** PUBLIC DISCLOSURE COPY **

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

ΑI	For the	$^\circ$ 2023 calendar year, or tax year beginning $$ JUL $$ $$ $$ $$ $$ $$ $$ $$ $$ $$	ending J	UN 30, 2024	
	Check if applicable	C Name of organization		D Employer identific	cation number
	Addres	S OCEAN CONSERVANCY			
	Name change			23-72451	52
	Initial return Final return/	Number and street (or P.0. box if mail is not delivered to street address) 1300 19TH ST NW, 8TH FLOOR	Room/suite	E Telephone number 202-429-5	
	termin- ated			G Gross receipts \$	56,087,482.
	Ameno	WASHINGTON, DC 20030		H(a) Is this a group re	
	Application pendin	F Name and address of principal officer: UANTS SEARCHES CONES		for subordinates	? Yes X No
_		SAME AS C ABOVE		H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	r 527	1	list. See instructions
	Websit		I Vee	H(c) Group exemption	n number I State of legal domicile: DC
		organization: X Corporation Trust Association Other Summary	L Year	of formation: 1972 N	State of legal domicile; DC
-	1	Briefly describe the organization's mission or most significant activities: OCEAN			ORKING
Governance]	WITH YOU TO PROTECT THE OCEAN FROM TODAY'S			
erns	2	Check this box if the organization discontinued its operations or dispose	ed of more	1 1	
Š	3			3	15
		Number of independent voting members of the governing body (Part VI, line 1b)			14
Activities &	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			181
ĭ₹	6	Total number of volunteers (estimate if necessary)			573635
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	B	Net unrelated business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		47,087,114.	46,638,219.
Jue	9	(5.1)(11.1)		0.	0.
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		626,127.	1,984,291.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		888,924.	574,184.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		48,602,165.	49,196,694.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,694,313.	4,596,034.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ý	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		23,063,287.	23,922,084.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		871,461.	508,000.
χ	b	Total fundraising expenses (Part IX, column (D), line 25) 7,192,29			
Ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		24,232,131.	22,809,252.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		51,861,192.	51,835,370.
_		Revenue less expenses. Subtract line 18 from line 12		-3,259,027.	-2,638,676.
Net Assets or				ginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)		96,130,718.	95,267,498.
et A	21	Total liabilities (Part X, line 26)		15,159,887. 80,970,831.	13,281,790. 81,985,708.
P	22 art II	Net assets or fund balances. Subtract line 21 from line 20		00,910,031.	01,303,700.
		Ities of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the hest of my	knowledge and helief it is
true	e. correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	ch preparer	has any knowledge.	Miowicago ana bonoi, it is
	,, 0011100	kenneth Donaldson, Chief Financial Officer	on proparor	3/28	/2025
Sig	ın	Signature of officer _{10B7171B5B16498}		Date	
Hei		KENNETH DONALDSON, CHIEF FINANCIAL OFFICEF	3		
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	d	ROBERT WILLIAMS ROBERT WILLIAMS	0	3/28/25 self-employe	
	parer	Firm's name CLIFTONLARSONALLEN LLP		Firm's EIN 4	1-0746749
Use	Only	Firm's address 950 NORTH GLEBE ROAD, SUITE 1200			
		ARLINGTON, VA 22203		Phone no. (5	<u>71) 227-9500 </u>
Ma	y the IF	S discuss this return with the preparer shown above? See instructions			X Yes No

	990 (2023) OCEAN CONSERVANCY	23-7245152	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	OCEAN CONSERVANCY IS WORKING WITH YOU TO PROTECT THE C	CEAN FROM	
	TODAY'S GREATEST GLOBAL CHALLENGES. TOGETHER, WE CREA	TE	
	EVIDENCE-BASED SOLUTIONS FOR A HEALTHY OCEAN AND THE W	/ILDLIFE AND	
	COMMUNITIES THAT DEPEND ON IT.		
2	Did the organization undertake any significant program services during the year which were not listed on the	e	
	prior Form 990 or 990-EZ?		X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es? 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	s. as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to		nd
	revenue, if any, for each program service reported.	, , ,	
4a	(Code:) (Expenses \$ 14,475,718. including grants of \$ 704,600.)	Revenue \$	0.)
	SCIENCE, POLICY AND OUTREACH: OCEAN CONSERVANCY USES T		
	KNOWLEDGE, EVIDENCE AND SCIENCE, PUBLIC OPINION POLLIN	G AND POLITICAL	<u>. </u>
	SCIENCE TO INFORM OUR CONSERVATION, ADVOCACY AND OUTRE	ACH TO ADVANCE	
	CONSERVATION SOLUTIONS THAT BENEFIT THE OCEAN AND THE	PEOPLE AND	
	COMMUNITIES THAT DEPEND ON IT. TRULY DURABLE CONSERVA	TION SOLUTIONS	
	REQUIRE MEANINGFUL PARTNERSHIPS WITH CITIZENS, BUSINES		
	DECISION-MAKERS AND GOVERNMENTS AT THE LOCAL, STATE, N		
	INTERNATIONAL LEVEL. WE REACH OUR MEMBERS, SUPPORTERS		
	THE OCEAN- AND COASTAL-CONCERNED THROUGH OUR WEBSITE,	•	
	MAIL, SOCIAL MEDIA, REPORTER OUTREACH, AND OUR OWN REP		NT.
	OUR AUDIENCES REGULARLY TAKE ACTION TO ADVANCE OUR CON		
	PRIORITIES.		
4b	(Code:) (Expenses \$ 10,979,793. including grants of \$ 839,580.)	Revenue \$	0.)
	PREVENTING PLASTIC POLLUTION: OCEAN CONSERVANCY EMPOWE		
	BUSINESSES, GOVERNMENTS AND NGOS AT THE LOCAL, STATE,	NATIONAL AND	
	INTERNATIONAL LEVEL TO REDUCE THE GLOBAL PLASTIC FOOTP		OP
	THE FLOW OF 11 MILLION TONS OF TRASH AND PLASTIC FLOWI		
	ANNUALLY. WE IMPLEMENT AND ORGANIZE THE INTERNATIONAL		
	ONE OF THE LARGEST SINGLE DAY VOLUNTEER EVENTS ON BEHA		
	RESPONSIBLE FOR PREVENTING AND REMOVING MORE THAN 300		
	TRASH AND PLASTIC FROM OUR OCEAN, COASTS AND WATERWAYS		
	MILLIONS OF VOLUNTEERS ON BEHALF OF THE OCEAN. WE PART	•	
	AND MUNICIPALITIES TO IMPLEMENT INNOVATIVE OCEAN PLAST		
	EFFORTS. WE ADVOCATE, INFORMED BY THE BEST AVAILABLE S		Α,
	TO ELIMINATE THE MOST PROBLEMATIC FORMS OF SINGLE USE		
4c	(Code:) (Expenses \$ 9,091,426. including grants of \$ 2,565,526.)	Revenue \$	0.)
	OCEAN-BASED SOLUTIONS: OCEAN CONSERVANCY IS WORKING TO		
	SOLUTIONS TO ADDRESS ONE OF THE GREATEST CHALLENGES FA	CING THE OCEAN	:
	CLIMATE CHANGE. WE WORK WITH KEY PARTNERS AND DECISION	N-MAKERS AT THI	E
	LOCAL, STATE, NATIONAL AND INTERNATIONAL LEVEL TO DEVE	LOP, INFORM AND	D
	ADVOCATE FOR OCEAN-SPECIFIC SOLUTIONS TO CLIMATE CHANG	E. OUR WORK	
	ENGAGES PEOPLE AT ALL LEVELS TO ADVANCE MEANINGFUL SOL	UTIONS THAT	
	DIRECTLY ADDRESS THE CONCERNS OF COASTAL CITIZENS, SHO	W THAT OCEAN A	ND
	CLIMATE-RELATED ACTIONS ARE POSSIBLE TO PROTECT OUR IN	CREDIBLE OCEAN	,
	COASTAL ENVIRONMENTS AND WILDLIFE - AND THE PEOPLE, BU	SINESSES AND	
	COMMUNITIES THAT DEPEND ON THEM.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ 4,769,019. including grants of \$ 486,328.) (Revenue \$	0.)	
4e	Total program service expenses 39,315,956.		
		Form 9	90 (2023)

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Pa	TIV Checklist of Required Schedules			agc •
-			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		163	140
•	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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	۳		
•	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	<u> </u>		
•	similar amounts as defined in Rev. Proc. 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	_		
Ū	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,	_ <u> </u>		
•	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? <i>If</i> "Yes," <i>complete</i>	r'		
Ŭ	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	<u> </u>		
•	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 donor-restricted endowments	<u> </u>		
	or in 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	Х	
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		Х
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		Х
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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
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?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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. See instructions	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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			

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domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II

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Par	TIV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	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-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			3,7
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			. .
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		v
L	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	000		x
20	"Yes," complete Schedule L, Part IV		Х	<u> </u>
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	22	
30		30	х	
31	contributions? If "Yes," complete Schedule M		- 21	Х
32	Did the organization required the complete scried the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		1
J Z	•	32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		1
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	. 33		
•	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes." complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		. 38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u> .	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	4		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	0		
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners? 332004 12-21-23

Par	Statements Regarding Other IRS Fillings and Tax Compliance (continued)								
			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7с	X						
d	If "Yes," indicate the number of Forms 8282 filed during the year								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
g									
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	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.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		-					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	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								
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders								
D	Gross income from other sources. (Do not net amounts due or paid to other sources against								
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	120							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
	Is the organization licensed to issue qualified health plans in more than one state?	13a							
а	Note: See the instructions for additional information the organization must report on Schedule O.	IJa							
h	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								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
-	excess parachute payment(s) during the year?	15		x					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х					
-	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.								

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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 on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 15 **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 on Schedule O. 14 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AL, AZ, CA, FL, GA, HI, IL, KS, KY, LA, MD, MA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website Another's website X Upon request ___ Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 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 STE 800, WASHINGTON,

SEE SCHEDULE O FOR FULL LIST OF STATES

Form 990 (2023) OCEAN CONSERVANCY

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<u> Page</u> **7**

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.
- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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. See the instructions for the order in which to list the persons above.

