	\$5,000 or 1% of the amount on line 13 for the year.							
c	Add lines 7a and 7b							
8	Public support. (Subtract line 7c							
	from line 6.)							
Se	ection B. Total Support		1	<del></del>			Г	
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
9	Amounts from line 6							
10a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar sources.							
b	Unrelated business taxable income							
	(less section 511 taxes) from							
	businesses acquired after June 30, 1975.							
С	Add lines 10a and 10b.							
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is regularly carried on.							
12	Other income. Do not include gain or							
	loss from the sale of capital assets							
12	(Explain in Part VI.) <b>Total support.</b> (Add lines 9, 10c,							
13	11, and 12.).							
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>	
	check this box and <b>stop here</b>						▶ ⊔	
	ection C. Computation of Public S			! (6))		1 1		
15	Public support percentage for 2019 (lin	15						
16	Public support percentage from 2018 S	-	<u> </u>			16		
	Investment income percentage for 201			line 13 column (f	:))	17		
17 10								
18 10-	Investment income percentage from 2018 Schedule A, Part III, line 17							
	more than 33 1/3%, check this box and s							
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the							
ט	not more than 33 1/3%, check this box	-			•		_	
20	Private foundation. If the organization	-	-					
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCGONS	. 📂 📖	

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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 Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c 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 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) 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 section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

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

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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Did a disqualified person (as defined in line 9a) 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.
```

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

	edule A (101111 550 01 550 E2) 2015			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	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?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c		
S	ection B. Type I Supporting Organizations			
			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 <b>Part VI</b> 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	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			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 <b>Part VI</b> how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations			
_			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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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 <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a 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 <b>Part VI identify those supported organizations and explain</b> 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		
ı	b 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 each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<b>b</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 <b>Part VI.</b> the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O  Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in <b>Part VI</b> ). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
9	Distributable amount for 2019 from Section C, line 6	

7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to who details in <b>Part VI</b> ). See instructions	sive (provide		
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions if any for years prior to 2019			

	***				
7 Total annual distributions. Add lines 1 through 6.					
Distributions to attentive supported organizations to who details in <b>Part VI</b> ). See instructions					
9 Distributable amount for 2019 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount					
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019		
1 Distributable amount for 2019 from Section C, line 6					
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in <b>Part VI</b> ). See instructions.					
<b>3</b> Excess distributions carryover, if any, to 2019:					
a From 2014					
<b>b</b> From 2015					
c From 2016					

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
<b>b</b> From 2015			
c From 2016			
<b>d</b> From 2017			
<b>e</b> From 2018			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2019 distributable amount			
<ul> <li>Carryover from 2014 not applied (see instructions)</li> </ul>			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	The state of the s	·	

c From 2016		
d From 2017		
e From 2018		
<b>Total</b> of lines 3a through e		
g Applied to underdistributions of prior years		
n Applied to 2019 distributable amount		
Carryover from 2014 not applied (see instructions)		
Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
Applied to 2019 distributable amount		
Remainder. Subtract lines 4a and 4b from 4.		

instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
<b>b</b> Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
<b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		

C Remainder, Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
<b>7 Excess distributions carryover to 2020.</b> Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2015		
<b>b</b> Excess from 2016		
c Excess from 2017		

Schedule A (Form 990 or 990-EZ) (2019)

d Excess from 2018.

e Excess from 2019. . . . .

#### **Additional Data**

#### Software ID: Software Version:

**EIN:** 23-7245152

Name: Ocean Conservancy

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).				
Facts And Circumstances Test					

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

DLN: 93493029001491

OMB No. 1545-004

Inspection

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

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

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

Name of the organization Ocean Conservancy		Employer identification number			
	, and the second	23-7245152			
Par	I-A Complete if the organization is exempt under section 501(c) or is a section	n 527 organization.			
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (se "political campaign activities")	ee instructions for definition of			
2	Political campaign activity expenditures (see instructions)	<b>* \$</b>			
3	Volunteer hours for political campaign activities (see instructions)				

Part	І-В	Complete if the organization is exempt under section 501(c)(3).				
1	Enter	the amount of any excise tax incurred by the organization under section 4955	<b>&gt;</b>	\$_		
2	Enter	the amount of any excise tax incurred by organization managers under section 4955	<b>&gt;</b>	\$_		
9	TE tha	organization incurred a coction 4055 tay, did it file Form 4720 for this year?		_		

Was a correction made? ..... ☐ Yes ☐ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities .....

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b...... Did the filing organization file Form 1120-POL for this year?

