

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**2009**

**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 2009 calendar year, or tax year beginning** 10/01, 2009, and ending 06/30, 2010

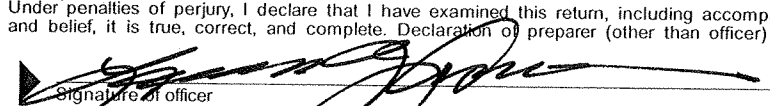
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>Please use IRS label or print or type. See Specific Instructions.</b>	<b>C Name of organization</b> OCEAN CONSERVANCY Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1300 19TH STREET NW, 8TH FLOOR City or town, state or country, and ZIP + 4 WASHINGTON, DC 20036	<b>D Employer identification number</b> 23-7245152
	<b>F Name and address of principal officer:</b> VERONIQUE SPRUILL SAME AS LINE C		<b>E Telephone number</b> (202) 429-5609
	<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>G Gross receipts \$</b> 12,592,564.
	<b>J Website:</b> ▶ WWW.OCEANCONSERVANCY.ORG		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c) Group exemption number</b> ▶ N/A
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L Year of formation:</b> 1972 <b>M State of legal domicile:</b> DC

**Part I Summary**

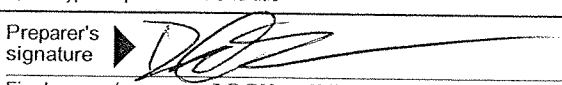
Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: OCEAN CONSERVANCY PROMOTES HEALTHY AND DIVERSE OCEAN ECOSYSTEMS AND OPPOSES PRACTICES THAT THREATEN OCEAN LIFE AND HUMAN LIFE.		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	14
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	13
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>	115
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	750
	<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0.	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	16,135,997.	11,219,447.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	40,000.	79,272.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-1,016,690.	178,810.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,358,961.	11,532,603.
	Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	945,650.
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		7,481,821.	4,954,610.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		154,123.	234,002.
<b>b</b> Total fundraising expenses, Part IX, column (D), line 25) ▶ 2,247,384.			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		7,383,597.	5,584,614.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		15,965,191.	10,948,284.
Net Assets or Fund Balances	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-606,230.	584,319.
	<b>20</b> Total assets (Part X, line 16)	Beginning of Year	End of Year
		20,454,045.	19,934,246.
		<b>21</b> Total liabilities (Part X, line 26)	5,156,419.
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20.	15,297,626.	15,828,705.	

**Part II 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.

**Sign Here**  | **4-13-11**  
 Signature of officer Date

**LAWRENCE J. ARMON, CFO**  
 Type or print name and title

Paid Preparer's Use Only	Preparer's signature 	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	4-8-2011		

ARGY, WILTSE & ROBINSON, P.C.  
 8405 GREENSBORO DRIVE, 7TH FLOOR MCLEAN, VA 22102  
 EIN ▶ Phone no. ▶ 703-893-0600

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.\*

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

OMB No. 1545-1709

▶ 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
  - 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>	Name of Exempt Organization <b>Ocean Conservancy, Inc.</b>	Employer identification number <b>23 7245152</b>
File by the due date for filing your return. See instructions.	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 ) 429-5606 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) \_\_\_\_\_ . 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 February 16, 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶  calendar year 20\_\_\_\_ or  
 ▶  tax year beginning October 1, 2009, and ending June 30, 2010

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

3a 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
3b 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
3c <b>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.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box  **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

<b>Part II</b> <b>Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed).		
Type or print  File by the extended 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>	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

• 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) \_\_\_\_\_ . 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 is for.

4 I request an additional 3-month extension of time until May 16th, 20 11.

5 For calendar year \_\_\_\_\_, or other tax year beginning October 1, 20 09, and ending June 30, 20 10.

6 If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return

Change in accounting period

7 State in detail why you need the extension We recently gathered all the information to prepare the 990. We expect it will take 3 weeks for our tax preparers to complete the return. Additionally since the new 990 includes a line asking if the Board received the 990 before filing, our Board would like an additional 3 weeks to facilitate their detailed review of the 990.