(A)	(B)	Jiga	(C)		C))		(D)	(E)	(F)		
Name and title	Average	Position (do not check more than one box, unless person is both an						Reportable	Reportable	Estimated		
	hours per week					s both r/trus		compensation from	compensation from related	amount of other		
	(list any	ector						the	organizations	compensation		
	hours for	or dire	an an			ated		organization	(W-2/1099-MISC/	from the		
	related	ustee	truste		9	suadi		(W-2/1099-MISC/	1099-NEC)	organization		
	organizations below	lual tr	tional		nploye	st com	_	1099-NEC)		and related organizations		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organization io		
(1) JANIS SEARLES JONES	50.00											
CEO		Х		Х				677,431.	0.	45,894.		
(2) SARAH HUMPHRIES	45.00											
CHIEF OF DEVELOPMENT					Х			300,637.	0.	40,950.		
(3) EMILY WOGLOM	45.00								_			
EVP				Х				292,963.	0.	38,263.		
(4) KATHERINE ANDREWS	45.00	-										
CHIEF OF STRATEGY	45.00				Х			274,503.	0.	27,487.		
(5) KENNETH DONALDSON	45.00	-						051 040	,	04 155		
CFO	40.00			Х				251,840.	0.	24,155.		
(6) CHRIS DORSETT	40.00	1				\		224 200	_	41 100		
VP, CONSERVATION (7) ADRIENNE LOFTIN	45.00					X		234,388.	0.	41,182.		
CHIEF PEOPLE & CULTURE OFFICER	45.00	1			х			250,599.	0.	24,050.		
(8) GEORGE LEONARD	40.00				Α			230,399.	0.	24,030.		
CHIEF SCIENTIST	40.00	1				x		199,045.	0.	44,918.		
(9) MALISSA LASH	40.00							233,0131				
VP, RESOURCE DEVELOPMENT		1				x		191,007.	0.	44,729.		
(10) JEFFREY WATTERS	40.00							,	-	,		
VP, EXTERNAL AFFAIRS						X		195,858.	0.	32,810.		
(11) SCOTT HIGHLEYMAN	40.00									-		
SENIOR ADVISOR, OCEAN CONSERVANCY						Х		196,649.	0.	30,582.		
(12) SARAH BEIDERMAN	45.00											
CHIEF OF STAFF					Х			177,269.	0.	19,641.		
(13) JOHN SARGENT	2.00											
CHAIR		Х		Х				0.	0.	0.		
(14) SANJAY A. PINGLE	2.00	1							_	_		
VICE CHAIR		Х		Х				0.	0.	0.		
(15) W BOWMAN CUTTER	2.00											
TREASURER		Х		Х				0.	0.	0.		
(16) DENISE GODREAU	2.00									_		
SECRETARY (17) GIATRE DEDIVING	2 00	Х		Х		_		0.	0.	0.		
(17) CLAIRE BERNARD	2.00	х						0.	0.	0.		
DIRECTOR 332007 12-21-23	1	Λ		<u> </u>				1 0.	U •	Form 990 (2023)		

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Form 990 (2023)

OCEAN CONSERVANCY

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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	st Co	ompensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one				nne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	ia a a	recto	r/trus	tee)	from	from related	other
	(list any hours for	recto						the	organizations	compensation
	related	ordi	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ndividual trustee or director	nstitutional trustee		99	npen		1099-NEC)	1099-14EC)	and related
	below	dual t	ntiona	_	nploy	st col	-in	1000 (120)		organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			3
(18) ERIN BROWNE	2.00									
DIRECTOR		Х						0.	0.	0.
(19) BONNIE M CRABTREE	2.00									
DIRECTOR		Х						0.	0.	0.
(20) COLIN LE DUC	2.00									
DIRECTOR		Х						0.	0.	0.
(21) LAURA FRANCIS	2.00							_		_
DIRECTOR		Х						0.	0.	0.
(22) STEVE GIBBS	2.00							_		_
DIRECTOR (THRU 07/23)		Х						0.	0.	0.
(23) JEFF ROSENTHAL	2.00									_
DIRECTOR		Х						0.	0.	0.
(24) PAUL SHANG	2.00	l							•	
DIRECTOR		Х						0.	0.	0.
(25) TY STIKLORIUS	2.00	l							•	
DIRECTOR	0.00	Х	_					0.	0.	0.
(26) TROY TEMPLETON	2.00	٠,						_	•	_
DIRECTOR		X						0.	0.	0.
1b Subtotal								3,242,189.	0.	414,661.
c Total from continuation sheets to Part VI								0.	0.	0.
d Total (add lines 1b and 1c)								3,242,189.	0.	414,661.

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

Per No

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

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

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

1 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
WHIRLED INTERACTIVE LLC		
8137 NAYLOR AVENUE, LOS ANGELES, CA 90045	CLEANUP CONSULTING	650,458.
NEWPORT ONE INC.	FUNDRAISING	
21 RAILROAD AVENUE, DUXBURY, MA 02332	CONSULTING	472,528.
IWRC GLOBAL LLC	PROGRAM/PROJECT	
217 BEECH STREET, CRANFORD, NJ 07016	MANGEMENT, TRAINING	384,907.
RESOURCE MEDIA	COMMUNICATIONS	
9450 SW GEMINI DR, BEAVERTON, OR 97008	CONSULTING	320,000.
COMMUNITY IT INNOVATORS, INC.	IT MANAGEMENT,	
PO BOX 220278, CHANTILLY, VA 20153	TRANSITION SUPPORT S	299,561.
2 Total number of independent contractors (including but not limited to those listed		
\$100,000 of compensation from the organization 24		

SEE PART VII, SECTION A CONTINUATION SHEETS

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rustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	ees (continued)	
(B) Average hours	(c	(C) Position (check all that apply)				ly)	(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
2.00	.,								0
	X						0.	0.	0
	Average hours per week (list any hours for related organizations below	(B) Average hours per week (list any hours for related organizations below line)	(check per week (list any hours for related organizations below line) (B) Average hours (check per week (list any hours for related organizations below line) 2.00	(B) (Check all per per week (list any hours for related organizations below line) (2.00)	(B) Average hours per week (list any hours for related organizations below line) 2.00	(B) (C) Average hours per week (list any hours for related organizations below line) (B) (C) Position (check all that app per week (list any hours for related organizations below line) 2.00	(B) Average hours per week (list any hours for related organizations below line) (C) Position (check all that apply) abolity any hours for related organizations below line) 2.00	(B) Average hours (check all that apply) hours for related organizations below line) (B) Average hours (check all that apply) Position (check all that apply	(B) (C) (D) (E) Average hours (check all that apply) esk (list any hours for related organizations below line) hours below line) Average hours (check all that apply) esk (list any hours for related organizations below line) 2.00

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Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Unrelated Revenuè excluded Total revenue Related or exempt from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1a **1 a** Federated campaigns 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d 1,023,837. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 45,614,382 1f 317,068 g Noncash contributions included in lines 1a-1f 46,638,219 h Total. Add lines 1a-1f **Business Code** 2 a Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,773,984 1773984 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 362,408. 362,408. 5 Royalties (i) Real (ii) Personal 57,745 6 a Gross rents 13,219. 6b **b** Less: rental expenses ... 44,526. c Rental income or (loss) 44,526. 44,526. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 7,087,876. assets other than inventory b Less: cost or other basis 6,877,569 Other Revenue and sales expenses 7b 210,307. 7c c Gain or (loss) 210,307. 210,307. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a CY PRES AWARD 900099 141,610 141,610. 25,640 900099 OTHER REVENUE 25,640. d All other revenue 167,250 Total. Add lines 11a-11d 49,196,694. 2558475. Total revenue. See instructions 12

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Part IX | Statement of Functional Expenses

Cooti	ion 501/c/(2) and 501/c/(4) argonizations must some	oloto all calumna. All ath	ov overenizations must con	anlata agluman (A)						
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX										
		(A)	(B)	(C)	(D)					
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses					
1	Grants and other assistance to domestic organizations		САРСПОСО	general expenses	СХРОПОСО					
•	and domestic governments. See Part IV, line 21	2,445,505.	2,445,505.							
2	Grants and other assistance to domestic									
_	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals. See Part IV, lines 15 and 16	2,150,529.	2,150,529.							
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	2,445,664.	1,809,792.	317,936.	317,936.					
6	Compensation not included above to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	17,372,851.	12,741,666.	2,323,439.	2,307,746.					
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	869,438.	641,174.	112,296.	115,968.					
9	Other employee benefits	1,882,600.	1,388,641.	243,254.	250,705.					
10	Payroll taxes	1,351,531.	997,088.	174,695.	179,748.					
11	Fees for services (nonemployees):									
а	Management									
b	Legal	163,550.		12,755.	16,017.					
С	Accounting	190,290.		190,290.						
	Lobbying	530,906.	530,906.							
е	Professional fundraising services. See Part IV, line 17	508,000.		1-0 100	508,000.					
f	Investment management fees	153,138.		153,138.						
g	Other. (If line 11g amount exceeds 10% of line 25,		0 014 054	625 225	E24 204					
	column (A), amount, list line 11g expenses on Sch O.)	9,383,737.		637,385.	531,381.					
12	Advertising and promotion	793,233.	640,866.	1,830.	150,537.					
13	Office expenses	6,014,330.		301,392.	2,229,240.					
14	Information technology	236,879.	157,124.	51,460.	28,295.					
15	Royalties	1 271 500	0.60 0.64	040 020	160 070					
16	Occupancy	1,371,580. 1,630,080.	960,264.	249,238.	162,078. 97,335.					
17	Travel	1,030,080.	1,418,753.	113,992.	91,335.					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials	725,234.	631,213.	50,716.	43,305.					
19	Conferences, conventions, and meetings	145,434.	031,413.	30,710.	43,303.					
20	Interest									
21	Payments to affiliates	290,886.	226,801.	38,804.	25,281.					
22	Depreciation, depletion, and amortization	155,389.	220,001.	155,389.	23,201.					
23 24	Insurance Other expenses, Itemize expenses not covered	133,307		133,307.						
24	above. (List miscellaneous expenses on line 24e. If									
	line 24e amount exceeds 10% of line 25, column (A),									
а	amount, list line 24e expenses on Schedule 0.) SUBSCRIPTIONS	981,574.	606,404.	198,723.	176,447.					
a b	LIST RENTAL EXPENSES	188,446.	135,783.	385.	52,278.					
C				333.	32,2,00					
d										
	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	51,835,370.	39,315,956.	5,327,117.	7,192,297.					
26	Joint costs. Complete this line only if the organization			•	•					
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)									
					000					