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(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				

125,294

85,714

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

Grassroots lobbying expenditures

1.500.000

Return Reference

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(	a)	(b)	)
ctivi		Yes	No	Amou	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:				
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?				
e	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				
a	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				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	76 H = 61				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), o	r secti	on	
	,	(5), o	r secti		. N
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).		r secti	Yes	N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?		r secti	Yes	i N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?		E	Yes	s N
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?		 [	Yes 1 2 3	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?	 (5), o	 r secti	Yes 1 2 3 on 501(	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  tiii-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	 (5), o	 r secti	Yes 1 2 3 on 501(	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	(5), o	 r secti	Yes 1 2 3 on 501(	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	(5), o III-A	 r secti	Yes 1 2 3 on 501(	
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	(5), o III-A 1 2a 2b	 r secti	Yes 1 2 3 on 501(	
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	(5), o III-A 1 2a 2b 2c	 r secti	Yes 1 2 3 on 501(	
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A 1 2a 2b	 r secti	Yes 1 2 3 on 501(	
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  LIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  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 political	(5), o IIII-A 1 2a 2b 2c 3	 r secti	Yes 1 2 3 on 501(	
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  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	(5), o III-A 1 2a 2b 2c	 r secti	Yes 1 2 3 on 501(	

Explanation

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D** 

As Filed Data -

DLN: 93493029001491

OMB No. 1545-0047

# **Supplemental Financial Statements** 2019

Department of the Treasury Internal Revenue Service

(Form 990)

▶ 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. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

	ne of the organization n Conservancy				Emp	oloyer identification number
	•					7245152
Par	<b>t I</b> Organizations Maintaining Dor Complete if the organization answ				r Acc	counts.
	complete if the organization and		nor advis			(b) Funds and other accounts
. т	Total number at end of year					
	Aggregate value of contributions to (during ye					
	Aggregate value of grants from (during year)	,				
	Aggregate value at end of year					
i	Did the organization inform all donors and do organization's property, subject to the organi	nor advisors in writing that zation's exclusive legal con	ntrol?			☐ Yes ☐ No
	Did the organization inform all grantees, dono charitable purposes and not for the benefit of private benefit?	the donor or donor adviso	r, or for a	iny other purpose o	be use conferi	ed only for ring impermissible Yes No
art	Complete if the organization answ	vered "Yes" on Form 99	0, Part I	V, line 7.		
	Purpose(s) of conservation easements held by					
	Preservation of land for public use (e.g.,	,			histor	ically important land area
	Protection of natural habitat	recreation of education,				d historic structure
			ш	Preservation of a C	.er une	a mstoric structure
	☐ Preservation of open space					
	Complete lines 2a through 2d if the organizat easement on the last day of the tax year.	ion held a qualified conser	vation cor	ntribution in the for	m of a	Held at the End of the Year
a -	Total number of conservation easements				2a	
b -	Total acreage restricted by conservation easer	ments			2b	
c	Number of conservation easements on a certif	ied historic structure inclu	ded in (a)		2c	
	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 7/25/0	6, and no	t on a historic	2d	
	Number of conservation easements modified, tax year ▶	transferred, released, exti	inguished	, or terminated by	the or	ganization during the
	Number of states where property subject to c	onservation easement is lo	cated ►			_
	Does the organization have a written policy reand enforcement of the conservation easeme				of viola	ations,  Yes No
,	Staff and volunteer hours devoted to monitor  •	ing, inspecting, handling of	f violatior	s, and enforcing co	onserv	ation easements during the year
٠.	Amount of expenses incurred in monitoring, i  \$	nspecting, handling of viola	ations, an	d enforcing conser	vation	easements during the year
}	Does each conservation easement reported o and section $170(h)(4)(B)(ii)$ ?	n line 2(d) above satisfy th	ne require 	ments of section 1	70(h)(	4)(B)(i) ☐ <b>Y</b> es ☐ <b>No</b>
	In Part XIII, describe how the organization re balance sheet, and include, if applicable, the the organization's accounting for conservation	text of the footnote to the				
art	Organizations Maintaining Col Complete if the organization answ				er Si	milar Assets.
	If the organization elected, as permitted under art, historical treasures, or other similar asset provide, in Part XIII, the text of the footnote	er SFAS 116 (ASC 958), no cs held for public exhibition	t to repoi	t in its revenue sta on, or research in f		
_	If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items:					
(i)	Revenue included on Form 990, Part VIII, lin	e 1				<b>▶</b> \$
	) Assets included in Form 990, Part X					
	If the organization received or held works of a following amounts required to be reported un	art, historical treasures, or	other sin	nilar assets for fina		
	Revenue included on Form 990, Part VIII, line	, ,	_			. ▶\$
b	Assets included in Form 990, Part X					. <b>&gt;</b> \$

**d** Equipment

Sche	dule D (Form 990) 2019							Page <b>2</b>
Par	t IIII Organizations Maintai	ning Collections o	f Art, Hist	orical Treas	sures, or Oth	er Similar Asse	<b>ts</b> (continued)	
3	Using the organization's acquisition items (check all that apply):	, accession, and other	records, che	ck any of the	following that ar	e a significant use	of its collection	
а	Public exhibition		1	d 🗌 Loa	n or exchange p	rograms		
b	☐ Scholarly research		ı	e 🗌 Oth	ner			
С	Preservation for future genera	ations						
4	Provide a description of the organiz Part XIII.	ation's collections and	explain how	they further t	he organization's	s exempt purpose i	n	
5	During the year, did the organization assets to be sold to raise funds rath			•			] Yes □ I	No
Pa	rt IV Escrow and Custodial A Complete if the organizat X, line 21.		on Form 9	990, Part IV,	line 9, or repo	rted an amount	on Form 990	, Part
<b>1</b> a	Is the organization an agent, truste	,	,					
	included on Form 990, Part X?						Yes 🗆 ı	No
b	If "Yes," explain the arrangement in	n Part XIII and comple	te the follow	ing table:		Amo	unt	_
c	Beginning balance				. 1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			_
f	Ending balance				1f			
2a	Did the organization include an amo	ount on Form 990, Parl	t X, line 21, 1	for escrow or	custodial account	t liability?	Yes 🗆 I	— No
b	If "Yes," explain the arrangement in	n Part XIII. Check here	if the explai	nation has bee	n provided in Pa	ırt XIII 🗆	]	
Pa	rt V Endowment Funds.							
