Form **990**

Department of the Treasury

Internal Revenue Service

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

2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning \overline{JUL} 1, $\overline{2017}$ and ending JUN 30, Check if C Name of organization D Employer identification number Address change Ocean Conservancy Name change Doing business as 23-7245152 Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 1300 19th Street, NW 8th F1 (202)429-5609 termin-ated City or town, state or province, country, and ZIP or foreign postal code 42,118,365. G Gross receipts \$ Amende return Washington, DC 20036 H(a) Is this a group return Applica-F Name and address of principal officer: Lawrence for subordinates? Yes X No pending same as C above H(b) Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ▶ WWW.oceanconservancy.org H(c) Group exemption number ▶ K Form of organization; X Corporation Trust L Year of formation: 1972 M State of legal domicile: VA Other > Part I Summary 1 Briefly describe the organization's mission or most significant activities: Ocean Conservancy is working to Activities & Governance protect the ocean from today's greatest global challenges. Together 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) 16 Number of independent voting members of the governing body (Part VI, line 1b) 15 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 121 Total number of volunteers (estimate if necessary) 789138 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 17,791. **Prior Year** Current Year Contributions and grants (Part VIII, line 1h) 24,058,239. 36,557,965. Program service revenue (Part VIII, line 2g) 0. 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 572,974. 553,815. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 98,607. 304,441. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 24,729,820. 37,416,221. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 926,758. 2,219,054. Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 10,959,846. 12,203,504. 16a Professional fundraising fees (Part IX, column (A), line 11e) 690,017. 467,502. b Total fundraising expenses (Part IX, column (D), line 25)

3,827,204. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 11,407,913. 23,984,534. 11,134,335. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 26,024,395. 19 Revenue less expenses. Subtract line 18 from line 12 745,286. 11,391,826. **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 36,119,574. 48,359,161. 21 Total liabilities (Part X, line 26) 2,594,983. 2,260,644. 22 Net assets or fund balances. Subtract line 21 from line 20 ... 33,524,591. 46,098,517. 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 Date J. Amon, CFO Lawrence Here Type or print name and title Print/Type preparer's name Pregarer's signature PTIN Nicole M. Prince, CPA Paid 2/14/19 P01315245 self-employed Preparer Rogers & Company Firm's name Firm's EIN 58-2676261 Use Only Firm's address 8300 Boone Boulevard, Suite 600 Vienna, VA 22182 Phone no. (703) 893-0300 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No LHA For Paperwork Reduction Act Notice, see the separate instructions.

Pa	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Ocean Conservancy is working to protect the ocean from today's
	greatest global challenges. Together with our partners, we create
	science-based solutions for a healthy ocean and the wildlife and
	communities that depend on it.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations 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	
	Communications & Outreach - Ocean Conservancy educates the public
	through various communication channels including websites, e-mail,
	direct mail, social media, paid advertising, public service
	announcements, reporter outreach, written reports, blogging and more.
	Ocean Conservancy has more than 130,000 members, International Coastal
	Cleanup volunteers numbering around 800,000 each year and a social
	media audience of more than 800,000. We also engage in various efforts
	to provide strategic advice, messaging and digital assets to the
	broader ocean community.
	2 400 012
4b	(Code:) (Expenses \$3, 428, 913. including grants of \$) (Revenue \$)
	Marine Debris Education & Prevention: For more than 30 years, Ocean
	Conservancy has been bringing together passionate ocean lovers who have the common goal of trash free seas. We mobilize the International
	Coastal Cleanup - the world's largest volunteer effort to clean up
	waterways and the ocean. We research and share key details about what
	is trashing our ocean with the public, scientific community and
	decision-makers. We are also bringing together leaders from industry,
	government and academia through the Trash Free Seas Alliance to lead to
	innovative solutions that stop trash and plastic at the source.
	Impractice solucions that stop clash and plastic at the source.
	·
4c	(Code:) (Expenses \$ 5,715,620 • including grants of \$ 670,839 •) (Revenue \$
-	Ocean Policy Science and Governance - Ocean Conservancy translates
	threats into sound practical policies that protect our ocean and
	improve our lives. We recognize that real leadership means real
	cooperation between governments, businesses, scientists, policymakers,
	conservation organizations and citizen advocates. We seek to achieve
	this by advocating for improvement in quality and quantity of ocean
	research and monitoring, reform of ocean governance and planning for
	various ocean uses like fishing, fish farming, and other types of
	resource development. Thanks to improved management practices and
	restoration of nursery habitat, many of our nation's fisheries are
	producing sustainable yields that fuel a strong economy, support
	well-paying jobs, provide for ample recreational opportunities and
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 6,810,466 • including grants of \$ 1,512,715 •) (Revenue \$)
4e	Total program service expenses ► 20,021,458.
	Form 990 (2017)

Form 990 (2017) Ocean Conservancy Part IV 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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ū	public office? If "Yes," complete Schedule C, Part I	3		х
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	Х	
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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		Х
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	Х	
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
Ť	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		Х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			7.7
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	, , , , ,	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		Х	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Λ	
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	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13	- 21	
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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	17	Х	
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		Х
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		Х

Form 990 (2017) Ocean Conservancy Part IV Checklist of Required Schedules (continued)

20a Dt the organization operate one or more hospital facilities? If "Yes," complete Schedule II 20b I 1" vest 10 re 20a, did the organization attach a copy of its audited financial statements to this return? 20b I 20b I 10b the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, Columin (A), line 17 II "The "Schedule E Parts I and II 21 I X 2 I				Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic opserment on Part IX, column (A), line 11 If	20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
domestic government on Part IX, column (A), line 17 if If Yes,* complete Schedule I, Part Is and II 20 Did the organization report mere than 55,000 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 20 Did the organization answer Yes* to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former offices, directors, trustees, key employees, and highest compensated employees? If Yes,* complete Schedule Is and the last day of the year, that was issued after December 31, 2002? If Yes,* answer lines 24b through 24d and complete Schedule Is 6. 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 Ir Yes, that was susued after December 31, 2002? If Yes,* answer lines 24b through 24d and complete Schedule Ir Yes, that was susued after December 31, 2002? If Yes,* answer lines 24b through 24d and complete Schedule Ir Yes, that was susued after December 31, 2002? If Yes,* answer lines 24b through 24d and complete Schedule Ir Yes, that was susued after December 31, 2002? If Yes,* answer lines 24b through 24d and complete Schedule Ir Yes, that was any tax-exempt bonds? 24d Did the organization was an an in behalf of Yes, the organization and the transaction his and significant sections on the susual report and that the transaction with a disqualified person during the year? If Yes,* complete Schedule Ir, Part II Yes,* complete Schedule Ir, Part II Yes,* complete Schedule Ir Yes,* complete Schedule	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
22 Little 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 2 Little, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 2 Little, column (A) and former officers, directors, furstees, key employees, and highest compensated employees? If "Yes," complete Schedule Is Schedule Is and complete Schedule Is and so of the last day of the year, that was issued after December 31, 2002? If "Yes," answer inces 24b through 24d and complete Schedule K. If "No", go to line 25a Little Is also III 2 Little I	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 22 IX 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. Part II is at a case of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II. "Mo", go to line 25a 24b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 25c Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 26c Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 27c Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-exempt bonds? 28c Section 501(6)8, 501(6)4), and 501(6)209 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 28c Section 501(6)8, 501(6)4), and 501(6)209 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 28c III bis the organization eaver that it engaged in an excess benefit transaction with a disqualified person has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule I., Part II 28c Did the organization report any amount on Part X. line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, or disqualified persons? If "Yes," complete Schedule I., Part IV 28c Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, agrant selection committee embers, or to a Spicaulity or family member of a current or former officer, director, trustee, or key employee for a		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25s. 24b Did the organization maintain an escrow account other than a refunding secrow at any time during the year to delease any tax exempt bonds? 25c Did the organization maintain an escrow account other than a refunding secrow at any time during the year? 25d Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? 25d Is the organization aware that it engaged in an excess benefit transaction with a disqualified person of the year If "Yes," complete Schedule L, Part II 25d Did the organization propriat any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, low employees, or disqualified persons? If "Yes," complete Schedule L, Part IV 27d Did the organization propriate a grant or other assistance to an officer, director, trustee, key employee, or disqualified persons? If "Yes," complete Schedule L, Part IV 27d Is a family member of a current or former officer, director, trustee, or key employee? 27d A carentty of which a current or former officer, director, trustee, or key employee? 28d A family member of a current or former officer, director, trustee	22	D. LIV. J. (A) II. CO. K. IV. Co. II. Co. Colored to I. De to Local III.	00		v
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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 246 through 244 and complete Schedule L, I" Not," go to line 25a 24b 24b 24b 24c 24b 25a 24c 24b 25a 24c 24c 24b 25a	00		22		
Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K, If "No", go to line 25a 24b	23				
24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Pas," answer lines 24b through 24d and complete Schedule K. If "No", or for line 25a 24b through 24d and complete Schedule K. If "No", or for line 25a 24b through 24d and complete Schedule K. Part II 24b		Orbital to I	23	Х	
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 b) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds? c) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds? d) Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? d) Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? d) Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? d) Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? d) Did 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 protein on a prior year, and that the transaction has not been reported on any of the organization protein on any of the organization provide a grant or their assistance to an officer, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule L, Part II 27 Did 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? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 27 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? or a family member thereof) was an officer, director, tr	24a				
Schedule K. If "No", go to line 25a 24b					
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? 24d 225 Section 501(6)3, 501(6)4, and 501(6)(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 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 aware that It engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction were 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 prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part IV 26b X 27 Did the organization persons? If "Yes," complete Schedule L, Part IV 32b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 28 Was the organization and start transaction with one of the following parties (see Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29b X 30 Did the organization receive more officer, director, trustee, or key employee? If "Yes," complete Schedule M. 29b X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M. 29b X 32 Did the organizat			24a		Х
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? 240 d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 241 252 253 254 b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 255 b Is the organization aver that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 255 b Is the organization aver 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-E77 If "Yes," complete Schedule L, Part II 255 276 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part III 277 287 288 287 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 287 288 289 290 291 292 293 294 295 Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV 295 296 297 Did the organization receive more than \$25,000 in on-cash contributions? If "Yes," complete Schedule L, Part IV 298 Did the organization receive more than \$25,000 in on-cash contributions? If "Yes," complete Schedule M. 299 290 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule M. 290 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Y	b				
any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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-E2? If "Yes," complete Schedule L, Part I 25b X 25D Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officiers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 27 X 26					
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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	d		24d		
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-E2? If "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 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? If "Yes," complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization includidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31					
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Form 990 (2017) Ocean Conservancy Part V Statements Regarding Other IRS Filings and Tax Compliance