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Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or note	to any	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	13,159,585.	1	5,069,351.		
	2	Savings and temporary cash investments			200,271.	2	7,543,161.
	3	Pledges and grants receivable, net	16,122,007.	3	10,763,867.		
	4	Accounts receivable, net	1,241,823.	4	86,577.		
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualifi	ed per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sect	tion 4958(c)(3)(B)		6	
ß	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ğ	9	Prepaid expenses and deferred charges	1,565,322.	9	890,609.		
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	2,126,137.			
	b	Less: accumulated depreciation	10b	827,600.	1,427,282.		1,298,537. 62,923,112.
	11	Investments - publicly traded securities		54,366,481.	11	62,923,112.	
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	8,047,947.	15	6,692,284.		
	16	Total assets. Add lines 1 through 15 (must equa	96,130,718.	16	95,267,498.		
	17	Accounts payable and accrued expenses	5,478,588.	17	3,607,835.		
	18	Grants payable			1,150,261.	18	1,369,986.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, substa					
<u>ia</u>		controlled entity or family member of any of thes			22		
_	23	Secured mortgages and notes payable to unrelative		Г		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay		1			
		parties, and other liabilities not included on lines			8,531,038.	0E	8,303,969.
	26	of Schedule D Total liabilities. Add lines 17 through 25			15,159,887.	25 26	13,281,790.
	20	Organizations that follow FASB ASC 958, chec		• X	13,133,007.	20	13,201,730
Se		and complete lines 27, 28, 32, and 33.	JK HEI				
ğ	27	Net assets without donor restrictions	55,451,765.	27	56,080,670.		
3a la	28		25,519,066.	28	25,905,038.		
Ā	20	Organizations that do not follow FASB ASC 95		ock here	23,323,0001	20	23/303/0001
Ē		and complete lines 29 through 33.	, one				
þ	29	Capital stock or trust principal, or current funds			29		
ets	30	Paid-in or capital surplus, or land, building, or eq				30	
٩ss	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32			or other lands	80,970,831.	32	81,985,708.
Z	33	Total liabilities and net assets/fund balances			96,130,718.	33	95,267,498.
					, -,		Form 990 (2023)

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Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	49,196	5,6	94.
2	Total expenses (must equal Part IX, column (A), line 25)	2	51,835	5,3	70.
3	Revenue less expenses. Subtract line 2 from line 1		-2,638		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	80,970	8:	31.
5	Net unrealized gains (losses) on investments	5	4,301	.,6	53.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-648	3,1	00.
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	81,985	7,7	08.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				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 on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	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?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	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	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	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				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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.

Attach to Form 990 or Form 990-EZ.

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

In the second of the latest information in 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 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 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 on 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. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. 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 in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form 990) 2023

OCEAN CONSERVANCY

23-7245152 Page 2

Part II	Suppor	rt Schedule for Org	ganizations	Described in	Sections	170(b)(1)(A)(iv) a	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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	, ,	` ,	, ,	,	, ,	
	membership fees received. (Do not						
	include any "unusual grants.")	32994121.	53132508.	48096943.	47087114.	46638219.	227948905
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						
4	Total. Add lines 1 through 3	32994121.	53132508.	48096943.	47087114.	46638219.	227948905
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						14216393.
6	Public support. Subtract line 5 from line 4.						213732512
	ction B. Total Support	•			•	•	
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4		53132508.	48096943.	47087114.	46638219.	
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	821,412.	1288927.	1184539.	1980745.	2180918.	7456541.
9	Net income from unrelated business	,					
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)					167,250.	167,250.
11	Total support. Add lines 7 through 10						235572696
	Gross receipts from related activities,	etc. (see instruction	ons)	•	•	12	194,790.
	First 5 years. If the Form 990 is for the	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<u> </u>
	organization, check this box and sto	•		•	•	. , . ,	
Sec	ction C. Computation of Publ						
14	Public support percentage for 2023 (line 6, column (f), d	ivided by line 11,	column (f))		14	90.73 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	93.19 %
	33 1/3% support test - 2023. If the					ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qua	lifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances to	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	-			-		
	more, and if the organization meets the	_					
	organization meets the facts-and-circ						
<u>18</u>	Private foundation. If the organization			•	•		s
							(Form 990) 2023

Schedule A (Form 990) 2023

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.)

qualify under the tests listed lagrange Section A. Public Support	<u>below, please comp</u>	olete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and	(,	(-,	(5) = 5 = 5	(,	(-,	(-)
membership fees received. (Do not						
include any "unusual grants.")						
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- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support		_		_		
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on 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.)						
14 First 5 years. If the Form 990 is for t	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section t	501(c)(3) organizatio	on,
Section C. Computation of Publ	ic Support Per	rcentage				
15 Public support percentage for 2023	(line 8, column (f), d	divided by line 13,	column (f))		15	%
16 Public support percentage from 202					16	%
Section D. Computation of Inve					 	
17 Investment income percentage for 2					17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2023. If the						7 is not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2022. If the						
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organizati	on did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	

332023 12-21-23

Schedule A (Form 990) 2023

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **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 on 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 on 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 line 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		
;	3a		
	3b		
-	3с		
	10		
	4a		
Ŀ	4b		
	4c		
,	5a		
	5b		
	5с		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	0-		
1	0a		
1	0b		
		n 990)	2022

332024 12-21-23

332025 12-21-23 Schedule A (Form 990) 2023

trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes." describe in **Part VI** the role played by the organization in this regard.

За

3b

23-7245152 Page 6 OCEAN CONSERVANCY Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions **3** Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, column A) 2 Enter 0.85 of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) Enter greater of line 2 or line 3 4

Schedule A (Form 990) 2023

5

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Income tax imposed in prior year

instructions)

emergency temporary reduction (see instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

5

6

Schedule A (Form 990) 2023 OCEAN CONSERVANCY 23-7245152 Page 7

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continu	ued)	
Secti	ion D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exe	1			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and de				

Schedule A (Form 990) 2023

and 4c.
 B Breakdown of line 7:
 a Excess from 2019
 b Excess from 2020
 c Excess from 2021
 d Excess from 2022
 e Excess from 2023

Schedule A	(Form 990) 2023	OCEAN	CONSERVANCY	23-7245152 Page 8
Part VI	Supplemental Information Part IV, Section A, lines 1 line 1; Part IV, Section D,	mation. P , 2, 3b, 3c, 4 lines 2 and 3	rovide the explanations required by Part II, line 10; Part II, line b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, t; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; /, Section E, lines 2, 5, and 6. Also complete this part for any a	17a or 17b; Part III, line 12; lines 1 and 2; Part IV, Section C, Part V, Section B, line 1e; Part V,

Schedule A (Form 990) 2023

Schedule B

Schedule of Contributors

OMB No. 1545-0047

(Form 990)

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

2023

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

C	CEAN CONSERVANCY	23-7245152					
Organization type (check	cone):						
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	$\boxed{\mathbf{X}}$ 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
, ,	n is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule. See instructions.					
General Rule							
•	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor						
Special Rules							
sections 509(a)(1 contributor, durin	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supports and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (in EZ, line 1. Complete Parts I and II.	nd that received from any one					
contributor, durir literary, or educa	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
year, contribution is checked, ente purpose. Don't c	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$						
answer "No" on Part IV, lin	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (ne 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-Pling requirements of Schedule B (Form 990).	•					

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Ochodale B (1 0111 330) (2023)	i agc -
Name of organization	Employer identification number
OCEAN CONSERVANCY	23-7245152

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$ \$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* 7,901,301.	Person X 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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

323452 12-26-23

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023) Page **3**

	9-
Name of organization	Employer identification number
OCEAN CONSERVANCY	23-7245152

Part II	Noncash Property (see instructions). Use duplicate copies of Part II it	f 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
		- - - - - \$	

Page 4 Schedule B (Form 990) (2023) Name of organization **Employer identification number** OCEAN CONSERVANCY 23-7245152 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for 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 (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 (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 (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 (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

323454 12-26-23

Schedule B (Form 990) (2023)

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nam	ne of organization			Em	ployer identification number
_		ONSERVANCY			23-7245152
Pa	rt I-A Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures			
Pa	rt I-B Complete if the org	anization is exempt und	ler section 501(c)(3).	
1	Enter the amount of any excise tax	-		-	\$
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 4955		\$
3	If the organization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	rt I-C Complete if the org	anization is exempt und	ler section 501(c),	except section 501	c)(3).
	Enter the amount directly expended	, , ,	•		\$
2	Enter the amount of the filing organ				
	exempt function activities				\$
3	Total exempt function expenditures		•		•
	line 17b				
	Did the filing organization file Form				
5	Enter the names, addresses, and er made payments. For each organiza				
	contributions received that were pro	•			•
	political action committee (PAC). If			•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