	Complete if the organizat	tion answered "Yes"			line 10.			
		(a) Current		b) Prior year	(c) Two years ba			
	Beginning of year balance	. 3,	718,250	3,655,468			·	2,277,442
	Contributions		107,854	1,100 184,197			0	55,704
	Net investment earnings, gains, and	losses	107,634	104,197	192,	134 230,	,667	
	Grants or scholarships							
е	Other expenditures for facilities and programs		125,292	115,693	111,			107,866
f	Administrative expenses		9,182	6,822	,	134 5,	,723	5,533
g	End of year balance	3,	691,630	3,718,250	3,655,	468 2,334,	,417 2	2,219,747
2	Provide the estimated percentage o	f the current year end	balance (line	e 1g, column (	(a)) held as:			
а	Board designated or quasi-endowm	ent ► 0 %						
b	Permanent endowment ► 76.92	20 %						
c	Temporarily restricted endowment (	<b>23.080 %</b>						
	The percentages on lines 2a, 2b, an	nd 2c should equal 100	%.					
3а	Are there endowment funds not in togranization by:	the possession of the o	rganization (	that are held a	and administered	l for the	Yes	No
	(i) unrelated organizations						3a(i)	No
	(ii) related organizations						3a(ii)	No
b	If "Yes" on 3a(ii), are the related or	-	•				3b	
4	Describe in Part XIII the intended u		n's endowme	nt funds.				
Pa	rt VI Land, Buildings, and E Complete if the organization		on Form 9	90. Part IV	line 11a. See	Form 990. Part >	K. line 10.	
		Cost or other basis		ther basis (other			(d) Book val	ue
		(investment)						
<b>1</b> a	Land							
	Buildings							
	Leasehold improvements			285,80	10	277,480		8,320

944,435

408,516

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

2,223

28,715

39,258

942,212

379,801

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes" on Form 990,	Dart T\/ !	ine 114	See Form 000 5	art V III	ne 12
	(a) Description of security or category (including name of security)	(b) Book value	ne III	c) Methor (c) Methor Cost or end-of-	d of valua	tion:
(1) Financia						
(2) Closely-l (3)Other	held equity interests					
(A)						
(B)						
(C)						
(D) (E)						
(F)						
(G)						
(H)						
	n (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments—Program Related.			. C F 000	Dt V I	12
	Complete if the organization answered 'Yes' on Form 990,  (a) Description of investment	Part IV, II	ne 110	(b) Book value	(c) Me	ne 13. ethod of valuation: end-of-year market value
(1)						value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col.(B) line 13.)		•			
Part IX	Other Assets.  Complete if the organization answered 'Yes' on Form 990, F	Part IV, lir	ne 11d	. See Form 990, Par	t X, line 1	
(1)	(a) Description					(b) Book value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu.	mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.				Þ	
	Complete if the organization answered 'Yes' on Form 990, F	Part IV, lir	ne 11e	or 11f.See Form		
1. (1) Federal (4)	(a) Description of liability income taxes				(1	b) Book value
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col.(B) line 25.)			<b></b>		1,401,653
	or uncertain tax positions. In Part XIII, provide the text of the footnot 's liability for uncertain tax positions under FIN 48 (ASC 740). Check					

Part XI

Part XII

1

2

C

d

е 3

b

5

Part XIII

See Additional Data Table

4

2

b

Schedule D (Form 990) 2019

Page 4

1,711,190 33,678,148

89,156

33,767,304

32,408,907

474,432

159,511

32.093.986

Schedule D (Form 990) 2019

31,934,475

d	Other (Describe in Part XIII.)				-							20						
e	Add lines 2a through 2d																2e	
3	Subtract line 2e from line 1	_	_	_	_	_	_	_	_	_	_	_	_	_			3	

Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments . . . .

Total expenses and losses per audited financial statements . . . . .

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Add lines **4a** and **4b** . . . . . . . . . . .

Supplemental Information

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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

Donated services and use of facilities . . .

Prior year adjustments . . . . .

Other (Describe in Part XIII.) . Add lines 2a through 2d .

Subtract line 2e from line 1 .

Return Reference

Donated services and use of facilities . . . . . .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

2a

2b

2c

2a

2b

2c

2d

4a

4b

Explanation

4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. 4a 89,156 4b b Add lines 4a and 4b . . . . . 4c C 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . .

5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

474,432

89,156 70.355

1

2e

3

4c

5

1,236,758

474,432

chedule D (Form 990) 2019	Page <b>5</b>
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

## **Additional Data**

Software ID: Software Version:

**EIN:** 23-7245152

Name: Ocean Conservancy

### **Supplemental Information**

Return Reference

Explanation

Part V, Line 4: The donor-restricted endowment fund has no purpose restrictions and was established to pro vide continuing support for general operations of the organization.