Enter the number reported in Box 3 of Form 1086. Enter 0- if not applicable 1a 99		Check if Schedule O contains a response or note to any line in this Part V									
b Enter the number of Forms W20 included in line 1a. Enter 0-if not applicable 10				1 00		Yes	No				
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (graphing) within packup withholding rules for reportable payments to vendors and reportable gaming (graphing) within graphing) within graphing within grap											
gamblingly winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendary year ending with or within the year covered by this return Note. If the sum of lines 1 and 2 als greater than 250, you may be required to effected employment tax returns? Note. If the sum of lines 1 and 2 als greater than 250, you may be required to effected employment tax returns? Note. If the sum of lines 1 and 2 als greater than 250, you may be required to effected employment tax returns? Note. If the sum of lines 1 and 2 als greater than 250, you may be required to effected employment tax returns? Note. If the sum of lines 1 and 22 als greater than 250, you may be required to effected employment tax returns? Note. If the sum of lines 1 and 22 als greater than 250, you may be required to effected employment tax returns? Note. If the sum of lines 1 and 22 als greater than 250, you may be required to effect and the sum of the											
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to file 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? 76	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X					
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? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X 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 organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	uired							
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 X 72 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 73 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 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 organizations maintaining donor advised funds. a Did the 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 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 10a 10b 11a 5 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10417 15 If "Yes," enter the amount of tax-exempt interest received or accrued during the year 15 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 14a		to file Form 8282?			7с		X				
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71	d	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
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? 8 Sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organization make any taxable distributions under section 4966? a Did the 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 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 1 Ind 1 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 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 13c	е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contra	ct?	7e						
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b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 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 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year?		* ** * -	11a								
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a			?	12a						
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 13b 13b 14a X			1								
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14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X											
The picture of the payment of the pa			13c								
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b							X				
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b	000					

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year										
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
b	b Enter the number of voting members included in line 1a, above, who are independent 1b 15										
2											
	officer, director, trustee, or key employee?	2		Х							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х							
5											
6	Did the organization have members or stockholders?	6		Х							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a		Х							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		Х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	Х								
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	12c	Х								
13	Did the organization have a written whistleblower policy?	13	X								
14	Did the organization have a written document retention and destruction policy?	14	X								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	X								
b	Other officers or key employees of the organization	15b	Х								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►AL , AK , AZ , AR , CA , CT , DC , FL , GA	,HI	,IL	,KS							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availat	ole								
	for public inspection. Indicate how you made these available. Check all that apply.										
	X Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial								
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and records:										
	Kenneth Donaldson - (202) 429-5609										
_	1300 19th St., NW, 8th Fl., Washington, DC 20036										

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Leave this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A) Name and Title	(B) Average hours per	box	not c , unle	ss pe	ition more rson	than	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Thomas Allen	2.00							_	_	_
Co-Chair		Х		Х				0.	0.	0.
(2) Daniel Oros	2.00								_	
Co-Chair		Х		Х				0.	0.	0.
(3) Edward Miller	2.00							_	_	_
Treasurer		Х		Х				0.	0.	0.
(4) Michael Orbach	2.00									
Secretary		Х		Х				0.	0.	0.
(5) Elizabeth Bagley	2.00									
Director		Х						0.	0.	0.
(6) Steve Henn	2.00									
Director		Х						0.	0.	0.
(7) Kathleen Justice-Moore	2.00									
Director		Х						0.	0.	0.
(8) Jeremy Milo	2.00									
Director		Х						0.	0.	0.
(9) Stephen Palumbi	2.00									
Director		Х						0.	0.	0.
(10) John Sargent	2.00									
Director		Х						0.	0.	0.
(11) Oswald Schmitz	2.00									
Director		Х						0.	0.	0.
(12) Steven Strongin	2.00									
Director		Х						0.	0.	0.
(13) Rashid Sumaila	2.00									
Director		Х						0.	0.	0.
(14) Lawrence Wagenberg	2.00									
Director		Х						0.	0.	0.
(15) Suzanne Woolsey	2.00									
Director		Х						0.	0.	0.
(16) Janis Jones	45.00									
President & CEO		Х		Х	L	L	L	356,227.	0.	53,022.
(17) Andreas Merkl	45.00									
President				Х				381,357.	0.	43,823.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (A) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC) from the related Institutional trustee (W-2/1099-MISC) organization organizations (ey employee and related below organizations Officer line) 24.00 (18) Lawrence Amon X 135,171. 0. 8,110. CFO (19) Emily Woglom 45.00 X 225,284. 0. 25,024. EVP 40.00 (20) Sarah Humphries X 0. 201,960. 36,791. VP, Resource Development (21) Chris Dorsett 40.00 X 0. 46,950. VP, Conservation Policy 192,034. (22) Susan Ruffo 40.00 0. X 177,691. Director, International Initiatives 0. 40.00(23) Julia Roberson 21,273. X 0. VP, Communications 163,429. (24) Scott Highleyman 40.00 162,746. X 0. 35,055. VP. Conservation Policy 40.00 (25) Kenneth Donaldson Х 160,747. 0. 21,213. VP Finance & Admin 40.00 (26) Marie Michelson VP, Digital Communications Х 156,832. 0. 20,927. 2,313,478. 0. 312,188. 1b Sub-total 763,747. 193,197. 0. c Total from continuation sheets to Part VII, Section A 505,385. 3,077,225. d Total (add lines 1b and 1c).