8a	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.	8a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Kenneth O'Connell Title  Director of Finance Date  1/21/11

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

ATTACHMENT 3

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 2,875,242. including grants of \$ ) (Revenue \$ )

SUSTAINABLE FISHERIES - OCEAN CONSERVANCY WORKS WITH OUR NATION'S EIGHT REGIONAL FISHERY MANAGEMENT COUNCILS AND HOLDS THEM ACCOUNTABLE FOR IMPROVING U.S. FISHING POLICIES TO ENSURE SUSTAINABLE FISHERIES. WE ARE SHAPING A SHARED VISION FOR RETAILERS, RESTAURANT CHAINS, OTHER SEAFOOD BUSINESSES, AND INDIVIDUAL SEAFOOD BUYERS IN SUPPORT OF GOOD FISHING PRACTICES AND MANAGEMENT POLICIES. OCEAN CONSERVANCY ALSO MOBILIZED TEAMS THROUGHOUT THE GULF OF MEXICO TO BE PART OF THE RESPONSE, RESTORATION AND RECOVERY EFFORT OF THE BP OIL DISASTER AND IS WORKING TO ADVOCATE FOR REFORMS TO ENSURE THAT THIS TRAGEDY IS NEVER REPEATED.

4b (Code: ) (Expenses \$ 1,200,758. including grants of \$ 521. ) (Revenue \$ )

CITIZEN OUTREACH - OCEAN CONSERVANCY LEADS THE WORLD'S LARGEST MARINE DEBRIS CLEANUP EFFORT. ANNUALLY MORE THAN HALF-A-MILLION PEOPLE IN 100 COUNTRIES REMOVE MILLIONS OF POUNDS OF TRASH FROM BEACHES AND WATERWAYS ALL OVER THE WORLD AND COLLECT DATA ON WHAT THEY FIND. THE DATA FROM THE INTERNATIONAL COASTAL CLEANUP HELPS PROVIDE A ROADMAP FOR ELIMINATING MARINE DEBRIS BY DEMONSTRATING THE SCOPE AND SCALE OF THE PROBLEM AND DOCUMENTING TRENDS. ARMED WITH THAT INFORMATION, WE CAN WORK TOGETHER TO REDUCE MARINE DEBRIS AT THE SOURCE, CHANGE BEHAVIORS THAT CAUSE IT, AND SUPPORT BETTER POLICIES TO PREVENT IT FROM CAUSING FURTHER HARM TO OUR VITAL OCEAN ECOSYSTEMS.

4c (Code: ) (Expenses \$ 1,622,950. including grants of \$ 174,537. ) (Revenue \$ )

OCEAN GOVERNANCE - OCEAN CONSERVANCY IS ACTIVELY LEADING A CAMPAIGN TO REFORM OCEAN GOVERNANCE, THE VERY FRAMEWORK THAT DICTATES HOW WE USE, PROTECT, AND RESTORE OCEAN ECOSYSTEMS. WE ARE ADVOCATING FOR NEW NATIONAL AND STATE POLICIES TO IMPROVE COORDINATION AND INTEGRATION OF STATE AND FEDERAL AGENCIES IN MANAGING OUR COASTAL AND OCEAN ECOSYSTEMS. WE ARE STREAMLINING THE WAY WE MANAGE OUR OCEAN ECOSYSTEMS AND RESOURCES AS A WHOLE AND EMBRACING A PROACTIVE PLAN FOR WHAT OUR OCEAN WILL LOOK LIKE IN THE FUTURE. WE ARE ESSENTIALLY TAKING THE PRINCIPLES OF SMART GROWTH THAT HAVE SERVED US SO WELL IN OUR CITIES INTO THE SEA.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 1,750,187. including grants of \$ ) (Revenue \$ 79,272. )

4e Total program service expenses 7,449,137.

Part IV Checklist of Required Schedules

Table with 3 main columns: Question, Yes, No. Rows 1-20 contain various questions about organizational requirements and reporting. Row 12A includes sub-columns for Yes and No. Row 12A Yes column contains 'X'.

**Part IV Checklist of Required Schedules (continued)**

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a-12b regarding Form 1096, W-2G, Form W-3, foreign accounts, prohibited transactions, and 501(c)(7) and (12) organizations.