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

Schedule C (Form 990) 2023

Sch		OCEAN CONSI				245152 Page 2
Pa	art II-A Complete if the org	anization is exe	mpt under sectior	n 501(c)(3) and file	d Form 5768 (ele	ection under
	section 501(h)).					
Α	Check if the filing organiza	tion belongs to an af	filiated group (and list ir	Part IV each affiliated	group member's nam	e, address, EIN,
	expenses, and shar	e of excess lobbying	expenditures).			
<u>B</u>	Check if the filing organiza	tion checked box A a	and "limited control" pro	visions apply.		
		ts on Lobbying Expe ditures" means amo	enditures unts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1	Total lobbying expenditures to influence	uence public opinion	(grassroots lobbying)			
	b Total lobbying expenditures to influ	· · · · · · · · · · · · · · · · · · ·				
	c Total lobbying expenditures (add li	-	• • • • • •			
	d Other exempt purpose expenditure					
	e Total exempt purpose expenditure	s (add lines 1c and 1	d)			
	f Lobbying nontaxable amount. Enter	er the amount from th	e following table in bot	n columns.		
	If the amount on line 1e, column (a) o	r (b) is: The lo	bbying nontaxable am	ount is:		
	not over \$500,000,	20% of	the amount on line 1e.			
	over \$500,000 but not over \$1,000	,000, \$100,0	00 plus 15% of the exc	ess over \$500,000.		
	over \$1,000,000 but not over \$1,50	00,000, \$175,0	00 plus 10% of the exc	ess over \$1,000,000.		
	over \$1,500,000 but not over \$17,0	000,000, \$225,0	00 plus 5% of the exce	ss over \$1,500,000.		
	over \$17,000,000,	\$1,000	,000.			
	g Grassroots nontaxable amount (en	<i>,</i> ,				
	h Subtract line 1g from line 1a. If zer	· · · · · · · · · · · · · · · · · · ·				
	i Subtract line 1f from line 1c. If zero					
	j If there is an amount other than ze	•			ı	¬,, ¬,,
_	reporting section 4911 tax for this					Yes No
	(Some organizations the	nat made a section (eraging Period Under 501(h) election do not rate instructions for li	have to complete all o	of the five columns b	elow.
		Lobbying Expe	enditures During 4-Yea	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
	a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column(e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount					
	(150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023

OCEAN CONSERVANCY

23-7245152 Page 3

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(8	a)	(I	b)
of the lobbying activity.	Yes	No	Amo	ount
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?	Х			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
c Media advertisements?	X		4 6	5,158.
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?	Х		15	5,337.
f Grants to other organizations for lobbying purposes?		X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		751	L,509.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?		Х		
j Total. Add lines 1c through 1i			813	3,004.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X		
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?		-\	ad: a :a	
Part III-A Complete if the organization is exempt under section 501(c)(4), se 501(c)(6).	ection 501(c)(:	o), or se	ction	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answe answered "Yes." 1 Dues, assessments and similar amounts from members			III-A, line	3, is
 Dues, assessments and similar amounts non-members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures) 				
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	s	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	e excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying a	and political			
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ginstructions); and Part II-B, line 1. Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES:	group list); Part II-	A, lines 1 a	and 2 (see	
A. OCEAN CONSERVANCY HOSTED TWO ADVOCACY EVENTS WIT	H VOLUNTE	EERS I	N	
FY24. THE FLY-INS TOOK PLACE DURING THE MONTHS OF	MARCH ANI	JUNE	2024,	,
AND INCLUDED 15 TOTAL PARTICIPANTS WHO WERE NOT OCE	AN CONSER	RVANCY	-	
STAFF.				
B. LOBBYING EXPENDITURES FOR STAFF TIME INCLUDED FI	VE REGIST	ERED		

332043 11-06-23

Schedule C (Form 990) 2023

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

Employer identification number

Inspection

Name of the organization

23-7245152 OCEAN CONSERVANCY

Pai	rt I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lir		nds or Acco	ounts. Complete if the
	organization answered Tes On Form 990, Fait IV, iii	(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year	(0, 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(-,	
2	Aggregate value of contributions to (during year)			
3				
4	Aggregate value of grants from (during year) Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor a	dvised funds	
3	are the organization's property, subject to the organization's	-		Yes No
6	Did the organization inform all grantees, donors, and donor a			
Ü	for charitable purposes and not for the benefit of the donor of			
	• •		ū	Yes No
Pai				
1	Purpose(s) of conservation easements held by the organizati			· · · · · · · · · · · · · · · · · · ·
•	Preservation of land for public use (for example, recrea		on of a historic	ally important land area
	Protection of natural habitat	· —		d historic structure
	Preservation of open space	i reservation	on or a certified	Thistoric structure
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the f	orm of a conse	ervation easement on the last
_	day of the tax year.	ned conscivation contribution in the r	orm or a consc	Held at the End of the Tax Year
а				2a
h				2b
C	Number of conservation easements on a certified historic str			2c
d	Number of conservation easements included on line 2c acqu			
ŭ	on a historic structure listed in the National Register		و ا	2d
3	Number of conservation easements modified, transferred, rel			
•	year	ioacoa, oxungalonoa, or terminatea s	, the organizat	ion daming the tax
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the per		n of	
_	violations, and enforcement of the conservation easements in			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			asements during the year
				•
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing cons	ervation easen	nents during the year
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 1	70(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservati			
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial sta	tements that d	lescribes the
	organization's accounting for conservation easements.			
Pai	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, o	r Other Sim	ilar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	88, not to report in its revenue stateme	ent and balanc	e sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research	in furtherance	of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these	items.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement a	and balance sh	eet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in	furtherance of	public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				*
2	If the organization received or held works of art, historical tre	asures, or other similar assets for fina	ncial gain, pro	vide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			. \$
b	Assets included in Form 990, Part X			. \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.		Schedule D (Form 990) 2023

332051 09-28-23

	dule D (Form 990) 2023 OCEAN C	ONSERVANCY				2	23-72	45152	l Pa	age 2	
Pai	t III Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or O	ther S	Similar	Assets	(contin	ued)		
3	Using the organization's acquisition, accession collection items (check all that apply).	on, and other records	s, check any of the f	ollowing that ma	ke sign	ificant u	se of its				
а	Public exhibition	d	Loan or excl	nange program							
b	Scholarly research	е	Other								
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explair	how they further th	e organization's	exempt	t purpos	e in Part	XIII.			
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets										
	to be sold to raise funds rather than to be maintained as part of the organization's collection?										
Par	t IV Escrow and Custodial Arrang	gements Comple	te if the organization	answered "Yes"	on For	rm 990,	Part IV, li	ne 9, or			
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodi	an, or other intermed	liary for contribution	s or other assets	not inc	cluded		_		_	
	on Form 990, Part X?						\square	Yes		No	
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:								
								Amount			
С	Beginning balance					1c					
d	Additions during the year					1d					
е	Distributions during the year					1e					
f	Ending balance					1f			—		
	Did the organization include an amount on Fo				-	?	L	Yes	\vdash	No	
	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds Complete if					. Thursa	aana baali	(-) [h a a l .	
		(a) Current year	(b) Prior year	(c) Two years ba	- + ` `	<u>, , , , , , , , , , , , , , , , , , , </u>	ears back	(e) Four			
1a	Beginning of year balance 4,689,983. 4,499,785. 5,180,783. 3,691,630. 3,718,250							250.			
b	Contributions	15,000.	400 700	600.00			00,000.		107	054	
С	Net investment earnings, gains, and losses	486,808.	400,709.	-680,99	98.	98	39,153.		107,	854.	
d	Grants or scholarships				_						
е	Other expenditures for facilities	205 162	210 511						105	202	
_	and programs	205,162.	210,511.		-			125,292.			
	Administrative expenses	4,986,629.	4 600 002	4 400 70	0.5	E 10	20 702	2			
g	End of year balance	· · · · · ·	4,689,983.	4,499,78	00.	3,10	30,783.	٥,	091,	630.	
2	Provide the estimated percentage of the curr	ent year end balance • 0 0 0 0) neld as:							
a	Board designated or quasi-endowment Permanent endowment 67.6800	<u> </u>	_%								
b	20 2000										
С											
20	The percentages on lines 2a, 2b, and 2c shown Are there endowment funds not in the posses		tion that are hold an	d administered f	or the						
Sa	organization by:	ssion of the organiza	tion that are new an	u auriiriistereu i	OI IIIE			Γ	Yes	No	
	(i) Unrelated organizations?							3a(i)		X	
								3a(ii)	\dashv	X	
h	If "Yes" on line 3a(ii), are the related organiza							3b			
4	Describe in Part XIII the intended uses of the							OD			
	t VI Land, Buildings, and Equipm		William Tarido.								
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Pa	rt X, line	e 10.					
	Description of property	(a) Cost or o	ther (b) Cost	or other	(c) Accı	umulate	d	(d) Book	valu		
		basis (investn				eciation		(-,		_	
	Land										
	Buildings										
С	Leasehold improvements			9,260.	28	39,63	32.	959,628.			
d	Equipment	l l	32	3,783.		1,05				32.	
<u>e</u>	Other		55	3,094.	29	6,91				77.	
Total	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X. line 10c. column	(B))				1,298	3,5:	$\overline{37.}$	

Schedule D (Form 990) 2023

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

498,419.

8,303,969.