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

			103	140
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Chapman Cubine & Hussey	Direct mail	
2000 15th St N #550, Arlington, VA 22201	consultant	283,000.
Ocean Wonks		
175 Carroll Ave., Newport, RI 02840	Policy counsel	216,000.
Lincoln Policy Group, 1110 Vermont Ave, NW		
#1000, Washington, DC 20005	Lobbying	180,000.
Revolution Messaging, 1730 Rhode Island		
Ave, NW #310, Washington, DC 20036	Digital fundraising	174,069.
Alaska Strategies		
6595 Plantation Lane, Garden City, ID 83763	Policy counsel	138,000.
2 Total number of independent contractors (including but not limited to those liste		
\$100,000 of compensation from the organization		

See Part VII, Section A Continuation sheets

Form **990** (2017)

(27) Joi Danielson Sentor Fellow, Program innovation (28) Kelly Luck (29) George Leonard (31) Michelle Frey Director, Digital Communications (31) Michelle Frey Director, Digital Communications (31) Michelle Frey Director, Digital Communications (32) Agency Leonard (31) Michelle Frey Director, Digital Communications (32) Manuel Communications (33) Teresa Parsons Director, Digital Communications (34) Michelle Frey Director, Digital Communications (35) Teresa Parsons Director, Digital Communications (36) Teresa Parsons Director, Digital Communications (37) Teresa Parsons Director, Digital Communications (38) Teresa Parsons Director, Digital Communications (39) Teresa Parsons Director, Digital Communications (30) Teresa Parsons Director, Digital Communications (31) Teresa Parsons Director, Digital Communications (32) Michelle Frey Director, Program Development (31) Michelle Frey Director, Digital Communications (31) Michelle Frey Director, Program Development (31) Michelle Frey Director, Digital Communications (32) Michelle Frey Director, Program Development (33) Teresa Parsons Director, Digital Communications (34) Michelle Frey Director, Digital Communications (35) Teresa Parsons Director, Digital Communications (36) Teresa Parsons Director, Digital Communications (37) Teresa Parsons Director, Digital Communications (38) Teresa Parsons Director, Digital Communications (39) Teresa Parsons Director, Digital Communications (30) Teresa Parsons Director, Digital Communications (31) Michelle Frey Director, Program Development (32) Michelle Frey Director, Program Development (33) Teresa Parsons Director, Digital Communications (34) Michelle Frey Director, Program Development (35) Michelle Frey Director, Program Development (36) Michelle Frey Director, Program Development (37) Michelle Frey Director, Program Development (38) Michelle Frey Director, Program Development (39) Michelle Frey Director, Program Development (31) Michelle Frey Director, Program Development (31) Michelle Frey Director, Program Development (32) Mich	Form 990 Ucean Co	nservan	<u>су</u>							23-124	515Z
Name and title	Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	oyee	es, a	nd I	High	est	Compensated Employ	ees (continued)	
Name and title										(F)	
Nous Park							1				
Week Figure Fig		hours	(c					ly)	compensation	•	amount of
(ist any burner or related organization below line) 1		per						Ė	from	from related	other
196,558. 0. 20,621		week					yee		the	organizations	compensation
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196,558. 0. 20,621			or dir	ao			ated 6		(W-2/1099-MISC)		
196,558. 0. 20,621			stee	ruste			pens				
196,558. 0. 20,621		1 -	al tru	onal t		ploye	com				organizations
196,558. 0. 20,621			Jivid	tituti	icer	yem	jhest	mer			
X		,	Ĕ	Ĕ	₽	₹ e	Ξ̈́	요			
(28) Kelly Luck (29) George Leonard (29) George Leonard (30) Teresa Parsons Director, Program Development (31) Michelle Frey Director, Digital Communications (28) Kelly Luck (40.00) X 146,385. 0. 42,873 40.00 X 143,528. 0. 43,746 40.00 X 140,493. 0. 43,624 40.00 X 136,783. 0. 42,333		40.00	4				3,7		106 550	0	20 621
X 146,385. 0. 42,873	·	40.00				<u> </u>	X		196,558.	0.	20,621.
(29) George Leonard Chief Scientiat (30) Teresa Persons Director, Program Development (31) Michelle Frey Director, Digital Communications (29) George Leonard (30) Teresa Persons Director, Program Development (31) Michelle Frey Director, Digital Communications (32) Teresa Persons (33) Michelle Frey Director, Digital Communications (34) Michelle Frey Director, Digital Communications (35) Teresa Persons (36) Teresa Persons (37) Teresa Persons (38) Teresa Persons (39) Teresa Persons (31) Michelle Frey (31) Michelle Frey (32) Teresa Persons (33) Teresa Persons (34) Teresa Persons (34) Teresa Persons (35) Teresa Persons (36) Teresa Persons (37) Teresa Persons (38) Teresa Persons (39) Teresa Persons (31) Michelle Frey (31) Teresa Persons (32) Teresa Persons (33) Teresa Persons (34) Teresa Persons (35) Teresa Persons (36) Teresa Persons (37) Teresa Persons (38) Teresa Persons (38) Teresa Persons (39) Teresa Persons (31) Teresa Persons (31) Teresa Persons (31) Teresa Persons (31) Teresa Persons (32) Teresa Persons (33) Teresa Persons (34) Teresa Persons (35) Teresa Persons (36) Teresa Persons (37) Teresa Persons (38) Teresa Persons (38) Teresa Persons (39) Teresa Persons (39) Teresa Persons (31) Teresa Persons (31) Teresa Persons (31) Teresa Persons (31) Teresa Persons (32) Teresa Persons (33) Teresa Persons (34) Teresa Persons (35) Teresa Persons (36) Teresa Persons (37) Teresa Persons (38) Teresa Persons (38) Teresa Persons (39) Teresa Persons (39) Teresa Persons (39) Teresa Persons (30) Teresa Persons (31) Teresa Persons (31) Teresa Persons (32) Teresa Persons (33) Teresa Persons (34) Teresa Persons (35) Teresa Persons (36) Teresa Persons (37) Teresa Persons (38) Teresa Persons (38) Teresa Persons (39)		40.00	-				₩.		146 205	0	12 072
Chief Scientist (30) Teresa Parsons Director, Program Development (31) Michelle Frey Director, Digital Communications (32) Teresa Parsons (33) Teresa Parsons (34) Michelle Frey Director, Digital Communications (34) Michelle Frey (35) Michelle Frey (36) Michelle Frey (37) Michelle Frey (38) Michelle Frey (39) Michelle Frey (30) Michelle Frey (31) Michelle Frey (31) Michelle Frey (32) Michelle Frey (33) Michelle Frey (34) Michelle Frey (35) Michelle Frey (36) Michelle Frey (37) Michelle Frey (38) Michelle Frey (39) Michelle Frey (30) Michelle Frey (31) Michelle Frey (31) Michelle Frey (31) Michelle Frey (32) Michelle Frey (33) Michelle Frey (34) Michelle Frey (35) Michelle Frey (36) Michelle Frey (37) Michelle Frey (38) Michelle Frey (39) Mic		40 00		-		<u> </u>	^		140,303.	0.	44,0/3
30) Teresa Parsons 40.00		40.00	1				v		1/13 528	n	13 716
Director, Program Development (31) Michelle Frey (40.00)		40 00					^		143,320.	0.	43,740.
(31) Michelle Prey Director, Digital Communications X 136,783. 0. 42,333		40.00	1				x		140 493	0	43 624
Director, Digital Communications X 136,783. 0. 42,333	· · · · · · · · · · · · · · · · · · ·	40.00							110,133.	<u></u>	13,021
			1				x		136,783.	0.	42,333,
Total to Part VII, Section A, line 1c 763,747. 193,197											,
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Total to Part VII, Section A, line 1c 763,747. 193,197											
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Total to Part VII, Section A, line 1c											
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Total to Part VII, Section A, line 1c			<u> </u>	_	_	<u> </u>	_				
Total to Part VII, Section A, line 1c			4		1	1					
Total to Part VII, Section A, line 1c			-	-	\vdash	\vdash					
Total to Part VII, Section A, line 1c			1		1	1					
Total to Part VII, Section A, line 1c				\vdash	\vdash	\vdash	\vdash				
Total to Part VII, Section A, line 1c 763,747. 193,197			1								
Total to Part VII, Section A, line 1c		1		-							
	Total to Part VII, Section A, line 1c	·····							763,747.		193,197.