Supplemental Information	
Return Reference	Explanation
Part X, Line 2:	Management evaluated OC's tax positions and has concluded that OC has taken no uncertain t ax positions that require either recognition or disclosure in the accompanying financial s tatements.

S

Supplemental Information						
Return Reference	Explanation					
Part XII, Line 4b - Other Adjustments:	Return of prior year grants 70,355.					

-

SCHEDULE F	State	ement of	Activities (	Outside the Un	itad States	OMB No. 1545-0047
(Form 990)	► Comp	lete if the organiz		ine 14b, 15, or 16.	2019 Open to Public	
Department of the Treasury Internal Revenue Service						Inspection
Name of the organization Ocean Conservancy					Employer	identification number
,					23-724515	
	<b>nformation</b> Part IV, line		Outside the U	<b>Jnited States.</b> Comple	ete if the organizati	on answered "Yes" on
1 For grantmakers	. Does the o	rganization mai	ntain records to	substantiate the amoun	t of its grants and	
				stance, and the selection	criteria used	
to award the grant	ts or assistan	ice?				· 🗹 Yes 🗌 No
2 For grantmakers outside the United		Part V the orga	anization's proce	dures for monitoring the	use of its grants ar	nd other assistance
3 Activites per Region	ı. (The followii	ng Part I, line 3 t	able can be dupli	cated if additional space is	needed.)	
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (o program service, desc specific type of service(s) in the regi	ribe for and investments in the region
See Add'l Data				,		
<b>3a</b> Sub-total		o	0			1,367,377
<b>b</b> Total from continuatinuation Part I .	ion sheets to					60.000
c Totals (add lines 3a	and 3b)	0				69,900 1,437,277
c Totals (add lines 3a	and 3b)	0	0			1,437,

Par	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1	(a) Name of	(b) IRS code	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount	(h) Description	(i) Method of	

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

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . . 13 Schedule F (Form 990) 2019

	uplicated if addit	(c) Number of		(a) Mannay of az -!-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	( <b>b)</b> Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page <b>4</b>
Par	Toreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		☐ Yes	<b>✓</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations. (see Instructions for Form 5471)	☐Yes	<b>☑</b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships		
	(see Instructions for Form 8865)	☐Yes	<b>✓</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713; don't file with Form 990)	☐Yes	<b>✓</b> No

Schedule F (Fo	rm 990) 2019 Page <b>5</b>
 	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.  Ille F, Supplemental Information
Return Reference	Explanation

grants (typically \$5,000 or less) Ocean Conservancy requires a basic financial report certifying the funds were used for the purpose of the grant.

Part I, Line 2: For research grants, Ocean Conservancy requires semiannual financial reports along with project, progression discussions and reports. For cleanup

990 Schedule F, Supplemental Information

Return Reference	Explanation	
Part I, line 3:	Cash value paid in US dollars.	

990 Schedule F, Supplemental Information

Beturn Reference

Explanation

Return Reference Explanation

Part III Accounting Method:

## **Additional Data**

Central America and the

Caribbean

## Software ID: Software Version:

**EIN:** 23-7245152

Name: Ocean Conservancy

Consulting services

9,654

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the	0		Grants to recipients		25,500

0 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of reaion service(s) in region region services, grants to recipients located in the reaion) Fast Asia and the Pacific 336,941 0 IGrants to recipients llocated in region East Asia and the Pacific 0 Program Services Consulting services, 277,220 royalties, meeting lexpenses

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of reaion service(s) in region region services, grants to recipients located in the reaion) Europe (Including Iceland & 48,000 0 IGrants to recipients Greenland) llocated in region Europe (Including Iceland & 0 Program Services Consulting services, 386.589 Greenland) subscriptions, meeting lexpenses

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) North America 0 Grants to recipients 163,760 llocated in region North America 119,713 0 Program Services Consulting services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) South America 0 Grants to recipients 4,000 located in region South America 0 Program Services Consulting services & 14.084 meeting expenses

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) South Asia 0 | Program Services 8,500 Consulting services Sub-Saharan Africa 0 Grants to recipients 41,741 llocated in region

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program service(s) in region services, grants to reaion recipients located in the reaion) Sub-Saharan Africa 0 |Program Services Consulting services 1.575

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) oln/A East Asia and Plastic Litter 309.941 Wire N/A lthe Pacific lAbatement |Australia, Brunei, Burma, Cambodia. oln/A North America Atlantic Fisheries 132.000 Wire N/A Canada and Isustainability Mexico, but not the United States

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 31.760 Wire North America Plastics ON/A IN/A Canada and lresearch Mexico, but not the United States Sub-Saharan Ghost gear 26.741 Wire OlN/A IN/A retrieval Africa - Angola, Benin, Botswana, Burkina Faso.