(7) (8)(9) LIABILITIES

	dule D (Form 990) 2023 OCEAN CONSERVANCY				7245152 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemer	its Wit	h Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				F2 770 660
1				1	53,779,668.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	4,301,653.		
a b	Net unrealized gains (losses) on investments		434,459.		
	Donated services and use of facilities Recoveries of prior year grants		434,437.		
	Other (Describe in Part XIII.)	1 1			
	Add lines 2a through 2d			2e	4,736,112.
3	Subtract line 2e from line 1			3	49,043,556.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	153,138.		
	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	153,138.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	49,196,694.
Pai	t XII Reconciliation of Expenses per Audited Financial Stateme	nts Wi	th Expenses per F	Retur	'n
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				T
1	Total expenses and losses per audited financial statements			1	52,116,691.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		404 450		
а	Donated services and use of facilities		434,459.		
b	Prior year adjustments				
С	Other losses				
	Other (Describe in Part XIII.)				424 450
е	Add lines 2a through 2d			2e	434,459. 51,682,232.
3	Subtract line 2e from line 1			3	51,682,232.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 . 1	152 120		
	Investment expenses not included on Form 990, Part VIII, line 7b		153,138.		
	Other (Describe in Part XIII.)				152 120
	Add lines 4a and 4b			4c	153,138.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) † XIII Supplemental Information			5	51,835,370.
		\	Ib and Ob. Dart V. line 4	. David	V line O. Dart VI
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit			; Part	X, line 2; Part XI,
111162	zu and 4b, and Part An, intes zu and 4b. Also complete this part to provide any addit	ionai iini	orriation.		
PAF	RT V, LINE 4:				
	·				
OCE	EAN CONSERVANCY'S PERMANENTLY RESTRICTED GI	FTS 2	ARE INTENDED	то	BE HELD
IN	PERPETUITY AND REMAIN INVESTED IN ORDER TO	GEN	ERATE INCOME	TH	AT WILL
					_
SUE	PORT EITHER GENERAL OPERATIONS OR A DONOR	SUPP	ORTED FELLOW	SHI	<u>P</u>
500					1 222 01122
POS	SITION. ANNUAL APPROPRIATIONS FOR EXPENDITU	RE A	RE REVIEWED	AND	APPROVED
DX	MILE DOADD OF DIDECTORG				
ВІ	THE BOARD OF DIRECTORS.				
РΔБ	RT X, LINE 2:				
IAI	AI A, DINE Z.				
THE	E INTERNAL REVENUE SERVICE HAS DETERMINED T	нат '	THE ORGANIZA	TIO	N IS
EXE	EMPT FROM FEDERAL INCOME TAXES UNDER IRC SE	CTIO	N 501(C)(3),	ΕX	CEPT FOR
			, , ,		
TAX	KES ON UNRELATED BUSINESS INCOME. THE ORGAN	IZAT:	ION IS NOT A	_PR	IVATE
FOU	UNDATION UNDER IRC SECTION 509(A)(1). NO TA	X EX	PENSE IS REC	ORD	ED IN THE
332054	1 09-28-23	- <u></u>	·	Sche	dule D (Form 990) 2023

Schedule D (Form 990) 2023 OCEAN CONSERVANCY	23-7245152 Page 5
Part XIII Supplemental Information (continued)	
ACCOMPANYING FINANCIAL STATEMENT FOR THE YEAR ENDED JUNE 3	0, 2024, AS
MUEDE WEDE NO IMPELAMED DISTNESS ASMISSEMES	
THERE WERE NO UNRELATED BUSINESS ACTIVITIES.	
MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND	HAS CONCLUDED
THAT THE ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS	THAT REQUIRE
EITHER RECOGNITION OR DISCLOSURE IN THE ACCOMPANYING FINAN	CIAL STATEMENTS.

SCHEDULE F (Form 990)

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.

2023
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Go to $\underline{www.irs.gov/Form990}$ for instructions and the latest information.

Employer identification number

OCEAN CONSERVANCY

23-7245152

Part I General Info	rmation on A	ctivities Out	side the United States. Comple	ete if the organization answered "Y	es" on				
Form 990, Part IV, line 14b.									
1 For grantmakers. Does									
the grantees' eligibility f	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assistance? X	Yes No				
2 For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	s grants and other assistance outsi	de the				
United States.									
3 Activities per Region. (T	Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)								
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total				
	offices	`employees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	expenditures for and				
	in the region	independent contractors	gram services, investments, grants to recipients located in the region)	describe specific type of service(s) in the region	investments				
		in the region	recipients located in the region)	or service(s) in the region	in the region				
				CONSULTING SERVICES,					
				TRAVEL, MEETINGS &					
CENTRAL AMERICA AND				CONFERENCES,					
THE CARIBBEAN	0	0	PROGRAM SERVICES	PHOTOGRAPHY, SUPPLIES	69,321.				
CENTRAL AMERICA AND			GRANTS TO RECIPIENTS IN THE						
THE CARIBBEAN	0	0	REGION		55,600.				
EAST ASIA AND THE			GRANTS TO RECIPIENTS IN THE						
PACIFIC	0	0	REGION		280,000.				
				CONSULTING SERVICES,					
EAST ASIA AND THE				TRAVEL, MEETINGS &					
PACIFIC	0	0	PROGRAM SERVICES	CONFERENCES, PHOTOGRAPHY	517,349.				
				CONSULTING SERVICES,					
EUROPE (INCLUDING				TRAVEL, MEETINGS &					
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	CONFERENCES, ADVERTISING	389,426.				
DUDODE / TNGL UDING			DANIER TO DESTRUME IN THE						
EUROPE (INCLUDING			GRANTS TO RECIPIENTS IN THE		014 750				
ICELAND & GREENLAND)	0	0	REGION		214,750.				
MIDDLE EAST AND									
NORTH AFRICA	0	0	PROGRAM SERVICES	CONSULTING SERVICES	9,248.				
MOKIN MIKICH	·	•	I ROSIGIA DERVICED	CONDUITING BERVICES	3,240.				
MIDDLE EAST AND			GRANTS TO RECIPIENTS IN THE						
NORTH AFRICA	0	0	REGION		10,400.				
3 a Subtotal	0	0			1,546,094.				
b Total from continuation					, , , , , , = •				
sheets to Part I	1	1			2,388,257.				
c Totals (add lines 3a					, , ,				
and 3b)	1	1			3,934,351.				
,	•								

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

Schedule F (Form 990) 2023

OCEAN CONSERVANCY 23-7245152 Schedule F (Form 990) Page 1 Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) Part I (c) Number of (e) If activity listed in (d) (a) Region (b) Number of (d) Activities conducted in region (f) Total offices employees or expenditures (by type) (i.e., fundraising, is a program service, in the region agents in program services, grants to describe specific type for region recipients located in the region) region of service(s) in region CONSULTING SERVICES, TRAVEL, MEETINGS & NORTH AMERICA PROGRAM SERVICES CONFERENCES 335,585. GRANTS TO RECIPIENTS IN THE NORTH AMERICA 0 0 REGION 1,395,000. GRANTS TO RECIPIENTS IN THE 0 0 REGION SOUTH AMERICA 43,900. CONSULTING SERVICES, TRAVEL, MEETINGS & CONFERENCES SOUTH AMERICA 0 0 PROGRAM SERVICES 121,356. 0 0 SOUTH ASIA PROGRAM SERVICES CONSULTING SERVICES 81,399. GRANTS TO RECIPIENTS IN THE SOUTH ASIA 0 0 REGION 50,479. CONSULTING SERVICES, TRAVEL, MEETINGS & CONFERENCES, SUPPLIES, SUB-SAHARAN AFRICA 0 0 PROGRAM SERVICES PRINTING, POSTAGE & 260,138. GRANTS TO RECIPIENTS IN THE SUB-SAHARAN AFRICA 0 0 REGION 100,400. 1 2,388,257. **Totals**

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of 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)
		CENTRAL AMERICA	INTERNATIONAL					
		AND THE CARIBBEAN	COASTAL/GGGI CLEANUPS	37,600.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA						
		AND THE CARIBBEAN	CLEANUP 2030	8,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA						
		AND THE CARIBBEAN	CLEANUP 2030	10 000.	WIRE TRANSFER	0.	N/A	N/A
		EAST ASIA AND THE						
		PACIFIC	CLEANUP 2030	20,000.	WIRE TRANSFER	0.	N/A	N/A
		EAST ASIA AND THE						
		PACIFIC	CLEANUP 2030	10,000.	WIRE TRANSFER	0.	N/A	N/A
		EAST ASIA AND THE	ZERO WASTE SOLUTIONS					
		PACIFIC	PROJECT	250,000.	WIRE TRANSFER	0.	N/A	N/A
		EUROPE (INCLUDING						
		ICELAND & GREENLAND)	INTERNATIONAL COASTAL/GGGI CLEANUPS	157 750	WIRE TRANSFER	0	N/A	N/A
			COLD TIM, COOT CHAMOID	137,730.	THE TRINGE BY			
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	GHOST GEAR RETRIEVAL	22,000.	WIRE TRANSFER	0.	N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

<u> 26</u> 0

Schedule F (Form 990) 2023

3 Enter total number of other organizations or entities

<u>Schedule F (Form 990)</u> OCEAN CONSERVANCY 23-7245152 Page 2

Schedule	F (Form 990)	OCEAN	CONSERVANCY			23-12	4313Z		Page 2
Part II	Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Nam	ne of organization	(b) IRS code section and EIN (if applicable)	on (d) Purpose of		(e) Amount(f) Manner of(g) Amount of non-cash assistance(h) Descrip of non-cash 				(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND)	CLEANUP 2030	25,000.	WIRE TRANSFER	0.	N/A	N/A
			EUROPE (INCLUDING ICELAND & GREENLAND)	INTERNATIONAL COASTAL CLEANUP	10,000.	WIRE TRANSFER	0.	N/A	N/A
			MIDDLE EAST AND NORTH AFRICA	INTERNATIONAL COASTAL	10,400.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERICA	UNDERWATER RADIATED NOISE REDUCTION PROJECT	25,000.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERICA	GHOST GEAR RETRIEVAL	40,000.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERICA	CENTRAL ARCTIC OCEAN PROJECTS	1280000.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERICA	SHIPPING AND EMISSIONS PROJECT	50,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH AMERICA	CLEANUP 2030	20,500.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH AMERICA	CLEANUP 2030	10,000.	WIRE TRANSFER	0.	N/A	n/A

<u>Schedule F (Form 990)</u> OCEAN CONSERVANCY 23-7245152 Page 2

Scriedule	F (Form 990)	OCEAN	CONSTRANCI			45-14	4J1J2		Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	990), Part II, line	1)	
1 (a) Nan	ne 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				INTERNATIONAL COASTAL CLEANUP	10,400.	WIRE TRANSFER	0.	N/A	N/A
				INTERNATIONAL COASTAL CLEANUP	10,400.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA	GHOST GEAR RETRIEVAL	35,400.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN						
				GHOST GEAR RETRIEVAL	40,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA	CLEANUP 2030	10,000.	WIRE TRANSFER	0.	N/A	N/A
				INTERNATIONAL COASTAL				INTERNATIONAL	
			AFRICA	CLEANUP	10,400.	WIRE TRANSFER	0.	COASTAL CLEANUP	N/A
			SUB-SAHARAN AFRICA	GHOST GEAR RETRIEVAL	40,000.	WIRE TRANSFER	0.	N/A	N/A