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII ... (B) (C) (**D)** Revenue excluded Related or Unrelated Total revenue from tax under exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 157,787 1 a Federated campaigns **b** Membership dues 1b c Fundraising events d Related organizations 1d 245,022. e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1f 36,155,156. 119,382. g Noncash contributions included in lines 1a-1f: \$ 36,557,965 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 520,062. 520,062. other similar amounts) Income from investment of tax-exempt bond proceeds 304,441. 304,441. 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) ... 7 a Gross amount from sales of (i) Securities (ii) Other 4,735,897. assets other than inventory b Less: cost or other basis 4,702,144. and sales expenses 33,753. c Gain or (loss) 33,753. 33,753. d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a Other b Less: direct expenses _____ b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses **b** c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold _____ b c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a b **d** All other revenue e Total. Add lines 11a-11d 37,416,221. Total revenue. See instructions. 0. 858,256.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). X Check if Schedule O contains a response or note to any line in this Part IX (**D**)
Fundraising (B) (C) (A)
Total expenses Do not include amounts reported on lines 6b. Management and general expenses Program service expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 519,278. 519,278. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign 1,699,776. 1,699,776. individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 2,497,021. 1,898,583. 275,727. 322,711. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7,351,037. 5,590,829. 810,998. 949,210. 7 Other salaries and wages Pension plan accruals and contributions (include 35,423. 318,814 241,937. 41,454. section 401(k) and 403(b) employer contributions) 1,012,240. 1,333,887. 148,208. 173,439. 9 Other employee benefits 78,082. 533,288. 702,745. 91,375. 10 Payroll taxes Fees for services (non-employees): 11 a Management 52,646. 35,064. 7,171. 10,411. Legal 83,277. 83,277. Accounting Lobbying 467,502. 467,502. Professional fundraising services. See Part IV, line 17 67,475. 67,475. Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 3,171,135. 3,518,741. 174,138. 173,468. column (A) amount, list line 11g expenses on Sch O.) 80,311. 447,283. 365,701. 1,271. Advertising and promotion 12 186,470. 3,553,983. 1,972,008. 1,395,505. 13 Office expenses 14,132. 7,518. 5,338. 1,276. Information technology 14 15 Royalties 1,160,874. 875,326. 163,278. 122,270. 16 Occupancy 1,140,413. 1,042,131. 33,964. 64,318. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 400,280. 347,547. 23,565. 29,168. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 139,788. 31,147. 15,768. 92,873. Depreciation, depletion, and amortization 22 57,690. 80,357. 12,904. 9,763. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 244,531. 162,113. 31,426. 50,992. Subscriptions List rental 148,234. 81,232. 1,038. 65,964. Donated goods 33,142. 32,106. 75. 961. 252,348. -252,348. d Prof. fund alloc 30,735. 49,179. 4,758. 13,686. e All other expenses 26,024,395. 20,021,458. 2,175,733. 3,827,204. Total functional expenses. Add lines 1 through 24e 25 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 X if following SOP 98-2 (ASC 958-720) 4,343,720. 2,380,359. 30,405. 1,932,956.

Form 990 (2017)
Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
			·		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			5,687,997.	1	4,513,828.
	2	Savings and temporary cash investments	200,160.	2	200,155.		
	3	Pledges and grants receivable, net		5,562,774.	3	15,976,538.	
	4	Accounts receivable, net	53,404.	4	32,979.		
	5	Loans and other receivables from current and for	,		,		
		trustees, key employees, and highest compensa					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	-	· ·			
		employers and sponsoring organizations of sect					
G		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9				654,383.	9	544,635.
		Land, buildings, and equipment: cost or other	I		001,000		011,000
	104	basis. Complete Part VI of Schedule D	102	1.629.351.			
	h	Less: accumulated depreciation	10b	1,315,384.	371,061.	10c	313,967.
	11	Investments - publicly traded securities	100		22,133,944.	11	25,339,469.
	12	Investments - other securities. See Part IV, line 1			,,-	12	.,,
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	1,455,851.	15	1,437,590.		
	16	Total assets. Add lines 1 through 15 (must equations)	36,119,574.	16	48,359,161.		
	17	Accounts payable and accrued expenses	1,203,882.	17	1,558,712.		
	18	Grants payable			149,927.	18	30,013.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
S	22	Loans and other payables to current and former	officer	s, directors, trustees,			
≝		key employees, highest compensated employee	s, and	disqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	d third p	oarties		24	
	25	Other liabilities (including federal income tax, page 1)	yables [.]	to related third			
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
		Schedule D			1,241,174.	25	671,919.
	26	Total liabilities. Add lines 17 through 25			2,594,983.	26	2,260,644.
		Organizations that follow SFAS 117 (ASC 958), chec	k here ▶			
es		complete lines 27 through 29, and lines 33 an			10 502 256		01 000 551
anc	27	Unrestricted net assets			18,723,356.	27	21,229,751.
Bal	28	Temporarily restricted net assets			13,209,065.	28	22,030,231.
Fund Balances	29				1,592,170.	29	2,838,535.
교		Organizations that do not follow SFAS 117 (A	SC 958	3), check here			
S Q		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or eq				31	
Net Assets or	32	Retained earnings, endowment, accumulated in		F	33,524,591.	32	46,098,517.
_	33	Total net assets or fund balances				33	
	34	Total liabilities and net assets/fund balances			36,119,574.	34	48,359,161.

	1990 (2017) Geedif Combet valley		, 4451	, 2	Γaί	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	37,4			
2	Total expenses (must equal Part IX, column (A), line 25)	2	26,0			
3	Revenue less expenses. Subtract line 2 from line 1	3	11,3	91	. , 8	26.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	33,5	24	, 5	91.
5	Net unrealized gains (losses) on investments	5	1,1	.82	,1	00.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	46,0	98	, 5	17.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				`	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2	b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2	:c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	it			
	Act and OMB Circular A-133?		[з	а		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	it			
	ar guidte, explain why in Schoolule O and departhe any stone taken to undergo queb audite		ء ا	_		l

Form **990** (2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization Ocean Conservancy 23-7245152 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% 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 33 1/3% 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 organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support													
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total						
1	Gifts, grants, contributions, and												
	membership fees received. (Do not												
	include any "unusual grants.")	18,145,072.	30,924,938.	18,615,990.	24,058,239.	36,557,965.	128,302,204.						
2	Tax revenues levied for the organ-												
	ization'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												
	Total. Add lines 1 through 3	18,145,072.	30,924,938.	18,615,990.	24,058,239.	36,557,965.	128,302,204.						
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,						20 406 560						
•	column (f)						38,486,768.						
	Public support. Subtract line 5 from line 4.						89,815,436.						
	Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total												
		(a) 2013 18,145,072.	(b) 2014 30,924,938.	(c) 2015 18,615,990.	(d) 2016 24,058,239.	(e) 2017 36,557,965.	(f) Total 128,302,204.						
	Amounts from line 4 Gross income from interest,	10,143,072.	30,324,330.	10,013,330.	24,030,233.	30,337,303.	120,302,204.						
0	dividends, payments received on												
	securities loans, rents, royalties,												
	and income from similar sources	821.521.	647.823.	559.032.	588,022.	824,503.	3,440,901.						
9	Net income from unrelated business	011,011	0 = 7 , 0 = 0 0			011,000	-,,						
•	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.)	2.					2.						
11	Total support. Add lines 7 through 10						131,743,107.						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	22,579.						
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)							
	organization, check this box and stor	here					>						
	ction C. Computation of Publ												
14	Public support percentage for 2017 (14	68.17 %						
15	Public support percentage from 2016					15	67.71 %						
16a	33 1/3% support test - 2017. If the o												
	stop here. The organization qualifies												
b	33 1/3% support test - 2016. If the c												
	and stop here. The organization qual												
17a	10% -facts-and-circumstances tes												
	and if the organization meets the "fac				· · · · · · · · · · · · · · · · · · ·	-							
	meets the "facts-and-circumstances"												
b	10% -facts-and-circumstances tes	-											
	more, and if the organization meets the												
18	organization meets the "facts-and-circ						. \square						

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
7	ization's benefit and either paid to						
	or expended on its behalf						
_	The value of services or facilities						
3							
	furnished by a governmental unit to						
_	the organization without charge						
	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
r	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1				
	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	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 (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	zation,
					-		
Se	ction C. Computation of Publ	ic Support Pe	rcentage				Í
	Public support percentage for 2017 (column (f))		15	%
	Public support percentage from 2016					16	%
	ction D. Computation of Inve					•	
	Investment income percentage for 20			ne 13. column (f))		17	%
18	Investment income percentage from					18	%
	33 1/3% support tests - 2017. If the						
.56	more than 33 1/3%, check this box a						▶
ŀ	33 1/3% support tests - 2016. If the						 and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
20	i invale roundation. Il the organization	an alla not bliech a	DOA OH III E 14, 19	a, or roo, ori c ck li	ווט טטא מווע שכל וווג	JUNIOUS	

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of 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 Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c 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.
- **4a** 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.
- **b** 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 supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its 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.
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c 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.
- 10a 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," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
_		
За		
3b		
3с		
4a		
4b		
46		
4c		
5a		
5b		
5c		
6		
_		
7		
8		
9a		
Oh		
9b		
9с		
10a		
10b		
m 990 or 99	90-E <i>7</i>	2017

Pa	rt IV Supporting Organizations (continued)			<u> </u>
	(continuos)		Yes	No
11	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		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion 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 Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion 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 Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion 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 Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion 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 yea(see instruction	s).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	nstruction		·
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
L	that these activities constituted substantially all of its activities.	2a		
D	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	Oh		
2	activities but for the organization's involvement. Parent of Supported Organizations, Answer (a) and (b) below.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
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		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
J	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	1. J			

Pai	[↑] Type III Non-Functionally Integrated 509(a)(3) Supportin	ig Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	g trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	omplete Se	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount 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		
Sect	ion 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	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functiona	lly integrate	ed Type III supporting org	anization (see
	instructions).			·

Schedule A (Form 990 or 990-EZ) 2017

Par	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	is	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2013			
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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 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.)), V,
Schedule A, Part II, Line 10, Explanation for Other Income:	
Miscellaneous	
2013 Amount: \$ 2.	
	-