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 10,000 Wire ON/A East Asia and International IN/A the Pacific -Coastal Cleanup Australia, Brunei, Burma, Cambodia, 0 N/A Europe International 10,000 Wire IN/A (Includina Coastal Cleanup Iceland & Greenland) -Albania. Andorra,

Austria, Belgium

(i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) 10,000 Wire ON/A International IN/A Europe (Includina Coastal Cleanup Iceland & Greenland) -Albania, Andorra, Austria, Belgium Wire 0 N/A International 10.000 N/A

Europe (Including Iceland & Greenland) -Albania, Andorra,

Austria, Belgium

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

Coastal Cleanup

(i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation section (e) Amount of (a) Name of (d) Purpose of (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 10,000 Wire Central America International OlN/A IN/A land the Coastal Cleanup Caribbean -Antiqua &

	Barbuda, Aruba, Bahamas,						
	l	International Coastal Cleanup	10,000	Wire	0	N/A	N/

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

Cambodia,

N/A |Brunei, Burma,

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation section (d) Purpose of (e) Amount of (a) Name of of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash appraisal, disbursement assistance applicable) assistance other) 10,000 Wire Sub-Saharan International OlN/A IN/A Africa - Angola. Coastal Cleanup Benin, Botswana, Burkina Faso. Oln/A Central America IInternational 9,500 Wire IN/A land the Coastal Cleanup lCaribbean -Antiqua & Barbuda, Aruba, lBahamas,

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (g) Amount of (f) Manner of valuation section (d) Purpose of (e) Amount of (a) Name of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Furone International 9 000 Wire IN/A

Lui ope	IIIICEI Hacionai	3,000	AAII C	, ,	IN/	איון ריין
(Including	Coastal Cleanup					
Iceland &						
Greenland) -						
Albania,						
Andorra,						

Austria, Belgium

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

**SCHEDULE G** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

3

**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. ▶Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

DLN: 93493029001491

2019

Open to Public Inspection

	ne of the organization an Conservancy					Employe	r ide	ntification number
	all Conservancy					23-72451	52	
Pa	Fundraising Activi	·	_		answered "Yes" on Fo	rm 990, Part IV, I	ine 1	17.
1	Indicate whether the organiza	ation raised funds th	rough any	of the fo	ollowing activities. Check	all that apply.		
а	✓ Mail solicitations			е	Solicitation of non-	government grants		
b	✓ Internet and email solicita	itions		f	✓ Solicitation of gove	rnment grants		
c	✓ Phone solicitations			g	Special fundraising	events		
d	☑ In-person solicitations							
2a	Did the organization have a w or key employees listed in For						<b>√</b> γ <sub>€</sub>	es 🗆 No
b	If "Yes," list the 10 highest pa to be compensated at least \$5	aid individuals or ent 5,000 by the organiz	tities (fund zation.	draisers)	pursuant to agreements ι	inder which the fund	raise	er is
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid (or retained by) fundraiser listed i col. (i)		(vi) Amount paid to (or retained by) organization
		Direct Mail	Yes	No				
	Newport One 21 Railroad Ave	Consulting		No	6,019,468	309	,553	5,709,91
	Duxbury, MA 02332	T-1						
	Gordon and Schwenkmeyer INC 20300 South Vermont Ave	Telemarketing		No	21,759	16	,939	4,82
	Torrance, CA 90502							
Tot	al			<b>•</b>	6,041,227	326	,492	5,714,73

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

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK,

OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY, DC

	rt II Fundraising Events. Compl				
	than \$15,000 of fundraising		d gross income on Form	990-EZ, lines 1 and	6b. List events with
	gross receipts greater than \$	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. <b>(c)</b> )
Keverkie					
200					
¥					
	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
	4 Cash prizes				
N T	5 Noncash prizes				
Experises	6 Rent/facility costs				
Š	7 Food and beverages				
Zieg Zieg	Sentertainment      Other direct expenses				
2	Other direct expenses	through O in column (d)			
	11 Net income summary. Subtract line 10				
Pai	rt III Gaming. Complete if the org			V, line 19, or reported	l i more than \$15,000
	on Form 990-EZ, line 6a.	1			1
E		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue					
<u>.</u>	1 Gross revenue				
TSe.	2 Cash prizes				
7	3 Noncash prizes				
វ	3 Noncash prizes				
ង ប្ដូ	4 Rent/facility costs				
ži Delo	4 Rent/facility costs				
វ រូវ ភ្ន			☐ Yes%	☐ Yes%	
វ រដ្ឋភ្ជុំ 	4 Rent/facility costs	☐ Yes%	☐ Yes % ☐ No	☐ Yes %	
<u>1</u> 1910 –	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor	□ No	1_		
	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2	No	□ No	□ No ►	
	4 Rent/facility costs	No through 5 in column (d)	No	No	
<b></b>	4 Rent/facility costs	No  through 5 in column (d)  t line 7 from line 1, column  tion conducts gaming activities	No	<ul><li>No</li><li> ▶</li><li> ▶</li></ul>	Ves □No
a b	4 Rent/facility costs	through 5 in column (d)  through 5 in column (d)	nn (d)	No	☐ Yes ☐ No
9 a	4 Rent/facility costs	through 5 in column (d)  thine 7 from line 1, column  tion conducts gaming activations activities in each column.	No  nn (d)	No	
9 a	4 Rent/facility costs	through 5 in column (d)  thine 7 from line 1, column  cion conducts gaming activaming activities in each column  censes revoked, suspend	No  nn (d)	No	
a b	4 Rent/facility costs  5 Other direct expenses  6 Volunteer labor  7 Direct expense summary. Add lines 2  8 Net gaming income summary. Subtract the state(s) in which the organization licensed to conduct of If "No," explain:	through 5 in column (d)  thine 7 from line 1, column  cion conducts gaming activaming activities in each column  censes revoked, suspend	No  nn (d)	No	

Sche	dule G (Form 990 or 990-EZ) 2019					F	age 3
11	Does the organization conduct gam	ing activities with nonmember:	s?		· 🗌 Yes	□No	
12	Is the organization a grantor, benef formed to administer charitable gar		member of a partnership or oth	er entity	_	□No	
