### **990**

## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

A	For the	2022 calend	dar year, or tax year beginning ${ m Jul} \ 1$ , 2022, and ending	ıg Ju	n 30	<b>, 20</b> 23					
В	Check if	applicable:	C Name of organization The Ocean Foundation		D Emplo	yer identification number					
	Address	change	Doing business as	usiness as 71-0863908							
	Name ch	nange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Teleph	one number					
	Initial ret	:urn	1320 19th Street NW 5th Floor (202)887-8996								
	Final retu	turn/terminated City or town, state or province, country, and ZIP or foreign postal code									
X	Amende	d return	Washington, DC 20036		<b>G</b> Gross	receipts \$19,055,546.					
_	Applicati	ion pending	F Name and address of principal officer:	H(a) Is this a gro		r subordinates? Yes X No					
		, ,	Mark J. Spalding, 1320 19th Street NW 5th Floor, Washington, DC 20	036 <b>H(b)</b> Are all su	ubordinate	es included?  Yes No					
ı	Tax-exe	mpt status:	▼ 501(c)(3)			st. See instructions.					
J	Website	www.o	ceanfdn.org	H(c) Group ex	kemption	number					
K	Form of o	organization: X	Corporation Trust Association Other L Year of forms	ation: 2001	M State	of legal domicile: DC					
Pa	art I	Summa	ry								
	1	Briefly des	cribe the organization's mission or most significant activities: As the onli	y community foundation	for the ocea	an, The Ocean Foundation's mission					
e S			ove global ocean health, climate resilience, and the blue economy. T								
Jan			nities in which we work to the informational, technical and financial resources								
/err	2	Check this	box if the organization discontinued its operations or disposed of	of more than 25	% of its	s net assets.					
9	3	Number of	voting members of the governing body (Part VI, line 1a)		3	14					
જ	4	Number of	independent voting members of the governing body (Part VI, line 1b	)	4	14					
ties	5	Total numb	per of individuals employed in calendar year 2022 (Part V, line 2a)		5	50					
Activities & Governance	6	Total numb	per of volunteers (estimate if necessary)		6	250					
Ac	7a	Total unrela	ated business revenue from Part VIII, column (C), line 12		7a	0.					
	b	Net unrelat	ted business taxable income from Form 990-T, Part I, line 11		7b	0.					
				r	Current Year						
ø	8	Contribution	ons and grants (Part VIII, line 1h)	623.	17,221,692.						
Revenue	9	Program se	ervice revenue (Part VIII, line 2g)	529.	1,429,068.						
ě	10	Investment	t income (Part VIII, column (A), lines 3, 4, and 7d)	042.	43,246.						
ш	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	38,	340.	160,733.					
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,796,	534.	18,854,739.					
	13	Grants and	I similar amounts paid (Part IX, column (A), lines 1–3)	1,745,	728.	3,514,837.					
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)								
S	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5-10)	3,611,	904.	4,446,144.					
Expenses	16a		al fundraising fees (Part IX, column (A), line 11e)								
xbe	b	Total fundr	raising expenses (Part IX, column (D), line 25) 1,000,324.								
Ш	17	Other expe	enses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,183,	840.	7,908,965.					
	18	Total expe	nses. Add lines 13-17 (must equal Part IX, column (A), line 25) .	11,541,	472.	15,869,946.					
	19	Revenue le	ess expenses. Subtract line 18 from line 12	255,	062.	2,984,793.					
Net Assets or Fund Balances				Beginning of Curre		End of Year					
set	20	Total asset	ts (Part X, line 16)	16,715,	684.	21,935,882.					
at As	21		ties (Part X, line 26)	1,060,	784.	3,128,393.					
	22		or fund balances. Subtract line 21 from line 20	15,654,	900.	18,807,489.					
_	ırt II		re Block								
			I declare that I have examined this return, including accompanying schedules and state. Declaration of preparer (other than officer) is based on all information of which preparer.			my knowledge and belief, it is					
	, 001100	Tana complete	Section of property (ethor than emost) to become an am morniation of which proper								
Sig	ın	Ciamatum of	are J. Spalding		/01/2	024					
_		Signature of		Date							
Here Mark J Spalding, President											
		1 7	name and title	Data		DTIN					
Pa	id	1		Date	Check L	oved POOLOFC40					
Pre	pare	er <del></del>	L. Fisher	11/01/2024							
,			1 1			-0 1064100					
	e Onl	Lives's man		Firm's		52-1864182 02)547-2727					