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

Employer identification number

Ocean Conservancy 23-7245152

Organizatio	on type (check one	s).
Filers of:	:	Section:
Form 990 or	r 990-EZ [$\overline{\mathbf{X}}$ 501(c)(3) (enter number) organization
	[4947(a)(1) nonexempt charitable trust not treated as a private foundation
	[527 political organization
Form 990-Pl	F [501(c)(3) exempt private foundation
]	4947(a)(1) nonexempt charitable trust treated as a private foundation
]	501(c)(3) taxable private foundation
-	-	covered by the General Rule or a Special Rule . In, (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Ru	le	
	-	iling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or ne contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rul	les	
sed any	ctions 509(a)(1) an y one contributor,	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; ne 1. Complete Parts I and II.
yea	ar, total contribution	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ons of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for lelty to children or animals. Complete Parts I, II, and III.
yea is d pui	ar, contributions e checked, enter he rpose. Don't comp	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the <i>xclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box re the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., olete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> etc., contributions totaling \$5,000 or more during the year \rightarrow \$
but it must	answer "No" on P	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), art IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to e filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Coean Conservancy

Employer identification number

23-7245152

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$1,677,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,750,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$1,542,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>10,954,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number

Ocean Conservancy

23-7245152

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
723453 11-01	-17	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)

Employer identification number

Name of organization

23-7245152 Ocean Conservancy Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

➤ Complete if the organization is described below.
➤ Attach to Form 990 or Form 990-EZ.

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

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

	(see separate instructions), then				
	Section 501(c)(4), (5), or (6) organizate of organization	tions: Complete Part III.		E	nployer identification number
INAII	· ·	on dorwan die		[-'	23-7245152
Da	ocean c	onservancy janization is exempt und	er section 501/c)	or is a section 527	
	at 1 A complete it the org	junization is exempt and	<u> </u>	01 13 4 30011011 021	organization.
4	Drovide a description of the organi-	ration's divest and indivest politic	al aamaaiga aativitiaa	in Dort IV	
	Provide a description of the organiz	•	. •		Φ Φ
	Political campaign activity expendit				
3	Volunteer hours for political campai	gn activities			
Pa	rt I-B Complete if the org	ganization is exempt und	er section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization und	ler section 4955	<u> </u>	\$
	Enter the amount of any excise tax				
	If the organization incurred a section				
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	irt I-C Complete if the org	janization is exempt und	er section 501(c)	, except section 50	01(c)(3).
1	Enter the amount directly expended	d by the filing organization for sec	ction 527 exempt fund	tion activities	\$
2	Enter the amount of the filing organ	ization's funds contributed to otl	ner organizations for s	ection 527	
	exempt function activities				\$
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here a	nd on Form 1120-POL	-,	
	line 17b				\$
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and en	nployer identification number (Ell	N) of all section 527 po	olitical organizations to w	hich the filing organization
	made payments. For each organiza		0 0		·
	contributions received that were pr				arate segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	ide information in Part	: IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	1 ' '
				filing organization's funds. If none, enter-	
				lulius. Il lione, enter	delivered to a separate
					political organization.
					If none, enter -0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017	Ocean Conse	ervancy		23-7	245152 Page 2
Part II-A Complete if the org	ganization is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (el	ection under
section 501(h)).					
A Check ► if the filing organiza	ation belongs to an aff	iliated group (and list ir	n Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and sha	re of excess lobbying	expenditures).			
B Check ▶ ☐ if the filing organiza	ation checked box A a	nd "limited control" pro	ovisions apply.		
	its on Lobbying Expe ditures" means amo	enditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion	(grass roots lobbying)		85,714.	
b Total lobbying expenditures to infl	·			726,871.	
c Total lobbying expenditures (add I	•	, , , , , , , , , , , , , , , , , , , ,		812,585.	
d Other exempt purpose expenditur				24,676,833.	
e Total exempt purpose expenditure				25,489,418.	
f Lobbying nontaxable amount. Ent	•			1,000,000.	
If the amount on line 1e, column (a)		bying nontaxable am	1		
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,0	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17		00 plus 5% of the exce			
Over \$17,000,000	\$1,000	,000.			
			-		
g Grassroots nontaxable amount (er	nter 25% of line 1f)			250,000.	
h Subtract line 1g from line 1a. If zer	ro or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero	o or less, enter -0			0.	
j If there is an amount other than ze	ero on either line 1h or	line 1i, did the organiz	ation file Form 4720	_	
reporting section 4911 tax for this	year?				Yes No
(Some organizations t	hat made a section (eraging Period Under 501(h) election do not rate instructions for li	have to complete all	of the five columns b	elow.
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	414,830	464,498.	740,339.	812,585.	2,432,252.

250,000.

4,584.

250,000.

10,944.

250,000.

125,294.

Schedule C (Form 990 or 990-EZ) 2017

85,714.

250,000. 1,000,000.

1,500,000.

226,536.

d Grassroots nontaxable amounte Grassroots ceiling amount

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

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2017 Ocean Conservancy 23-724515 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

 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: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? 	Yes				
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No		Amo	ount
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
 a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 					
$\textbf{b} \ \ \text{Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?} \ \ \dots$					
$\textbf{b} \ \ \text{Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?} \ \ \dots$					
c 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					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)	ion 501(d	c)(5), o	r sec	tion	
501(c)(6).				V	
				Yes	N
Were substantially all (90% or more) dues received nondeductible by members?			1		
			2		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
					ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	d "No," C	OR (b)	Part		ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from tart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	d "No," C	OR (b)			ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	d "No," C	OR (b)	Part		ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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).	d "No," C	OR (b)	Part		ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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). a Current year	d "No," C	OR (b)	Part 1 2a		ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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). a Current year b Carryover from last year	d "No," C	OR (b)	Part 1 2a 2b		ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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 Carrover from last year	d "No," C	OR (b)	Part 1 2a 2b 2c		ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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	d "No," C	OR (b)	Part 1 2a 2b		ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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	d "No," C	OR (b)	Part 1 2a 2b 2c		ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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 expense of the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	d "No," C	OR (b)	2a 2b 2c 3		ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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	d "No," C	OR (b)	Part 1 2a 2b 2c		ne 3,

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Ocean Conservancy

Employer identification number 23-7245152

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a cert	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structu	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing cons	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for
_	conservation easements.		
Pa	rt III Organizations Maintaining Collections o	-	ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pul	olic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre		l gain, provide
	the following amounts required to be reported under SFAS 1		
а	Revenue included on Form 990, Part VIII, line 1		> \$
h	Assets included in Form 990 Part Y		• •

	t III Organizations Maintaining Co		t Historical Tr	easures or Oth	er S			ts/contin		ige Z	
3	•										
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items										
	(check all that apply):										
a	Public exhibition d Loan or exchange programs										
b											
c	Preservation for future generations										
4	Provide a description of the organization's col						se in Par	t XIII.			
5	During the year, did the organization solicit or		*	·				٦.,		1	
Do	to be sold to raise funds rather than to be mai							Yes		No	
Pai	t IV Escrow and Custodial Arrang reported an amount on Form 990, Part		te if the organizatio	n answered "Yes" c	n Fori	m 990	, Part IV,	line 9, or			
	-	•	:			ام مام					
ıa	Is the organization an agent, trustee, custodia							Yes] N	
	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a							」 Yes		No	
b	ii res, explain the arrangement in Part XIII a	na complete the for	lowing table.		Г			Amount			
_	Deginning belongs				-	40		Amount			
	Beginning balance					1c					
	Additions during the year					1d					
•	Distributions during the year				····	1e 1f					
22	Ending balance Did the organization include an amount on Fo				L	-''		Yes	\neg	No	
	If "Yes," explain the arrangement in Part XIII.				-			_ 1C3			
Pai											
		(a) Current year	(b) Prior year	(c) Two years back		hree ve	ears back	(e) Four	vears	hack	
1 a	Beginning of year balance	2,334,417.	2,219,747.	2,277,442.	(4)		25,768.	<u> </u>	112,		
	Contributions	1,246,365.			2,020,700. 2,222,70						
	Net investment earnings, gains, and losses	192,134.	230,687.	55,704.			55,471.		325,	060.	
	Grants or scholarships						, - , - , - ,		,		
	Other expenditures for facilities										
·	and programs	111,314.	110,294.	107,866.		10	06,215.		102,	930.	
f	Administrative expenses	6,134.	5,723.	· · · · · · · · · · · · · · · · · · ·			7,582.			128.	
g g	End of year balance	3,655,468.	2,334,417.		+	2.2	77,442.	2.	325,		
2	Provide the estimated percentage of the curre						, -	,			
	Board designated or quasi-endowment	• 00	%	,,, riola ao.							
	Permanent endowment ► 77.65	%									
		2.35 %									
	The percentages on lines 2a, 2b, and 2c shou										
За	Are there endowment funds not in the posses		tion that are held a	nd administered for	the o	rganiza	ation				
	by:	ŭ				Ü		Γ	Yes	No	
	(i) unrelated organizations							3a(i)		X	
								3a(ii)		X	
b	If "Yes" on line 3a(ii), are the related organizat							3b			
4	Describe in Part XIII the intended uses of the										
Pai	rt VI Land, Buildings, and Equipme	ent.									
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11a. S	See Form 990, Part 2	K, line	10.					
	Description of property	(a) Cost or ot	her (b) Cost	or other (c)	Accun	nulate	d	(d) Book	value		
		basis (investm	nent) basis	(other) d	epreci	iation					
1a	Land										
	Buildings										
	Leasehold improvements			5,800.		9,24			5,5		
	Equipment			4,435.		1,58		29	9,85	52.	
	Other		39	9,116.	191	L,55	9.	207	7,5	57.	
Tota	I. Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part	X, column (B), line 1	0c.)			▶	313	3,96	57.	