13	Indicate the percentage of gaming	activity conducted in:					
а	The organization's facility			13a			%
b	An outside facility			<b>13</b> b			%
14	Enter the name and address of the	person who prepares the organ	nization's gaming/special events	books and records:			
	Name •						
152	Address • The Address • Ad		om the organization receives gan				
134	_			=	· 🗆 Yes	Пыс	
b	If "Yes," enter the amount of gamin amount of gaming revenue retained			and the	□ les		
С	If "Yes," enter name and address of	f the third party:					
	Name ►						
	Address >						
16	Gaming manager information:						
	Name ▶						
	Gaming manager compensation	\$					
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent conf	tractor			
17 a	Mandatory distributions:  Is the organization required under :	state law to make charitable di	stributions from the gaming pro	ceeds to			
	retain the state gaming license?				· 🗌 Yes	□No	
b	Enter the amount of distributions re in the organization's own exempt a	·	· -	ns or spent			
Pai			* ions required by Part I, line	2h. columns (iii)	and (v): a	nd Part	
انعم			licable. Also provide any add				s.
	Return Reference		Explanation				
Scho	dula C. Part I. Lina 2h. Calumn (v)	Amounts listed in Part I. C	olumn V include a portion of nor		sional fees.		

Schedule G (Form 990 or 990-EZ) 2019

| Described | Complete | Complete

reasury nternal Revenue Service		► Go to <u>ww</u>	<u>/w.irs.gov/Form990</u> tor	the latest information	on.		
lame of the organization						Employer identific	ation number
Ocean Conservancy						23-7245152	
Part I General In	nformation on Grants	and Assistance					
the selection criteria  Describe in Part IV t	used to award the grants he organization's procedu	or assistance? res for monitoring the u	se of grant funds in the U	nited States.			☑ Yes ☐ No
Part II Grants and C that received	Other Assistance to Dom more than \$5,000. Part II	nestic Organizations a can be duplicated if ad	and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	21, for any recipient
(a) Name and address organization or government	s of (b) 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) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
7)							
(8)							
(9)							
(10)							
(11)							
(12)							
	. , , ,	-					8
	ct Notice, see the Instructio			Cat No. 5005			nedule I (Form 990) 2019

For research grants, Ocean Conservancy requires semiannual financial reports along with project, progression discussions and reports. For cleanup grants (typically less

Schedule I (Form 990) 2019

(7)

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Ithan \$5,000) Ocean Conservancy requires a basic financial report certifying the funds were used for the purpose of the grant.

Part IV

Explanation

Return Reference

Part I, Line 2:

## **Additional Data**

University Of Georgia

6 West 48th St 10th Floor New York, NY 10036

310 E Campus Rd Athens, GA 30602 Rockefeller Philanthropy

Software ID: **Software Version:** 

58-1353149

13-3615533

Form 990	.Schedule I	Part II.	Grants and Other	Assistance to	Domestic Or	ganizations and Do	mestic Governments.	
	, ,	,,				<b>3</b>		

organization	(-,	if applicable	grant	cash	(book, FMV, appraisal,	
or government			_	assistance	other)	

organization	l applicable	l Alanc	Casii	(book, inv, applaisal,
or government			assistance	other)

501(c)(3)

501(c)(3)

(c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Name and address of (b) FIN (g) Description of

352,049

350,000

**EIN:** 23-7245152 Name: Ocean Conservancy

O N/A

0 N/A

non-cash assistance

N/A

N/A

(h) Purpose of grant or assistance

Resilient Cities Network

Research

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 71-0863908 501(c)(3) 73.000l O N/A IN/A Ocean Foundation l Plant sea grass 1320 19th Street NW 500

O N/A

N/A

Research

34.921

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115

Washington, DC 20036 Arizona State University

PO Box 876011 Tempe, AZ 852876011

86-0196696

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government ation education

Dream In Green 2103 Coral Way 2nd Floor Miami, FL 33145	20-5196010	501(c)(3)	20,000	0	N/A	N/A	Conservation education
Native American Rights Fund	84-0611876	501(c)(3)	20,000	0	N/A	N/A	Bering Sea Fisheries

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1506 Broadway Boulder, CO 80302

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 00.000000 45 000 0 1 5 1 / 5 NI/A ation of

National Barks Conservation As	E2 022E16E	E01/a)/3)	10.000		N/A	N/A	Magaziana Chayana
G42 Anchorage, AK 995037175							a danielo nan kinowie age
4720 Business Park Blvd Ste	92-0060403	115	15,000	ا	IN/A		traditional knowledge

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Washington, DC 20001

|Magnuson-Stevens National Parks Conservation As I 53-0225165 501(c)(3)| 10.0001 O I N/A 777 6th Street NW 700 Reauthorization

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49302	9001	.491		
Schedule J (Form 990)		Compensation Information						OMB No. 1545-0047		
		For certain Officer								
		Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.						2019		
► Attach to Form 990.						Open to Public				
•	tment of the Treasury al Revenue Service	P Go to <u>www.ns.gov</u>	<u>/101111990</u> 101	mstructions and the latest miorina	acion.		ectio			
	ne of the organiza an Conservancy	ation		E	mployer identifica	tion nu	ımber			
				2	3-7245152					
Pa	rt I Questi	ons Regarding Compensati	ion							
<b>1</b> a				the following to or for a person listed			Yes	No		
		,	II to provide an	y relevant information regarding these						
		s or charter travel companions	님	Housing allowance or residence for per Payments for business use of persona						
		nification and gross-up payments		Health or social club dues or initiation						
		nary spending account		Personal services (e.g., maid, chauffe						
	<b>T</b> C			6 II						
b				follow a written policy regarding paym ve? If "No," complete Part III to explain		1b				
2				or allowing expenses incurred by all		2				
	directors, truste	es, officers, including the CEO/Ex	ecutive Director	r, regarding the items checked on Line	la?					