Page **2** 

Part	·
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  As the only community foundation for the ocean, The Ocean Foundation's mission is to improve global ocean health, climate resilience, and the blue economy. We create partnerships to connect all peoples
	in the communities in which we work to the informational, technical and financial resources they need to achieve their ocean stewardship goals.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	(Code: )(Expenses \$ 2,290,036.including grants of \$ 427,273.)(Revenue \$ 397,134.)  PROTECTING SPECIES OF CONCERN -  For many of us, our first interest in the oceans began with an interest in the large animals that call it home. Whether it be the awe inspired by a gentle humpback whale, the undeniable charisma of a curious dolphin, or the ferocious gaping maw of a great white shark, these animals are more than just the ambassadors of the sea. These apex predators and keystone species keep the ocean ecosystem in balance, and the health of their populations often serves as an indicator for the health of the oceans as a whole.
4b	(Code:)(Expenses \$ 3,403,348. including grants of \$ 1,374,115.)(Revenue \$ 201,088.)  EXPANDING OCEAN LITERACY AND PUBLIC AWARENESS -  One of the most significant barriers to progress in the marine conservation sector is a lack of real understanding about the vulnerability and connectivity of ocean systems. It is easy to think of the oceans as vast, almost unlimited sources of food and recreation with abundant animals, plants, and protected spaces. Thus, it can be difficult to see the destructive consequences of human activities along the coast and below the surface. This lack of awareness creates a significant need for programs that effectively communicate how the health of our oceans relates to climate change, the global economy, biodiversity, human health, and our quality of life.
4c	(Code: )(Expenses \$ 5,525,123. including grants of \$ 744,734.)(Revenue \$ 186,175.)  PROTECTING MARINE HABITATS AND SPECIAL PLACES -  Our oceans are a mosaic of special places, from the bustling vibrancy  of coral reefs to the tidal pools of the rocky coasts to the  stark, glistening beauty of the frozen Arctic. These habitats and  ecosystems are more than just picturesque; they all provide vital  benefits to the health of the ocean, the plants and animals  that live in them, and the human communities that depend on them.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 2,486,655. including grants of \$ 968,716.) (Revenue \$ 73,322.)
4e	Total program service expenses 13,705,162.

Part	Checklist of Required Schedules			age •
rart	Officerist of nequired scriedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	×	-110
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	×	
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		×
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	×	
6	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	5		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	×	×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	×	
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	×	
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		×
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? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d	×	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	×	
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	×	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a	.,	×
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	×	
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	×	
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		×
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		×
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		×
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		×
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		

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

Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	×	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	23	×	
	through 24d and complete Schedule K. If "No," go to line 25a	24a		×
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		×
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		×
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% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
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		×
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? <i>If</i> "Yes," complete Schedule L, Part IV	28a		×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29 30	Did the organization receive more than \$25,000 in non-cash 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 contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30	×	×
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		×
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	×	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	×	

Part	V Statements Regarding Other IRS Filings 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 50			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		
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		×
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		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
C	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		×
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		×
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?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	76		_
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		×
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		×
b 10	Section 501(c)(7) organizations. Enter:	90		
а	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 . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
40	against amounts due or received from them.)	1.0		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b 15	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b		
IJ	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		
	If "Yes," see the instructions and file Form 4720, Schedule N.	15		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
-	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.			

Part VI

Part '	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	struci	tions.
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent . 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	×	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		×
4	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? .	5		×
6	Did the organization have members or stockholders?	6		×
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		×
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		×
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	×	
b	Each committee with authority to act on behalf of the governing body?	8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>			
Casti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	9	- do \	<u>×</u>
Secu	on B. Policies (This Section B requests information about policies not required by the internal never	ue Co	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	×
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	×	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	×	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	×	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	×	
13	Did the organization have a written whistleblower policy?	13	×	
14	Did the organization have a written document retention and destruction policy?	14	×	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	×	
b	Other officers or key employees of the organization	15b	×	
16a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
_	with a taxable entity during the year?	16a		×
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		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed See Part VI, Line 17 stm Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.		tion 5	601(c)
19	☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re Mark J. Spalding, 1320 19th Street NW 5th Floor, Washington, DC 20036 (202			6

Form 990 (2022)