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Deferred lease obligations	68,649.
(3)	Gift annuity payment liability	578,276.
(4)	Deferred compensation liability	24,994.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	671,919.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2017 Ocean Conservancy Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 38,943,746. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 1,182,100. a Net unrealized gains (losses) on investments _______ 2a 412,900. **b** Donated services and use of facilities 2b 2c c Recoveries of prior year grants d Other (Describe in Part XIII.) 1,595,000. e Add lines 2a through 2d 2e 37,348,746. Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) 67,475. c Add lines 4a and 4b 37,416,221. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 26,369,820. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: 412,900. a Donated services and use of facilities **b** Prior year adjustments 2c c Other losses d Other (Describe in Part XIII.) 412,900. 2e e Add lines 2a through 2d 25,956,920. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 67,475. a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) 67,475. c Add lines 4a and 4b 26,024,395. 5 Total expenses, Add lines 3 and 4c, (This must equal Form 990, Part I, line 18.) Part XIII Supplemental 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 XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Part V, line 4: The donor-restricted endowment fund has no purpose restrictions and was established to provide continuing support for general operations of the organization. Part X, Line 2: Management evaluated OC's tax positions and has concluded that OC has taken no uncertain tax positions that require either recognition or disclosure in the accompanying financial statements.

Schedule D (Form 990) 2017	Ocean Conservancy	23-7245152 Page 5
Schedule D (Form 990) 2017 Part XIII Supplemental Info	rmation (continued)	.

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

23-7245152

Ocean Conservancy General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

United States. 3 Activities per Region. (T	he following Par	t I, line 3 table c	an be duplicated if additional space is i	needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service,	(f) Total expenditures for and investments in the region
Nambh Amaria	0	0	Grants to recipients		1 254 215
North America		0	located in region		1,354,215.
East Asia and the			Grants to recipients		
Pacific	0	0	located in region		72,140.
Europe (Including			Grants to recipients		
Iceland & Greenland)	0	0	located in region		273,421.
Central America and the Caribbean	0	0	Dunaman samui sas	Travel	2 224
the Calibbean	0	0	Program services	ITAVET	2,224.
East Asia and the				Fees for service,	
Pacific	0	0		supplies, and travel	31,922.
				Fees for services,	
Europe (Including				meeting sponsorship, and	
Iceland & Greenland)	0	0	Program services	travel	166,111.
North America -				Fees for services and	62 522
Canada and Mexico	0	0	Program services	supplies	63,533.
				Fees for services and	
South America	0	0		travel	1,227.
3 a Sub-total	0				1,964,793.
b Total from continuation					, , ,
sheets to Part I	0	0			985.
c Totals (add lines 3a		_			1 065 770
and 3b)	0	0			1,965,778.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2017

Part I	Continuatio	n of Activitie	s per Regio	1. (Schedule F (Form 990), Part I, line 3	3)	
	(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
Sub-Sal	naran Africa	0	0	Program services	Travel	985.
Totals	•					985.

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) i	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)		
					1 350 000					
			North America	Arctic preservation	1,350,000.	wire	0.			
			East Asia and the							
			Pacific	Fisheries modeling	61,640.	Wire	0.			
			Europe (Including							
			Iceland &							
				Fisheries modeling	268,421.	Wire	0.			
2	Enter total number of	recipient organization	ns listed above that are	recognized as charities by the	foreign country	recognized as tay-e	xemnt		<u> </u>	
_	2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter									

3 Enter total number of other organizations or entities

Part III Grants and Other Assistand Part III can be duplicated if a			ates. Complete r	the organization answered "Yes"	on Form 990, Part	t IV, line 16.	
(a) Type of grant or assistance	(b) Region	(c) Number of 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)

Schedule F (Form 990) 2017 (Part IV Foreign 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	X 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	X 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	X 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	X 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	X 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	X No

Schedule F (Form 990) 2017

Part V | 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

(estimated humber of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
Part I, Line 2:
For research grants, Ocean Conservancy requires semiannual financial
reports along with project, progression discussions and reports. For
cleanup 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 3:
Cash value paid in US dollars.

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 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 the latest instructions.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

Ocean Conservancy

Employer identification number 23-7245152

Ocean C	conservancy				23 /243	174
Part I Fundraising Activities required to complete this pa	Complete if the organization answrt.	ered "\	es" o	n Form 990, Part IV,	line 17. Form 990-E2	I filers are not
Indicate whether the organization rai X Mail solicitations X Internet and email solicitation	e X Solicita	ation of	non-g	overnment grants		
c X Phone solicitations	g Specia		-	-		
d	or oral agreement with any individua	al (inclu	dina o	officers directors true	stees or	
	Part VII) or entity in connection with					☐ No
b If "Yes," list the 10 highest paid ind	•	-		-		
compensated at least \$5,000 by the			J			
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	or cor	Did raiser sustody ntrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
CHAPMAN CUBINE & HUSSEY -		Yes	No			
2000 15TH STREET N #550,	Direct mail		Х	5,049,339.	310,716.	4,738,623.
BEACONFIRE RED ENGINE 2300						
CLARENDON BLVD SUITE 95,	Digital fundraising		Х	1,713,106.	129,319.	1,583,787.
GORDON & SCHWENKMEYER, INC						
20300 S. VERMONT AVE # 210,	Telemarketing		Х	10,759.	7,070.	3,689.
PUBLIC INTEREST						
COMMUNICATIONS, INC 7700	Telemarketing		Х	5,745.	12,566.	-6,821.
DONOR SERVICES GROUP, LLC -						
1200 WILSHIRE BLVD # 650, Los	Telemarketing		Х	3,921.	7,831.	-3,910.
Total			. ▶	6,782,870.	467,502.	6,315,368.
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	oution	s or has been notified	d it is exempt from re	egistration
AL, AK, AR, CA, CO, CT, DC,						
NY, NC, ND, OH, OK, OR, PA,	RI,SC,SD,TN,UT,VA	,WV,	WI,	AZ,DE,ID,I	N, IA, MT, NE	,SD,TX,VT
WY						

		of fundraising event contributions and gre	•)-EZ, lines 1 and 6b. List	, , , , , , , , , , , , , , , , , , ,	
		· · · · · · · · · · · · · · · · · · ·	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
4)			(event type)	(event type)	(total number)	col. (c))
Revenue						
Rev	1	Gross receipts				
	2	Less: Contributions				
	_	Less. Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
SS	5	Noncash prizes				
pense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Ö	8	Entertainment				
	9	Entertainment Other direct expenses				
		Direct expense summary. Add lines 4 through	h 9 in column (d)			
	11	Net income summary. Subtract line 10 from li	ine 3, column (d)		>	
Pa	ırt ı	Gaming. Complete if the organization s \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
		\$13,000 0111 01111 990-LZ, ilile 0a.		(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Rev						
_	1	Gross revenue				
ses	2	Cash prizes				
kpen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	_	Other advantages and a surrange				
	5	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	' from line 1, column (d)		>	
0	E~⁴	tor the state(s) in which the arganization and	uoto gamina sativitias			
		ter the state(s) in which the organization condu the organization licensed to conduct gaming a	_	states?		Yes No
		No," explain:				
102	We	ere any of the organization's gaming licenses re	evoked, suspended, or to	erminated during the tax	vear?	Yes No
		Yes," explain:				
					<u> </u>	