3				d to establish the compensation of the						
		EO/Executive Director. Check all ed organization to establish compe		CEO/Executive Director, but explain in	Part III.					
	✓ Compensa	ation committee	<b>✓</b>	Written employment contract						
		ent compensation consultant	<b>_</b>	Compensation survey or study						
	<b>✓</b> Form 990	of other organizations	$\checkmark$	Approval by the board or compensation	on committee					
4	During the year related organiza		90, Part VII, Sed	ction A, line 1a, with respect to the filir	ng organization or a					
а	Receive a sever	ance payment or change-of-contr	ol payment? .			4a		No		
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					4b		No		
С	Participate in, or receive payment from, an equity-based compensation arrangement?							No		
	ir res to any c	or lines 4a-c, list the persons and	provide the app	ilicable amounts for each item in Part 1	11.					
	Only 501(c)(3	), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.						
5		ed on Form 990, Part VII, Section ontingent on the revenues of:		the organization pay or accrue any						
а	The organization	1?				5a		No		
b						5b		No		
_	,	5a or 5b, describe in Part III.	A P 4 P 1							
6		ed on Form 990, Part VII, Section ontingent on the net earnings of:	A, line 1a, did t	the organization pay or accrue any						
a	=	1?				6a		No		
b		anization?				6b		No		
7	•	•	A, line 1a. did t	the organization provide any nonfixed						
-				rt III		7		No		
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III									
9	If "Yes" on line	8, did the organization also follow	the rebuttable	presumption procedure described in R	egulations section	9		No		
For F		iction Act Notice, see the Insti			053T Schedule J		1 990)	2019		

Schedule J (Form 990) 2019

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			and other	( <b>D)</b> Nontaxable benefits	columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prio Form 990
See Additional Data Table								
	_							
	+							



Software ID:

**Software Version:** 

**EIN:** 23-7245152

Name: Ocean Conservancy

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Torin 990, Schedule	<u>, , , , , , , , , , , , , , , , , , , </u>	rait II - Officers, D	irectors, Trustees, K	cy Employees, and	inglicat compensate	d Employees		
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation (ii) (iii)			(C) Retirement and other deferred	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(i)-(D)	<b>(F)</b> Compensation in column (B)
		(1) base compensation	Bonus & incentive compensation	Other reportable compensation	compensation	20	(=)(1) (=)	reported as deferred on prior Form 990
1 Janis Searles Jones CEO	(i)	332,006	90,000	3,930	20,400	37,692	484,028	0
	(ii)	0	0	0	0	0	0	0
1Emily Woglom EVP	(i)	242,752	23,999	1,530	14,831	12,564	295,676	0
	(ii)	0	0	0	0	0	0	0
<b>2</b> Lawrence Amon CFO	(i)	144,282	14,145	270	8,657	0	167,354	0
	(ii)	0	0	0	0	0	0	0
<b>3</b> Kenneth Donaldson VP Finance & Admin/ CFO	(i)	178,649	17,571	399	10,859	12,564	220,042	0
beg 1/1/2020	(ii)	0	0	0	0	0	0	0
<b>4</b> Sarah Humphries VP, Resource Development	(i)	219,497	21,928	1,530	13,551	26,376	282,882	0
, researce personspinione	(ii)	0	0	0	0	0	0	0
<b>5</b> Chris Dorsett VP Conservation Policy &	(i)	203,908	0	1,770	12,852	37,692	256,222	0
Programs	(ii)	0	0	0	0	0	0	0
<b>6</b> Julia Roberson VP Communications	(i)	178,649	17,571	1,586	10,859	12,564	221,229	0
	(ii)	0	0	0	0	0	0	0
<b>7</b> Scott Highleyman VP Arctic Programs	(i)	163,033	0	2,372	10,155	37,692	213,252	0
**	(ii)	0	0	0	0	0	0	0
<b>8</b> George Leonard Chief Scientist	(i)	151,378	0	2,275	9,400	37,692	200,745	0
Siller Bulletine	(ii)	0	0	0	0	0	0	0
<b>9</b> Teresa Parsons Director Program	(i)	150,915	0	1,001	9,359	37,692	198,967	0
Development	(ii)	0	0	0	0	0	0	0
<b>10</b> Kelly Luck Director, Foundation & Gov't	(i)	139,849	0	463	8,709	37,692	186,713	0
Support	(ii)	0	0	0	0	0	0	0
11Malissa Lash Sr. Director, Resource	(i)	138,915	0	1,284	8,815	37,692	186,706	0
Development	(ii)	0	0	0	0	0	0	0
<b>12</b> Jeffrey Watters Sr. Director, Conservation	(i)	134,862	0	1,247	8,196	12,564	156,869	0
Policy	(ii)	0	0	0	0	0	0	0
13Michelle Frey Sr. Director, Digital	(i)	133,439	0	969	8,324	37,692	180,424	0
Outreach	(ii)	0	0	0	0	0	0	0
14Trishna Gurung Sr. Director,	(i)	132,919	0	1,269	8,293	37,692	180,173	0
Communications	(ii)	0	0	0	0	0	0	0

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493029001491 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** Ocean Conservancy 23-7245152 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art—Historical treasures Art—Fractional interests 4 Books and publications 5 Clothing and household goods . . . . . Cars and other vehicles **7** Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . Χ 238,295 Fair market value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles . . . . 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ► ( Supplies ) 30,000 Purchase value 26 Other ▶ ( \_\_\_\_\_\_) 27 Other ▶ ( \_\_\_\_\_\_) 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2