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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.
- 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.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	box, office Individua	box, unles		rson	e than one n is both an tor/trustee) Highest compensated		(D)  Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Mark J Spalding President	60.00			×		6	•	331,854.	0.	39,191.
(2) Shana Miller Program Director	40.00				×			157,210.	0.	11,170.
(3) Tamika Washington Finance & Operations Director	40.00					×		146,451.	0.	19,732.
(4) Kate Morrison Strategic Partnerships Director	40.00					×		140,884.	0.	10,240.
(5) Maria Alej Navarrete Hernandez Govt & Multinationals Liason Officer	40.00					×		123,385.	0.	14,537.
(6) Jason Donofrio Chief Development Officer	40.00					×		122,222.	0.	10,009.
(7) Fernando Bretos Program Officer	40.00					×		117,164.	0.	18,635.
(8) Elliot S. Cafritz Chairman & Director	1.00	×		×				0.	0.	0.
(9) Angel Braestrup Secretary & Director	1.00	×		×				0.	0.	0.
(10)Olha Krushelnytska Treasurer & Director	1.00	×		×				0.	0.	0.
(11) Thomas Brigandi Director	1.00	×						0.	0.	0.
(12) Patrick Flynn Director	1.00	×						0.	0.	0.
(13) Joshua R. Ginsberg Director	1.00	×						0.	0.	0.
(14) Rolando Morillo Director	1.00	×						0.	0.	0.

Part VII Section A. Officers, Directors,	Trustees,	Key l	Em	plo	yee	s, an	ıd F	lighest Compe	nsated Emplo	yees (continued)
				(	C)					
(A)	(B)	(-1	-4 -1		ition			(D)	(E)	(F)
Name and title	Average					e than o i is both		Reportable	Reportable	Estimated amount
	hours per week	office	er an		lirect	or/trus	<del>-</del>	compensation from the	compensation from related	of other compensation
	(list any	Indi or c	Inst	Officer	₹ e	Hig	For	organization (W-2/	organizations (W-2/	from the
	hours for related	direc	it it	cer	Key employee	hest	Former	1099-MISC/ 1099-NEC)	1099-MISC/	organization and
	organizations	tor ta	ona		ploy	e con		1099-NEC)	1099-NEC)	related organizations
	below	Individual trustee or director	Institutional trustee		/ee	npe				
	dotted line)	ĕ	stee			Highest compensated employee				
(15) Imani Fairweather Morrison	1.00								_	_
Director		×						0.	0.	0.
(16) Lumay Wang Murphy	1.00									
Director	1 00	×						0.	0.	0.
(17) Denise Naguib	1.00	×							0	
Director	1 00	<u> </u>						0.	0.	0.
(18) Russell F Smith Director	1.00	×						0.	0.	0.
(19) Karen Thorne	1.00	, ,						· ·	0.	0.
Director	1	×						0.	0.	0.
(20) Ed Tilinghast, III	1.00						М	3.		
Director		×			١.,			0.	0.	0.
(21)Lisa Volgenau	1.00									
Director		×						0.	0.	0.
(22)										
				K						
(23)					M					
(0.1)							$\vdash$			
(24)	<del> /</del>									
(25)										
1b Subtotal								1,139,170.	0.	123,514.
c Total from continuation sheets to Part								1,130,110.	0.	123,311.
1 = 11/ 110 41 14 1								1,139,170.	0.	123,514.
2 Total number of individuals (including bu	t not limited	d to th	nose	e list	ted	above	e) w		e than \$100,000	
reportable compensation from the organ	ization	47			1	1				
										Yes No
3 Did the organization list any former							-	-	· ·	
employee on line 1a? If "Yes," complete										3 ×
4 For any individual listed on line 1a, is the										
organization and related organizations individual	greater th	an \$	150,	,UUC	)!	rye	s,	complete Sched	dule J for such	
				· tics	· fr-	 m es:				4 ×
5 Did any person listed on line 1a receive of for services rendered to the organization									tion or individual	
Section B. Independent Contractors	: 11 1 CO, C	σπρι	GIG	JUI	ieut	ale U I	01 8	sacri persori .		5 X
1 Complete this table for your five high	nest comp	ensat	ed	ind	202	ndent		ontractors that r	eceived more t	than \$100,000 of
compensation from the organization. Rep										

