

# Return of Organization Exempt From Income Tax

**2007**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**A For the 2007 calendar year, or tax year beginning** 10/01, 2007, and ending 09/30/2008

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> OCEAN CONSERVANCY	<b>D Employer identification number</b> 23-7245152
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1300 19TH STREET NW, 8TH FLOOR	<b>E Telephone number</b> (202) 429-5609
	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20036	<b>F Accounting method:</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G Website:** ▶ WWW.OCEANCONSERVANCY.ORG

**J Organization type** (check only one)  501(c)(3) (insert no.) 4947(a)(1) or 527

**K** Check here  if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates?  Yes  No

H(b) If "Yes," enter number of affiliates ▶ N/A

H(c) Are all affiliates included?  Yes  No  
(If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling?  Yes  No

I Group Exemption Number ▶ N/A

M Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 20,564,628.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions.)

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:			
	<b>a</b> Contributions to donor advised funds	1a		
	<b>b</b> Direct public support (not included on line 1a)	1b	18,160,696.	
	<b>c</b> Indirect public support (not included on line 1a)	1c		
	<b>d</b> Government contributions (grants) (not included on line 1a)	1d	306,838.	
	<b>e</b> Total (add lines 1a through 1d) (cash \$ <u>18,230,844.</u> noncash \$ <u>236,690.</u> )	1e		18,467,534.
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2		16,994.
	<b>3</b> Membership dues and assessments	3		
	<b>4</b> Interest on savings and temporary cash investments	4		18,244.
	<b>5</b> Dividends and interest from securities	5		609,680.
	<b>6 a</b> Gross rents	6a		
	<b>b</b> Less: rental expenses	6b		
<b>c</b> Net rental income or (loss). Subtract line 6b from line 6a	6c			
<b>7</b> Other investment income (describe ▶ )	7			
<b>8 a</b> Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	1,362,074.	8a		
	1,559,843.	8b		
	-197,769.	8c		
<b>d</b> Net gain or (loss). Combine line 8c, columns (A) and (B)	8d		-197,769.	
<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a	34,512.		
<b>b</b> Less: direct expenses other than fundraising expenses	9b	13,427.		
<b>c</b> Net income or (loss) from special events. Subtract line 9b from line 9a	9c		21,085.	
<b>10 a</b> Gross sales of inventory, less returns and allowances	10a			
	<b>b</b> Less: cost of goods sold	10b		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c		
<b>11</b> Other revenue (from Part VII, line 103)	11		55,590.	
<b>12</b> Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		18,991,358.	
Expenses	<b>13</b> Program services (from line 44, column (B))	13	11,624,249.	
	<b>14</b> Management and general (from line 44, column (C))	14	1,800,176.	
	<b>15</b> Fundraising (from line 44, column (D))	15	3,442,519.	
	<b>16</b> Payments to affiliates (attach schedule)	16		
	<b>17</b> Total expenses. Add lines 16 and 44, column (A)	17		16,866,944.
Net Assets	<b>18</b> Excess or (deficit) for the year. Subtract line 17 from line 12	18	2,124,414.	
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19	14,610,429.	
	<b>20</b> Other changes in net assets or fund balances (attach explanation) STMT .4. STMT. 5.	20		-2,678,853.
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		14,055,990.

# Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box  **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form). **Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

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

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

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

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of Exempt Organization <b>OCEAN CONSERVANCY</b>	Employer identification number <b>23-7245152</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1300 19TH STREET NW, 8TH FLOOR</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>WASHINGTON, DC 20036</b>	

### Check type of return to be filed (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ OCEAN CONSERVANCY

Telephone No. ▶ 202 429-5609 FAX No. ▶ 202 872-0619

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

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 05/15, 2009, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶  calendar year \_\_\_\_\_ or
- ▶  tax year beginning 10/01, 2007, and ending 09/30, 2008.

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	NONE
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	NONE
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	NONE

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b	Other grants and allocations (attach schedule) (cash \$ 709,007 noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	709,007.	709,007.	STMT 6	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	530,426.	274,032.	226,643.	29,751.
25b	Compensation of former officers, directors, key employees, etc. listed in Part V-B				
25c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26	Salaries and wages of employees not included on lines 25a, b, and c	5,042,503.	3,443,577.	405,934.	1,192,992.
27	Pension plan contributions not included on lines 25a, b, and c	153,843.	153,843.	NONE	NONE
28	Employee benefits not included on lines 25a - 27	578,895.	217,752.	110,961.	250,182.
29	Payroll taxes	396,767.	396,767.	NONE	NONE
30	Professional fundraising fees	142,106.	NONE	NONE	142,106.
31	Accounting fees	67,055.	NONE	67,055.	NONE
32	Legal fees	56,753.	18,825.	37,928.	NONE
33	Supplies	96,470.	81,476.	7,245.	7,749.
34	Telephone	310,217.	224,770.	38,582.	46,865.
35	Postage and shipping	1,546,617.	1,079,056.	19,553.	448,008.
36	Occupancy	884,265.	553,748.	149,922.	180,595.
37	Equipment rental and maintenance	120,526.	75,981.	20,199.	24,346.
38	Printing and publications	2,208,321.	1,548,682.	8.	659,631.
39	Travel	739,539.	660,987.	36,087.	42,465.
40	Conferences, conventions, and meetings	227,323.	223,925.	989.	2,409.
41	Interest	160,349.	132.	160,217.	NONE
42	Depreciation, depletion, etc. (attach schedule)	STMT 1 262,320.	163,751.	44,711.	53,858.
43	Other expenses not covered above (itemize):				
43a	a STMT 9	2,633,642.	1,797,938.	474,142.	361,562.
43b	b				
43c	c				
43d	d				
43e	e				
43f	f				
43g	g				
44	<b>Total functional expenses.</b> Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	16,866,944.	11,624,249.	1,800,176.	3,442,519.