is reporting in Part I, co	nation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization blumn (b), the number of contributions, the number of items received, or a combination of both. Also my additional information.
Return Reference	Explanation
Part I, Line 32b:	All non-standard contributions are reviewed by the VP, Resource Development. In consultation with the CFO, the VP, Resource Development will determine if it is in the best interest of the organization to accept the gift.
	Schedule M (Form 990) (2019)

efile GRAPH	IC print - DO	NOT PROCESS	As Filed Data -		DLN	: 93493029001491
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury		Supplemental Information to Form 990 or 990-EZ  Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.  Attach to Form 990 or 990-EZ.  Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.		ons on n.	OMB No. 1545-0047  2019 Open to Public Inspection	
Ocean Conservancy		<b>Employer ident</b> 23-7245152	ification number			
Return Reference				Explanation		_
Form 990, Part I, Line 1, Description of Organization Mission:	Together with o	our partners, we crea	te science-based solut	tions for a healthy ocean and the	e wildlife and comi	nunities that depend

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4a, Science, policy and outreach: (continued)	own reports and content. Our digital and direct mail audiences regularly take action to advance our conservation priorities.

- the single deadliest form of plastic in the ocean.

Form 990.

## Return Explanation Reference (continued) Alliance, to implement more effective international policy and financing solut

Part III. Line ions to reduce ocean plastic. We advocate, informed by the best available science and more 4c, Trash than 30 years of our International Coastal Cleanup data, to eliminate the most problemati c forms of single use plastic packaging and products. We foster best practices among key s Free Seas: takeholders to create new, innovative approaches to prevent and remove ghost fishing gear (continued)

Return
Reference

Explanation

Explanation

Form 990,
Part VI,
Section A,
line 2

Return Explanation

line 11b

Reference

Form 990,
Part VI,
Section B.

The 990 is prepared by an outside firm. The CFO performs a detailed review of the 990, rec onciles any questions and modifies the return if necessary. The 990 is then forwarded to t he Finance Committee for further questions. After their review and any adjustments if nece

ssarv, the 990 is forwarded to the entire Board and then filed with IRS.

Return Reference	Explanation
Form 990, Part VI, Section B, line 12c	Conflict of interest policy disclosure statements are to be prepared at least annually. In the case where a possible conflict by an employee other than the CEO of the organization is identified, the CEO shall determine whether an actual or potential conflict of interest exists or can be reasonably construed to exist and how the conflict of interest should be resolved. When a conflict of interest is disclosed by a covered person other than a cover ed employee or by the CEO, the Chair shall disclose the conflict of interest to the Board of Directors or a designated committee. Then by majority vote of the disinterested Directors (even if the disinterested Directors constitute less than a quorum) it will be decided whether an actual or potential conflict of interest exists or can be reasonably construed to exist. Proposals to the full Board of Directors as to how the conflict of interest should be resolved will then be provided.

## 990 Schedule O, Supplemental Information Return Explanation

Reference

Form 990,
Part VI,
Section B,
line 15

The Board sets the President & CEO's salary based on its evaluation of their performance.
The Board takes into account market surveys and the organization's performance and financi al position. The Executive Committee of the Board of Directors reviews and approves the compensation of other officers and key employees using externally prepared comparability dat

Return Explanation

Form 990,	Ocean Conservancy's audited financial statements, governing documents and conflict of interest policy are available upon request.
Part VI,	
Section C,	
line 19	

Return Explanation

Form 990,	Consultants, contractors, temporary help, and other professional fees: Program service exp
Part IX, line	enses 4,527,701. Management and general expenses 158,027. Fundraising expenses 259,670. To
11g	tal expenses 4,945,398.

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990, Return of prior year grant funds 70,355. Part XI, line