Schedule F (Form 990) 2023 OCEAN CONSERVANCY 23-7245152 Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance

Schedule F (Form 990) 2023 Page 4 Part IV Foreign Forms Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes" 1 the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Yes X No Corporation (see the Instructions for Form 926) 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 Yes X No U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990) 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 the Instructions for Form 5471) 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 Yes X No Fund (see the Instructions for Form 8621) 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 Yes X No Foreign Partnerships (see the Instructions for Form 8865) 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

the Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2023

X No

Yes

Schedule F (Form 990) 2023

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

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 instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization **Employer identification number** 23-7245152 OCEAN CONSERVANCY Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Solicitation of government grants X Internet and email solicitations X Phone solicitations Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) NEWPORT ONE INC. - 21 Yes No RAILROAD, DUXBURY, MA Х 02332 DIRECT MAIL CONSULTING 7,029,035 352,000 6,677,035. LAUTMAN MASKA NEILL & COMPANY 1730 RHODE ISLAND AVENUE DIGITAL FUNDRAISING Х 2,818,393 156,000 2,662,393. 9,847,428. 508 000. 9 339 428 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration AL, AK, AR, CA, CO, CT, FL, DC, GA, HI, IL, KS, KY, LA, ME, MD, MA, MN, MO, MS, NE, NV, NH, NJ, NM NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2023

Schedule G (Form 990) 2023

OCEAN CONSERVANCY

23-7245152 Pa	age 2
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Pa	ırt	II Fundraising Events. Complete if the of fundraising event contributions and ground fundraising event contributions and ground fundraising event contributions.				
		or iditalising event contributions and gre	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
an.			(event type)	(event type)	(total number)	col. (c))
Revenue						
Rev	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
S	5	Noncash prizes				
ense	6	Rent/facility costs				
Direct Expenses	7	' Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through	9 in column (d)			
Da		Net income summary. Subtract line 10 from li				
Pa	ır L		answered "Yes" on Form	1990, Part IV, line 19, or	reported more than	
_		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add
Revenue		Cross revenue	(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
_	_	Gross revenue				
ses	2	! Cash prizes				
=xper	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
а	Is	nter the state(s) in which the organization condu the organization licensed to conduct gaming ac "No," explain:	tivities in each of these	states?		Yes No
		ere any of the organization's gaming licenses re				Yes No
33208	32 0				Sche	edule G (Form 990) 2023

Sch	edule G (Form 990) 2023 OCEAN CONSERVANCY 23-7	245	152	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			,-
•	Enter the matter and address of the person time property the organization organization of garming, openial events about and records.			
	Name			
	Address			
	, ideal cool			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🔲	Yes	☐ No
h	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
D	of gaming revenue retained by the third party \$			
_	If "Yes," enter name and address of the third party:			
·	in res, enter hame and address of the tillid party.			
	Namo			
	Name			
	Addraga			
	Address			
46	Coming manager information			
16	Gaming manager information:			
	Nama			
	Name			
	Gaming manager compensation \$			
	Gaming manager compensation \$			
	Description of services provided			
	Description of services provided			
	Director/officer Employee Independent contractor			
	birector/officer Employee independent contractor			
47	Mandaton distributions			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		Vaa	□ Na
	retain the state gaming license?		162	NO
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Pa	organization's own exempt activities during the tax year \$ rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	+ 111 liv	200 0 0	0h 10h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	L III, III	165 5, 3	9D, 10D,
	13b, 13c, 10, and 17b, as applicable. Also provide any additional information. See instructions.			
מת.	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS			
<u>5C.</u>	MEDOLE G, FART I, DINE 2D, DIST OF TEN MIGHEST FAID FONDRAISERS	•		
(I) NAME OF FUNDRAISER: LAUTMAN MASKA NEILL & COMPANY			
<u>/ </u>) NAME OF FONDRAISER. DAUTMAN MASKA NEIDD & COMPANI			
/т	\ ADDDECC OF FINDDATCED.			
<u>(I</u>) ADDRESS OF FUNDRAISER:			
17	20 DUODE TOLAND AVENUE NW WACHTNOMON DO 20026			
<u> </u>	30 RHODE ISLAND AVENUE NW, WASHINGTON, DC 20036			

nedule (a (Form 990) OCEAN CONSERVANCY 23-7245152 Page 4 art IV Supplemental Information (continued)

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

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.

2023

Open to Public Inspection

Name of the organization							Employer identification number
OCEAN CON							23-7245152
Part I General Information on Grants a	nd Assistance						
 Does the organization maintain records to criteria used to award the grants or assisted Describe in Part IV the organization's production. 	tance?				_		on X Yes No
Part II Grants and Other Assistance to I recipient that received more than \$					anization answered "\	Yes" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
INUIT CIRCUMPOLAR COUNCIL ALASKA 3900 ARCTIC BLVD, SUITE 203 ANCHORAGE, AK 99503	92-0091959	501(C)(3)	865,000.	0.	N/A	N/A	FISH CONSERVATION
FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION INC 11200 SW 8TH STREET MARC 531 - MIAMI, FL 33199-2516	23-7047106	501(C)(3)	143,145.	0.	N/A	N/A	CONSERVATION SCIENCE
GLOBAL RESILIENT CITIES NETWORK 6 WEST 48TH STREET, 10TH FLORR NEW YORK, NY 10036	85-0990988	501(C)(3)	100,280.	0.	N/A	N/A	OCEAN CONSERVATION
ASOCIACION INTERAMERICANCA PARA LA DEFENSA DEL AMBIENTE (AIDA) - 50 CALIFORNIA STREET, SUITE 500 - SAN FRANCISCO, CA 94111	94-3292116	501(C)(3)	97,894.	0.	N/A	N/A	OCEAN CONSERVATION
YAKUTAT TLINGLT TRIBE PO BOX 418 YAKUTAT, AK 99689	92-0170735	7871	96,200.	0.	N/A	N/A	OCEAN CONSERVATION
CENTRAL COUNCIL TLINGIT & HAIDA INDIAN TRIBES OF ALASKA - PO BOX 25500 - JUNEAU, AK 99802	92-0036505	7871	82,900.	0.	N/A	N/A	OCEAN CONSERVATION
2 Enter total number of section 501(c)(3) ar 3 Enter total number of other organizations	nd government org	ganizations listed in th	, ,		F11 77	1	43.

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

Schedule I (Form 990) 2023

Schedule I (Form 990) OCEAN CONSERVANCY

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- Faye
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUGET SOUNDKEEPER ALLIANCE 130 NICKERSON STREET, SUITE 107 SEATTLE, WA 98109	91-1285783	501(C)(3)	75,000.	0.	N/A	N/A	INTERNATIONAL COASTAL
ALASKA CONSERVATION FOUNDATION 1227 WEST 9TH AVENUE, SUITE 300 ANCHORAGE, AK 99501	92-0061466	501(C)(3)	75,000.	0.	N/A	N/A	COMMUNITY OUTREACH/EDUCATION
NATIVE PEOPLES ACTION COMMUNITY FUND - PO BOX 210914 - ACHORAGE, AK 99521	83-2072085	501(c)(3)	70,500.	0.	N/A	N/A	COMMUNITY OUTREACH/EDUCATION
BLACK IN MARINE SCIENCE 522 W RIVERSIDE AVENUE, SUITE N SPOKANE, WA 99201	86-1303144	501(C)(3)	50,000.	0.	N/A	N/A	OCEAN CONSERVATION
EARTH ISLAND INSTITUTE 2150 ALSTON WAY, SITE 460 BERKELEY, CA 94704	90-0883785	501(C)(3)	40,000.	0.	N/A	N/A	COMMUNITY OUTREACH/EDUCATION
EASTERN WOODLANDS PROTECTORS 326 SPARTAN ROAD WILMINGTON, NC 28405	88-4384533	501(c)(3)	40,000.	0.	N/A	N/A	OCEAN CONSERVATION
GREEN THE CHURCH 2323 BROADWAY OAKLAND, CA 94612	26-4726567	501(C)(3)	40,000.	0.	N/A	N/A	COMMUNITY OUTREACH/EDUCATION
KNIK TRIBE PO BOX 871565 WASILLA, AK 99687	92-0076275	7871	40,000.	0.	N/A	N/A	COMMUNITY OUTREACH/EDUCATION
ARIZONA STATE UNIVERSITY OFFICE OF RESEARCH AND SPONSORED PROJECTS, PO BOX 876011 - TEMPE , AZ	86-0196696	STATE GOVERNMENT	38,749.	0.	N/A	N/A	FISH CONSERVATION

Schedule I (Form 990)