11 Does the organization conduct gaming activities with nonmembers? 12 lish do organization a grantor, beneficiary of rustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? 13 incides the percentage of gaming activity conducted in: 2 The organization facility 2 An outside facility 3 An outside facility 4 An outside facility 5 An outside facility 5 An outside facility 5 An outside facility 6 Lieffe the name and address of the person who prepares the organization's gaming/special events books and records: Name	Sch	nedule G (Form 990 or 990-EZ) 2017 Ocean Conservancy 23-	7245	152	Page 3
12 is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer chambale gaming? 13 Indicate the percentage of gaming activity conducted in: 14 in the organization facility 15 an outside facility 15 in Outside facility 16 Enter the name and address of the person who prepares the organization's gaming/special events books and records. Name					
13 Indicate the percentage of gaming activity conducted in: a The organization's facility b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name ▶ Address ▶ 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		Vac	□ No
a The organization shall by Man outside facility 138 94 138 94 138 94 138 94 138 94 148 1	13		ш	103	110
b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name ▶ Address ▶ 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?			13a		%
Inter the name and address of the person who prepares the organization's gaming/special events books and records: Name				1	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?					
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Name ▶			
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party: Name ▶ Address ▶		Address >			
of garning revenue retained by the third party ▶ \$ c If 'Yes,' enter name and address of the third party: Name ▶ Address ▶ 16 Garning manager information: Name ▶ Garning manager compensation ▶ \$ Description of services provided ▶ □ Director/officer □ Employee □ Independent contractor 17 Mandatory distributions: a is the organization required under state law to make charitable distributions from the garning proceeds to retain the state garning license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v): and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers: (i) Name of Fundraiser: CHAPMAN CUBINE & HUSSEY (ii) Address of Fundraiser: BEACONFIRE RED ENGINE. (i) Name of Fundraiser: BEACONFIRE RED ENGINE.	15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗆	Yes	☐ No
of garning revenue retained by the third party ▶ \$ c If 'Yes,' enter name and address of the third party: Name ▶ Address ▶ 16 Garning manager information: Name ▶ Garning manager compensation ▶ \$ Description of services provided ▶ □ Director/officer □ Employee □ Independent contractor 17 Mandatory distributions: a is the organization required under state law to make charitable distributions from the garning proceeds to retain the state garning license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v): and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers: (i) Name of Fundraiser: CHAPMAN CUBINE & HUSSEY (ii) Address of Fundraiser: BEACONFIRE RED ENGINE. (i) Name of Fundraiser: BEACONFIRE RED ENGINE.	ŀ	of "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
Name ► Address ► 16 Gaming manager information: Name ► Gaming manager compensation ► \$		of gaming revenue retained by the third party \$\bigs\\$			
Address ▶ 16 Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Description of services provided ▶ Director/officer	(c If "Yes," enter name and address of the third party:			
Againg manager information: Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer		Name			
Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer		Address			
Description of services provided ▶ Description of services provided ▶ Director/officer	16	Gaming manager information:			
Director/officer		Name ▶			
Director/officer		Gaming manager compensation ▶ \$			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Description of services provided			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?					
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?					
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		☐ Director/officer ☐ Employee ☐ Independent contractor			
retain the state gaming license?					
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers: (i) Name of Fundraiser: CHAPMAN CUBINE & HUSSEY (i) Address of Fundraiser: 2000 15TH STREET N #550, Arlington, VA 22201 (i) Name of Fundraiser: BEACONFIRE RED ENGINE. (i) Address of Fundraiser:	ć			Voc	No
Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers: (i) Name of Fundraiser: CHAPMAN CUBINE & HUSSEY (i) Address of Fundraiser: 2000 15TH STREET N #550, Arlington, VA 22201 (i) Name of Fundraiser: BEACONFIRE RED ENGINE.	ŀ		—	103	
15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers: (i) Name of Fundraiser: CHAPMAN CUBINE & HUSSEY (i) Address of Fundraiser: 2000 15TH STREET N #550, Arlington, VA 22201 (i) Name of Fundraiser: BEACONFIRE RED ENGINE. (i) Address of Fundraiser:	_	- 11.5			
 (i) Name of Fundraiser: CHAPMAN CUBINE & HUSSEY (i) Address of Fundraiser: 2000 15TH STREET N #550, Arlington, VA 22201 (i) Name of Fundraiser: BEACONFIRE RED ENGINE. (i) Address of Fundraiser: 	Pa		lines 9	, 9b, 10	b, 15b,
 (i) Name of Fundraiser: CHAPMAN CUBINE & HUSSEY (i) Address of Fundraiser: 2000 15TH STREET N #550, Arlington, VA 22201 (i) Name of Fundraiser: BEACONFIRE RED ENGINE. (i) Address of Fundraiser: 	Sc	hedule G. Part I. Line 2b. List of Ten Highest Paid Fundraise	rs:		
 (i) Address of Fundraiser: 2000 15TH STREET N #550, Arlington, VA 22201 (i) Name of Fundraiser: BEACONFIRE RED ENGINE. (i) Address of Fundraiser: 					
 (i) Address of Fundraiser: 2000 15TH STREET N #550, Arlington, VA 22201 (i) Name of Fundraiser: BEACONFIRE RED ENGINE. (i) Address of Fundraiser: 	(i	.) Name of Fundraiser: CHAPMAN CUBINE & HUSSEY			
(i) Name of Fundraiser: BEACONFIRE RED ENGINE. (i) Address of Fundraiser:				222	 01
(i) Address of Fundraiser:	<u>\ </u>	in induced of fundraliser. 2000 form binder in #330, infilingcon,	721	222	<u> </u>
(i) Address of Fundraiser:	(i	.) Name of Fundraiser: BEACONFIRE RED ENGINE.			

Part IV Supplemental Information (continued)
(i) Name of Fundraiser: GORDON & SCHWENKMEYER, INC.
(i) Address of Fundraiser: 20300 S. VERMONT AVE # 210, Torrance, CA 90502
(i) Name of Fundraiser: PUBLIC INTEREST COMMUNICATIONS, INC.
(i) Address of Fundraiser:
7700 LEESBURG PIKE # 301 N, Falls Church, VA 22043
(i) Name of Fundraiser: DONOR SERVICES GROUP, LLC
(i) Address of Fundraiser: 1200 WILSHIRE BLVD # 650, Los Angeles, CA 90017
Part I, Line 2b, Column (v):
Amounts listed in Part I, Column V include a portion of non-fundraising
professional fees.

SCHEDULE I (Form 990)

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

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

Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 **2017**Open to Public

Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

Employer identification number 23-7245152

Part I	General Information on Grants a	nd Assistance						
1 Does	s the organization maintain records t	o substantiate th	e amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	tion
crite	ria used to award the grants or assis	stance?						X Yes No
2 Desc	cribe in Part IV the organization's pro	ocedures for mon	itoring the use of grant	t funds in the United	d States.			
Part II	Grants and Other Assistance to	Domestic Organ	izations and Domesti	ic Governments. C	omplete if the orga	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
	recipient that received more than	5,000. Part II car	be duplicated if addit	tional space is need	ded.	(C) NA 11		,
1 (a) N	lame and address of organization or government	(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
3900 Arc	rcumpolar Council Alaska tic Blvd #203							
Anchorag	e, AK 99503	92-0091959	501(c)(3)	10,000.	0.			Arctic Conservation
Foundati	Marine Sanctuary on - 8601 Georgia Ave #510 Spring, MD 20910	94-3370994	501(c)(3)	10,000.	0.			Meeting sponsorship
Blue Fro PO Box 1 Washingt		14-1861309	501(c)(3)	15,000.	0.			Climate modeling
333 W. 4	ternational Association th Ave. #301 e, AK 99501	92-0169320	501(c)(3)	40,000.	0.			Arctic Conservation
	undation h St, NW #500 on, DC 20036	71-0863908	501(c)(3)	45,000.	0.			Sea grass restroation
1111 Fra	CA 94607	94-3067788		91,867.	0.			Fisheries modeling
	r total number of section 501(c)(3) a r total number of other organizations	-	-					

Ocean Conservancy

Part II Continuation of Grants and Oth	er Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ative American Rights Fund							
506 Broadway							
oulder, CO 80302	84-0611876	501(c)(3)	100,000.	0.			Arctic Conservation
Arizona State University							
O Box 876011							
Cempe, AZ 85287-6011	86-0196696	501(c)(3)	168,411.	0.			Fisheries modeling

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information re	quired in Part I, lin	e 2; Part III, columr	n (b); and any other a	dditional information.	
Part I, Line 2:					
For research grants, Ocean Conserv	vancy req	uires semi	iannual fin	ancial	
reports along with project, progre	ession di	scussions	and report	s. For	
cleanup grants (typically less tha	an \$5,000) Ocean Co	onservancy	requires a	
basic financial report certifying	the fund	s were use	ed for the	purpose of	
the grant.					