**Joint Costs.** Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 4,032,975.; (ii) the amount allocated to Program services \$ 2,490,065.;  
 (iii) the amount allocated to Management and general \$ NONE; and (iv) the amount allocated to Fundraising \$ 1,542,910.

**Part III Statement of Program Service Accomplishments** (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ►SEE STATEMENT 10	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
<p><b>a</b> RESTORE SUSTAINABLE AMERICAN FISHERIES: TO REFORM FISHERY MANAGEMENT IN THE U.S. TO EMPLOY ECOSYSTEM-BASED MANAGEMENT AS THE FRAMEWORK FOR FISHERIES POLICY AND TO MAKE LONG-TERM SUSTAINABILITY THE PRIORITY FOR FISHING.</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	2,246,596.
<p><b>b</b> PROTECT MARINE WILDLIFE: THE GOAL OF THE OCEAN CONSERVANCY IS TO REDUCE AND ELIMINATE BYCATCH TO PREVENT THE EXTINCTION AND ENSURE THE RECOVERY OF MANY SPECIES OF MARINE ANIMALS.</p> <p>(Grants and allocations \$ 6,738. ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	2,164,605.
<p><b>c</b> CITIZEN OUTREACH, POLLUTION PREVENTION AND MONITORING: THROUGH THIS PROGRAM, THE OCEAN CONSERVANCY CONDUCTS OUTREACH AND POLLUTION PREVENTION AND MONITORING PROJECTS FOR CITIZENS.</p> <p>(Grants and allocations \$ 3,641. ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	2,437,445.
<p><b>d</b> REFORM GOVERNMENT FOR BETTER OCEAN STEWARDSHIP: THIS PROGRAM CODIFIES NATIONAL AND STATE POLICIES THAT EMPHASIZE CONSERVATION AND RESTORATION OF OCEAN ECOSYSTEMS, AS WELL AS GREATER PUBLIC PARTICIPATION IN MANAGING THESE PUBLIC TRUST RESOURCES.</p> <p>(Grants and allocations \$ 84,500. ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	1,277,605.
<p><b>e</b> Other program services (attach schedule) SEE STATEMENT 11 (Grants and allocations \$ 614,128. ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	3,497,998.
<p><b>f</b> Total of Program Service Expenses (should equal line 44, column (B), Program services) . . . . . ►</p>	11,624,249.

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45	Cash - non-interest-bearing	7,567.	45	7,690.
	46	Savings and temporary cash investments	895,327.	46	49,802.
	47a	Accounts receivable	20,994.		
	b	Less: allowance for doubtful accounts		47c	20,994.
	48a	Pledges receivable	6,177,123.		
	b	Less: allowance for doubtful accounts	225,201.	48c	5,951,922.
	49	Grants receivable	84,781.	49	157,146.
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51a	Other notes and loans receivable (attach schedule)			
	b	Less: allowance for doubtful accounts		51c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	142,950.	53	113,401.
	54a	Investments - publicly-traded securities	14,789,334.	54a	10,956,603.
	b	Investments - other securities (attach schedule)	1,154,684.	54b	1,944,913.
	55a	Investments - land, buildings, and equipment: basis	STMT 12		
	b	Less: accumulated depreciation (attach schedule)		55c	
	56	Investments - other (attach schedule)		56	
	57a	Land, buildings, and equipment: basis	1,706,350.		
b	Less: accumulated depreciation (attach schedule)	1,247,034.	57c	459,316.	
58	Other assets, including program-related investments (describe STMT 13)	696,091.	58	530,589.	
59	<b>Total assets</b> (must equal line 74). Add lines 45 through 58	18,990,416.	59	20,192,376.	
Liabilities	60	Accounts payable and accrued expenses	796,252.	60	1,312,641.
	61	Grants payable		61	
	62	Deferred revenue	NONE	62	117,196.
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a	Tax-exempt bond liabilities (attach schedule)		64a	
	b	Mortgages and other notes payable (attach schedule)	2,786,917.	64b	3,895,829.
	65	Other liabilities (describe STMT 15)	796,818.	65	810,720.
66	<b>Total liabilities.</b> Add lines 60 through 65	4,379,987.	66	6,136,386.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted	8,688,251.	67	3,756,467.
	68	Temporarily restricted	4,372,783.	68	8,750,128.
	69	Permanently restricted	1,549,395.	69	1,549,395.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	<b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	14,610,429.	73	14,055,990.
	74	<b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	18,990,416.	74	20,192,376.



Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

Table with 3 columns: Question, Yes, No. Rows include 75a (21), 75b, 75c, and 75d.

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans, (E) Expense account and other allowances.

Part VI Other Information (See the instructions.)

Table with 3 columns: Question, Yes, No. Rows include 76, 77, 78a, 78b, 79, 80a, 80b, 81a, and 81b.