23-7245152

Page 1

Schedule I (Form 990) OCEAN CONSERVANCY 23-7245152

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DREAM IN GREEN							
66 W. FLAGLER STREET, 9TH FLOOR							COMMUNITY
MIAMI, FL 33130	20-5196010	501(C)(3)	36,000.	0	N/A	N/A	OUTREACH/EDUCATION
ALEUT COMMUNITY OF ST. PAUL ISLAND	20 3130010	301(0)(3)	30,000.	· ·	14/11	147.21	DOTREMENT EDUCATION
TRIBAL GOVERNMENT OF ST. PAUL -							
4720 BUSINESS PARK BLVD, SUITE G42	92-0060403	7071	35,000.	_	N/A	N/A	OCEAN CONSERVATION
- ANCHORAGE, AK 99503	92-0000403	7671	35,000.	0.	N/A	N/A	OCEAN CONSERVATION
NATIVE CONSERVANCY							
PO BOX 456							
	20 0121766	E01/a)/2)	25 000	0	N/A	AT / 3	OCEAN COLENCE
CORDOVA, AK 99574	30-0131766	501(C)(3)	25,000.	0.	N/A	N/A	OCEAN SCIENCE
SDEEN 2 0							
GREEN 2.0							
1730 RHODE ISLAND AVENUE NW, SUITE	46 500000	F01 (a) (2)					
WASHINGTON, DC 20036	46-5220283	501(C)(3)	20,000.	0.	N/A	N/A	GENERAL SUPPORT
OCEAN RISK AND RESILIENCE ACTION							
ALLIANCE, INC - 2336 WISCONSIN							
AVENUE NW, #32043 - WASHINGTON, DC				_			
20007	83-3580499	501(C)(3)	20,000.	0.	N/A	N/A	OCEAN CONSERVATION
BLACK SURF SANTA CRUZ							
218 OCEAN STREET							
ANTA CRUZ, CA 95060	87-4556850	501(C)(3)	20,000.	0.	N/A	N/A	OCEAN CONSERVATION
DIVING WITH A PURPOSE &							
DEVELOPMENT GROUP INC DBA DWP -							
1309 JACKSON STREET - NASHVILLE,							COMMUNITY
TN 37208	90-0883785	501(C)(3)	20,000.	0.	N/A	N/A	OUTREACH/EDUCATION
INDIGENOUS PEOPLE'S COUNCIL FOR							
MARINE MAMMALS - 800 E. DIMOND							
BLVD, STE 3-615 - ACNCHORAGE, AK							
99515	26-4247945	501(C)(3)	20,000.	0.	N/A	N/A	OCEAN CONSERVATION
MINORITIES IN AQUACULTURE							
117 PARRIS LANE, #G30							
EASTON, MD 21601	85-1764271	501(C)(3)	20,000.	0.	N/A	N/A	OCEAN CONSERVATION

Schedule I (Form 990)

Page 1

Schedule I (Form 990) OCEAN CON							23-7245152 Page
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OCEANALASKA MARINE SCIENCE CENTER 2417 TONGASS AVENUE, SUITE 111-277 WRANGELL, AK 99901	94-3194998	501(C)(3)	20,000.	0.	N/A	N/A	COMMUNITY OUTREACH/EDUCATION
UNIVERSITY OF MIAMI DBA OFFICE OF RESEARCH ADMINISTRATION - PO BOX 405803 - ATLANTA, GA 30384	59-0624458	501(C)(3)	20,000.	0.	N/A	N/A	COMMUNITY OUTREACH/EDUCATION
AINA MOMONA PO BOX 1687 KAUNAKAKAI, HI 96748	82-1366588	501(C)(3)	15,000.	0.	N/A	N/A	OCEAN SCIENCE
SOL MARGIN FISHING & CONSERVATION FOUNDATION - 2220 COUNTY ROAD 210 W, SUITE 108 #204 - ST. JOHN'S , FL 32095	81-4860257		15,000.		N/A	N/A	COMMUNITY OUTREACH/EDUCATION
CENTER FOR COASTAL STUDIES, INC. 5 HOLLOWAY AVENUE PROVINCETOWN, MA 02657	04-2609788	501(C)(3)	13,700.	0.	N/A	N/A	OCEAN CONSERVATION
LIVE HEALTHY LITTLE HAVANA 515 SW 12TH AVENUE, SUITE 525 MIAMI, FL 33130	83-1880728	501(C)(3)	13,000.	0.	N/A	n/A	COMMUNITY OUTREACH/EDUCATION
SOCIETY OF THE FLORA, FAUNA, AND FRIEND - 7531 MIRAMAR PARKWAY - MIRAMAR, FL 33023	88-1813398	501(C)(3)	13,000.	0.	N/A	N/A	COMMUNITY OUTREACH/EDUCATION
TI AYITI PREPAREDENESS AND RELIEF INSTITUTION (TAPARI) - 122 NE 78TH STREET, #1 - MIAMI , FL 33138	85-1538893	501(C)(3)	13,000.	0.	N/A	N/A	COMMUNITY OUTREACH/EDUCATION
MARIPOSA DR FOUNDATION 421 N. AURORA STREET ITHACA, NY 14850	27-0726866	501(C)(3)	10,000.	0.	N/A	N/A	INTERNATIONAL COASTAL

Schedule I (Form 990) OCEAN CONSERVANCY 23-7245152

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACKS OF THE CHESAPEAKE							
FOUNDATION - 1125 WEST STREET,							
SUITE 200 - ANNAPOLIS, MD 21401	52-2278700	501(C)(3)	10,000.	0.	N/A	N/A	OCEAN SCIENCE
BRIDGE THE GAP OUTREACH CENTER							
1239 CAROLINA ROAD							COMMUNITY
SUFFOLK , VA 23434	88-1471323	501(C)(3)	10,000.	0.	N/A	N/A	OUTREACH/EDUCATION
ENVIRONMENTAL DEFENSE FUND							
257 PARK AVENUE SOUTH, 17TH FLOOR							
NEW YORK, NY 10010	11-6107128	501(C)(3)	10,000.	0.	N/A	N/A	OCEAN SCIENCE
GREATER WORKS FOUNDATION							
813 FORREST DRIVE, SUITE B							COMMUNITY
NEWPORT NEWS, VA 23606	82-2393182	501(C)(3)	10,000.	0.	N/A	N/A	OUTREACH/EDUCATION
HAMPTON ROADS GREEN HOUSE PROJECT							
LLC - 863 CLOVERLEAF LANE -							COMMUNITY
NEWPORT NEWS, VA 23601	30-0990681	501(C)(3)	10,000.	0.	N/A	N/A	OUTREACH/EDUCATION
NAMETUR VIII AGR OR RVAV MRARIMIONAL							
NATIVE VILLAGE OF EYAK TRADITIONAL							COMMUNITY
COUNCIL - PO BOX 1388 110	92-0061041	7071	10 000	0	N/A	NT / 7	
NICHOLOFF WAY - CORDOVA, AK 99574	92-0001041	7671	10,000.	0.	N/A	N/A	OUTREACH/EDUCATION
CORPORATION DBA MATHOMAK VILLAGE							
TRIBE - 4814 OLD STAGE HWY -							COMMUNITY
	71-0993934	501/C\/3\	10,000.	_	N/A	N/A	OUTREACH/EDUCATION
MITHFILED, VA 23430	71-0993934	301(C/(3/	10,000.	0.	N/A	N/A	DOTREACH/ EDUCATION
COMMERCIAL FISHERIES RESEARCH							
FOUNDATION - PO BOX 278 -							
SAUDERSTOWN, RI 02874	86-1116341	501(C)(3)	8,100.	n	N/A	N/A	OCEAN CONSERVATION
ALOND TOTAL ALOND THE STATE OF	20 1110341	301(0)(3)	0,100.				COMPLETE TON
FRIENDS OF PADRE, INC.							
PO BOX 18108							INTERNATIONAL COASTAL
CORPUS CHRISTI, TX 78418	38-3760883	501(C)(3)	7,500.	0.	N/A	N/A	CLEANUP

Schedule I (Form 990)

Page 1

Schedule I (Form 990) OCEAN CONSERVANCY 23-7245152

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST ALASKANS INSTITUTE (FAI) 606 E STREET, SUITE 200							
ACHORAGE, AK 99501	92-0174854	501(C)(3)	5,181.	0.	N/A	N/A	OCEAN CONSERVATION

Page 1

Schedule I (Form 990) 2023 OCEAN CONSERVAN	CY				23-7245152	Page 2
Part III Grants and Other Assistance to Domestic Individuals. Part III can be duplicated if additional space is needed.	. Complete if the	organization answ	ered "Yes" on Form 9	90, Part IV, line 22.		
(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 a	ssistance
Part IV Supplemental Information. Provide the information requ	uired in Part I, line	e 2; Part III, column	n (b); and any other ac	Iditional information.		
PART I, LINE 2:						
CLEANUP GRANTS (TYPICALLY LESS THAN	1 \$15,000) OCEAN (CONSERVANCY	REQUIRES A		
BASIC FINANCIAL REPORT CERTIFYING	THE FUNDS	WERE USEI	D WHOLLY FO	R THE		
INTENDED PURPOSE OF THE GRANT.						
RESEARCH GRANTS OCEAN CONSERVANCY	REQUIRES	SEMIANNU	AL FINANCIA	L AND		
PROGRESS REPORTS.	~ ~ ~					
COLLABORATIVE AGREEMENTS OCEAN CON	NSERVANCV	WORKS COI	I.I.ABORATIVE	I.Y WITH THE		

Schedule I (Form 990) OCEAN CONSERVANCY	23-7245152	Page 2
Schedule I (Form 990) OCEAN CONSERVANCY Part IV Supplemental Information		Ŭ
GRANTEE ON THE ACHIEVEMENT OF GRANT OUTCOMES AND OBJECTIVES,	AND MONITOR	RS
PROGRAM ACTIVITIES THROUGHOUT THE PROGRAM'S IMPLEMENTATION.	SEMIANNUAL	AND
FINAL FINANCIAL REPORTS ARE REQUIRED.		