SCHEDULE J (Form 990)

Compensation Information

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

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

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

▶ Attach to Form 990.

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

2017

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

Ocean Conservancy

Part I Questions Regarding Compensation

 $Employer\ identification\ number \\ 23-7245152$

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued 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	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2017

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	berients	(B)(i)-(D)	reported as deferred on prior Form 990
(1) Janis Jones	(i)	295,537.	60,000.	690.	18,000.	35,022.	409,249.	0.
President & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Andreas Merkl	(i)	320,067.	60,000.	1,290.	19,365.	24,458.	425,180.	0.
President	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Emily Woglom	(i)	223,904.	0.	1,380.	13,541.	11,483.	250,308.	0.
EVP	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) Sarah Humphries	(i)	200,262.	0.	1,698.	12,333.	24,458.	238,751.	0.
VP, Resource Development	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Chris Dorsett	(i)	189,937.	0.	2,097.	11,928.	35,022.	238,984.	0.
VP, Conservation Policy	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) Susan Ruffo	(i)	156,266.	20,000.	1,425.	0.	0.	177,691.	0.
Director, International Initiatives	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) Julia Roberson	(i)	161,899.	0.	1,530.	9,790.	11,483.	184,702.	0.
VP, Communications	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) Scott Highleyman	(i)	150,445.	10,000.	2,301.	0.	35,055.	197,801.	0.
VP, Conservation Policy	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) Kenneth Donaldson	(i)	160,399.	0.	348.	9,730.	11,483.	181,960.	0.
VP, Finance & Admin	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) Marie Michelson	(i)	155,417.	0.	1,415.	9,444.	11,483.	177,759.	0.
VP, Digital Communications	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) Joi Danielson	(i)	166,215.	0.	30,343.	9,138.	11,483.	217,179.	0.
Senior Fellow, Program innovation	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) Kelly Luck	(i)	126,995.	19,127.	263.	7,851.	35,022.	189,258.	0.
Director, Foundation support	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) George Leonard	(i)	141,544.	0.	1,984.	8,724.	35,022.	187,274.	0.
Chief Scientist	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) Teresa Parsons	(i)	139,515.	0.	978.	8,602.	35,022.	184,117.	0.
Director, Program Development	(ii)	0.	0.	0.	0.	0.		0.
(15) Michelle Frey	(i)	118,033.	17,811.	939.	7,311.	35,022.	179,116.	0.
Director, Digital Communications	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							

Part III Supplemental Information							
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.							
Part I, Line 4a:							
Joi Danielson received a severance payment in the amount of \$29,437.							

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► 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.

Ocean Conservancy

Employer identification number 23-7245152

Chock if applicable	Pai	rt I Types of Property				<u> </u>		
1 Art - Works of art 2 Art - Historical reasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Closely held stock 11 Securities - Closely held stock 12 Securities - Closely held stock 13 Countries - Publicity traded 14 Securities - Partnership, LLC, or trust interests 15 Securities - Miscellaneous 16 Couleties - Miscellaneous 17 Qualified conservation contribution - Historic structures 18 Real estate - Residential 19 Real estate - Combercial 19 Real estate - Combercial 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other (Supplies) 26 Other (Supplies) 27 Other (Supplies) 30 Other (Supplies) 4 Drugs and medical supplies 5 Other (Supplies) 5 Other (Supplies) 5 Other (Supplies) 6 Other (Supplies) 7 Other (Supplies) 7 Other (Supplies) 8 Other (Supplies) 9 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Dones Acknowledgement 6 Upting the year, did the organization receive by contribution, and which isn't required to be used for exempt purposes for the entire holding period? 8 If 'Yes,' describe the arrangement in Part II. 9 Oses the organization has a giff acceptance policy that requires the review of any nonstandard contributions? 9 Oses the organization has a giff acceptance policy that requires the review of any nonstandard contributions? 9 Oses the organization has a giff acceptance policy that requires the review of any nonstandard contributions? 9 Oses the organization has a giff acceptance policy that requires the review of any nonstandard contributions? 9 Oses the organiza			Check if	Number of contributions or	Noncash contribution amounts reported on	Method of det	•	nts
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2017

SCHEDULE O

Internal Revenue Service

(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 www.irs.gov/Form990 for the latest information.

2017
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Ocean Conservancy

Employer identification number 23-7245152

Form 990, Part I, Line 1, Description of Organization Mission:

with our partners, we create science-based solutions for a healthy

ocean and the wildlife and communities that depend on it.

Form 990, Part III, Line 4c, Program Service Accomplishments: supply Americans with healthy seafood.

Form 990, Part III, Line 4d, Other Program Services:

Arctic Protection: Ocean Conservancy is working to help citizens and decision-makers alike understand what is at stake in the Arctic region of the United States, where oil drilling and climate change are increasing threats. We are advocating for science-based solutions to prevent reckless drilling and ensure that Arctic people and wildlife thrives and its waters remain healthy and clean.

Expenses \$ 5,137,447. including grants of \$ 1,512,215. Revenue \$ 0.

Gulf of Mexico Restoration - Ocean conservancy has worked to promote a healthy Gulf for more than 20 years. Building on established relationships in the region and solid scientific knowledge of its ecosystems and wildlife, Ocean Conservancy's Gulf Restoration and Fisheries Conservation program staff and our policy experts are putting their expertise to work by working with various decision makers and regulators; conduction on-the-ground research and observation; and publishing reports and recommendations for decision-makers and citizens alike. We developed a framework for restoration that is a blueprint to restore the Gulf to its rightful place as a national treasure, and we

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Name of the organization Ocean Conservancy Employer identification number 23-7245152

are working to ensure that necessary funds for long-term science and Gulf restoration are committed

Expenses \$ 1,673,019. including grants of \$ 500. Revenue \$ 0.

Form 990, Part VI, Section B, line 11b:

The 990 is prepared by an outside firm. The VP for Finance performs a detailed review of the 990 and reconciles any questions and modifies the return if necessary. The 990 is then forwarded to the Chief Financial Officer and the Finance Committee for further questions. After their review and any adjustments if necessary, the 990 is forwarded to the entire Board and then filed with IRS.

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 covered 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.

Name of the organization Ocean Conservancy	Employer identification number 23-7245152
The Board sets the CEO's and President's salaries based of	n its evaluation
of their performance. The Board takes into account marke	t surveys and the
organization's performance and financial position. The E	xecutive Committee
of the Board of Directors reviews and approves the compen	sation of other
officers and key employees using externally prepared comp	earability data.
Form 990, Part VI, Line 17, List of States receiving copy	of Form 990:
AL, AK, AZ, AR, CA, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MS,	NH, NJ, NM, NY, NC, ND
OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI	
Form 990, Part VI, Section C, Line 19:	
Ocean Conservancy's audited financial statements, governi	ng documents and
conflict of interest policy are available upon request.	
Form 990, Part IX, Line 11g, Other Fees:	
Temporary help:	
Program service expenses	2,038.
Management and general expenses	8,917.
Fundraising expenses	2,835.
Total expenses	13,790.
Consulting:	
Program service expenses	3,150,712.
Management and general expenses	32,175.
Fundraising expenses	170,571.
Total expenses	3,353,458.
Caging:	

Name of the organization Ocean Conservancy	Employer identification number 23-7245152
Program service expenses	0.
Management and general expenses	133,041.
Fundraising expenses	0.
Total expenses	133 0/1
Other:	
Program service expenses	13,215.
Management and general expenses	5.
Fundraising expenses	62.
Total expenses	12 202
Translation:	
Program service expenses	5,170.
Management and general expenses	
Fundraising expenses	2
Total expenses	F 170
Total Other Fees on Form 990, Part IX, line 11g, Col A	3,518,741.

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic

filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts

Enter filer's identifying number Employer identification number (EIN) or Type or Name of exempt organization or other filer, see instructions. print 23-7245152 Ocean Conservancy File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your 1300 19th Street, NW, No. 8th Fl return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions Washington, DC 20036 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF Form 5227 10 04 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 Kenneth Donaldson The books are in the care of ► 1300 19th St., NW, 8th Fl. - Washington, DC 20036 Telephone No. \blacktriangleright (202) $4\overline{29-5609}$ Fax No. ▶ 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 」. 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. May 15, 2019 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ___ calendar year ightharpoonup | X | tax year beginning JUL 1, 2017 JUN 30, 2018 , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. \$ За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required. by using EFTPS (Electronic Federal Tax Payment System). See instructions. Зс

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

must use Form 7004 to request an extension of time to file income tax returns.

Form 8868 (Rev. 1-2017)