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

OCEAN CONSERVANCY

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

D	Int I Questions Regarding Compensation	23-/2431	7 4	
F	inti Questions negatiting compensation		Yes	No
10	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		168	No
Ia	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 us	.		
	Travel for companions Payments for business use of personal residence. Tay indemnification and green up no ments.	e		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	.e\		
	Discretionary spending account Personal services (such as maid, chauffeur, che	et)		
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 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.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation commi	ttee		
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?	41		Х
	Participate in or receive payment from an equity-based compensation arrangement?			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?			X
b	Any related organization?	<u>5b</u>		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		X
	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	\perp	Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		
	Panarywork Paduction Act Nation can the Instructions for Form 990	Schedule I (For	000	1 2022

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

Schedule J (Form 990) 2023

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-MISC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JANIS SEARLES JONES	(i)	458,831.	210,000.	8,600.	19,191.	26,703.	723,325.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SARAH HUMPHRIES	(i)	298,867.	0.	1,770.	18,168.	22,782.	341,587.	0.
CHIEF OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) EMILY WOGLOM	(i)	291,433.	0.	1,530.	17,469.	20,794.	331,226.	0.
EVP	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KATHERINE ANDREWS	(i)	272,133.	0.	2,370.	16,566.	10,921.	301,990.	0.
CHIEF OF STRATEGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KENNETH DONALDSON	(i)	250,070.	0.	1,770.	15,285.	8,870.	275,995.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CHRIS DORSETT	(i)	232,618.	0.	1,770.	14,479.	26,703.	275,570.	0.
VP, CONSERVATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ADRIENNE LOFTIN	(i)	248,229.	0.	2,370.	15,180.	8,870.	274,649.	0.
CHIEF PEOPLE & CULTURE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) GEORGE LEONARD	(i)	195,766.	0.	3,279.	12,065.	32,853.	243,963.	0.
CHIEF SCIENTIST	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MALISSA LASH	(i)	189,487.	0.	1,520.	11,872.	32,857.	235,736.	0.
VP, RESOURCE DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) JEFFREY WATTERS	(i)	194,485.	0.	1,373.	11,872.	20,938.	228,668.	0.
VP, EXTERNAL AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) SCOTT HIGHLEYMAN	(i)	193,605.	0.	3,044.	12,108.	18,474.	227,231.	0.
SENIOR ADVISOR, OCEAN CONSERVANCY	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) SARAH BEIDERMAN	(i)	175,927.	0.	1,342.	10,771.	8,870.	196,910.	0.
CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023 OCEAN CONSERVANCI	Z3-/Z4313Z	Page 3
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 7:		
THE BOARD OF DIRECTORS CONSIDERS THE CEO'S BONUS AS AN INTEGRAL PART OF		
TOTAL COMPENSATION. BOARD LEADERSHIP CONSIDERS A MULTITUDE OF		
ORGANIZATIONAL HEALTH AND PERFORMANCE FACTORS WHEN DETERMINING THE CEO'S		
BONUS FOR A GIVEN YEAR, INCLUDING, BUT NOT LIMITED TO, THE CURRENT AND		
PROJECTED FINANCIAL HEALTH OF THE ORGANIZATION, CONSERVATION OBJECTIVES		
MET, PROGRAMMATIC METRICS, COMMUNICATIONS METRICS, STRATEGY IMPLEMENTATION,		
STAFFING GOALS, CURRENT YEAR FINANCIAL PERFORMANCE, TOTAL CEO COMPENSATION		
PACKAGES FOR SIMILARLY SITUATED ORGANIZATIONS, ETC.		

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 instructions and the latest information.

Employer identification number 23-7245152

	OCEAN CONSER	VANCY				23-	7245	152	
Pai	t I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	r	Method of noncash contri		•	s
1	Art - Works of art	Х	10	48,375.	FMV	7			
2	Art - Historical treasures			-					
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 - Publicly traded	Х	50	255,186.	FMV	7			
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous	Х	742	13,507.	FMV	7			
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organiz	_	•						
	for which the organization completed Form 828	33, Part V, D	onee Acknowledge	ement 29				0	
								Yes	No
30a	During the year, did the organization receive by			· · · · · · · · · · · · · · · · · · ·		that it			
	must hold for at least 3 years from the date of t								
	exempt purposes for the entire holding period?						30a		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	•	· ·	•	tions?		. 31	X	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash					
	contributions?						32a		X
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is che	cked,				
	describe in Part II.								

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

Schedule M (Form 990) 2023

Schedule M (Form 990) 2023 OCEAN CONSERVANCY	23-7245152	Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, ar is reporting in Part I, column (b), the number of contributions, the number of items received, or a this part for any additional information.	nd 33, and whether the organizati combination of both. Also compl	on ete
SCHEDULE M, LINE 32B:		
ALL NON-STANDARD CONTRIBUTIONS ARE REVIEWED BY THE CHIE	F DEVELOPMENT	
OFFICER. IN CONSULTATION WITH THE CFO, THE CHIEF DEVELO		
WILL DETERMINE IF IT IS IN THE BEST INTEREST OF THE ORG		
ACCEPT THE GIFT.		
	_	
	_	

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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 Form 990-EZ.

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

2023
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: CHALLENGES. TOGETHER, WE CREATE EVIDENCE-BASED SOLUTIONS FOR A HEALTHY OCEAN AND THE WILDLIFE AND COMMUNITIES THAT DEPEND ON IT. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: AND PRODUCTS. WE FOSTER BEST PRACTICES AMONG KEY STAKEHOLDERS TO CREATE INNOVATIVE APPROACHES TO PREVENT AND REMOVE GHOST FISHING GEAR -NEW THE SINGLE DEADLIEST FORM OF PLASTIC IN THE OCEAN. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: MARINE ECOSYSTEM PROTECTION: OCEAN CONSERVANCY WORKS AT THE LOCAL, FEDERAL AND INTERNATIONAL LEVEL TO ADVANCE CONSERVATION SOLUTIONS. USING THE BEST AVAILABLE EVIDENCE AND COMMUNITY KNOWLEDGE, TO PROTECT ECOSYSTEMS AND THE COMMUNITIES THAT DEPEND ON THEM. WE ADVANCE PROTECTIONS FOR CULTURALLY AND ECOLOGICALLY IMPORTANT ARCTIC ECOSYSTEMS, WORKING IN PARTNERSHIP WITH TRIBES AND INDIGENOUS WE WORK AT THE REGIONAL, NATIONAL AND INTERNATIONAL LEVEL COMMUNITIES. TO REBUILD ECOLOGICALLY IMPORTANT FISHERIES, PARTNERING WITH FISHERMEN AND LOCAL COMMUNITIES TO ADVANCE DURABLE PROTECTIONS THROUGH INNOVATIVE APPROACHES TO MANAGEMENT AND POLICY OUTCOMES IN THE FACE OF BIODIVERSITY LOSS AND CLIMATE CHANGE. EXPENSES \$ 4,769,019. INCLUDING GRANTS OF \$ 486,328. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE OFFICERS OF THE BOARD. THE

EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE THE AUTHORITY OF THE BOARD

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization OCEAN CONSERVANCY **Employer identification number** 23-7245152

BETWEEN MEETINGS OF THE BOARD, EXCEPT AS OTHERWISE EXPRESSLY PROVIDED FOR IN THE BYLAWS, ARTICLES OF INCORPORATION, OR BY LAW.

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 IS PREPARED BY AN OUTSIDE FIRM. THE CFO AND THE DIRECTOR OF FINANCE PERFORM DETAILED REVIEWS OF THE 990, RECONCILE ANY QUESTIONS AND MODIFY THE RETURN IF NECESSARY. THE 990 IS THEN FORWARDED TO THE FINANCE COMMITTEE FOR FURTHER QUESTIONS. AFTER THEIR REVIEW AND ANY ADJUSTMENTS IF NECESSARY ARE MADE, THE 990 IS FORWARDED TO THE ENTIRE BOARD AND THEN FILED WITH THE 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.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD SETS THE PRESIDENT & CEO'S SALARY BASED ON ITS EVALUATION OF THEIR PERFORMANCE. THE BOARD TAKES INTO ACCOUNT MARKET SURVEYS AND THE

Schedule O (Form 990) 2023 Name of the organization	Employer identification number
OCEAN CONSERVANCY	23-7245152
ORGANIZATION'S PERFORMANCE AND FINANCIAL POSITION. THE EXE	CUTIVE COMMITTEE
OF THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE COMPENS	SATION OF OTHER
OFFICERS AND KEY EMPLOYEES USING EXTERNALLY PREPARED COMPA	RABILITY DATA.
THE PROCESS DESCRIBED HERE WAS LAST COMPLETED IN 2023.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AL, AZ, CA, FL, GA, HI, IL, KS, KY, LA, MD, MA, MI, MN, MS, NH, NJ, NY, NC, N	M,OK,OR,PA,RI,SC
TN, UT, VA, WI	
FORM 990, PART VI, SECTION C, LINE 19:	
OCEAN CONSERVANCY'S AUDITED FINANCIAL STATEMENTS, GOVERNIN	IG DOCUMENTS AND
CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING FEES:	
PROGRAM SERVICE EXPENSES	8,035,995.
MANAGEMENT AND GENERAL EXPENSES	623,499.
FUNDRAISING EXPENSES	519,804.
TOTAL EXPENSES	9,179,298.
CAGING SERVICES:	
PROGRAM SERVICE EXPENSES	103,205.
MANAGEMENT AND GENERAL EXPENSES	8,007.
FUNDRAISING EXPENSES	6,676.
TOTAL EXPENSES	117,888.
PHOTOGRAPHY/VIDEOGRAPHY:	
PROGRAM SERVICE EXPENSES	75,771.
332212 11-14-23	Schedule O (Form 990) 2023

Schedule O (Form 990) 2023	Page 2
Name of the organization OCEAN CONSERVANCY	Employer identification number 23-7245152
MANAGEMENT AND GENERAL EXPENSES	5,879.
FUNDRAISING EXPENSES	4,901.
TOTAL EXPENSES	86,551.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	9,383,737.
FORM 990, PART XII, LINE 2C:	
NO CHANGE FROM PRIOR YEARS.	

Schedule O (Form 990) 2023

Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or **Print** 23-7245152 OCEAN CONSERVANCY File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 1300 19TH ST NW, 8TH FLOOR return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. 20036 WASHINGTON, DC Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 05 Form 8870 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of KENNETH DONALDSON 1300 19TH ST NW STE 800 - WASHINGTON, DC 20036 Telephone No. 202-429-5609 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 TINs of all members the extension is for. I request an automatic 6-month extension of time until $\,$ MAY $\,$ $\,$ $\,$ $\,$ $\,$ $\,$ 15 , 20 25 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 X tax year beginning JUL 1 , 20 $\, {\color{red} \, {\color{blue} \, 23}} \,$, and ending $\, {\color{blue} \, {\color{blue} \, {\color{blue} \, 23}}} \,$ JUN 30 . If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3h 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

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

Form 8868 (Rev. 1-2024)