(A) Name and business address	(B) Description of services	(C) Compensation
Blue Planet Strategies, LLC, 47 Middle St, Hallowell , ME 04347	Consulting	166,693.
Kalas Consulting, Inc., 255 Huntington Bay Rd, Huntington , NY 11743	Consulting	103,800.
Merello Marine Consulting, LLC , 7351 Brightwaters Court, New Port Richey, FL 34652	Consulting	413,400.
Sonja Fordham, 2100 Connecticut Ave., NW #800, Washington, DC 20008	Consulting	117,300.
2 Total number of independent contractors (including but not limited to		

received more than \$100,000 of compensation from the organization

4

# Part VIII Statement of Revenue Check if Schedule O contain

I ait	NAIL.	Check if Schedule O contains a respon	se or note to ar	nv line in this Pa	ırt VIII		$\sqcap$
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Š, Š	1a	Federated campaigns 1a					
rant	b	Membership dues 1b		-			
ဇ် ဋ	С	Fundraising events 1c					
rts,	d	Related organizations 1d					
Contributions, Gifts, Grants, and Other Similar Amounts	е	Government grants (contributions) 1e	1,628,417.				
	f	All other contributions, gifts, grants,					
		and similar amounts not included above 1f	15,593,275.				
혈된	g	Noncash contributions included in					
t o		lines 1a–1f 1g	\$3,920,109.				
လ ළ	h	Total. Add lines 1a-1f		17,221,692.			
			Business Code				
ce	2a	Fees for Services	900099	1,326,457.	1,326,457.	0.	0.
Program Service Revenue	b	Cabon Offset	900099	78,803.	78,803.	0.	0.
gram Ser Revenue	С	Other program service income	900099	23,808.	23,808.	0.	0.
am eve	d						
g a	е						
P.	f	All other program service revenue					
	g	Total. Add lines 2a-2f		1,429,068.			
	3	Investment income (including dividends					
		other similar amounts)		38,944.	0.	0.	38,944.
	4	Income from investment of tax-exempt bo	and proceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents <b>6a</b> 29,520.					
	b	Less: rental expenses 6b					
	C	Rental income or (loss) 6c 29,520.					
	_d	Net rental income or (loss)		29,520.	29,520.	0.	0.
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets other than inventory <b>7a</b> 205 109					
	h	other than inventory <b>7a</b> 205,109. Less: cost or other basis		-			
evenue	D						
Ş.		and sales expenses . <b>7b</b> 200,807. Gain or (loss) <b>7c</b> 4,302.		-			
Œ		Net gain or (loss)		4,302.	0	0	4 202
ē		Gross income from fundraising	· · · · ·	4,302.	0.	0.	4,302.
Other	oa	events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
		Net income or (loss) from fundraising eve	ents				
		Gross income from gaming					
		activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b		-			
	С	Net income or (loss) from gaming activities	es				
		Gross sales of inventory, less					
		returns and allowances 10a					
	b	Less: cost of goods sold 10b					
	С	Net income or (loss) from sales of inventor	ory				
<u>S</u>			Business Code				
90 e	11a	Other income	900099	131,213.	131,213.	0.	0.
Miscellaneous Revenue	b						
	С						
Ais.	d	All other revenue					
2		Total. Add lines 11a-11d		131,213.			
	12	<b>Total revenue.</b> See instructions		18,854,739.	1,589,801.	0.	43,246.

following SOP 98-2 (ASC 958-720)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX . . . (D) Fundraising expenses (B) Program service expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses Management and general expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 1,040,509. 1,040,509. Grants and other assistance to domestic 2 individuals. See Part IV, line 22 . . . . Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 2,474,328. 2,474,328. Benefits paid to or for members . . . . Compensation of current officers, directors, trustees, and key employees . . . . . 534,426. 479,606. 18,273. 36,547. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 3,162,615. 1,819,010. 754,951. 588,654. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 183,626. 104,153. 44,699. 34,774. Other employee benefits . . . . . . 9 165,431. 276,113. 64,549. 46,133. 10 Payroll taxes . . . . . . . . . . . . 289,364. 178,111. 59,976. 51,277. Fees for services (nonemployees): 11 Management . . . . . . . . . . . . Legal . . . . . . . . . . . . . . . . 155,494. 147,586. 6,397. 1,511. Accounting . . . . . . . . . . . . 34,484 15,630. 15,251. 3,603. Lobbying . . . . . . . . . . Professional fundraising services. See Part IV, line 17 Investment management fees . . . . . 11,269. 1,240. 4,781. 5,248. Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) 18,958. 4,882,025. 4,822,311. 40,756. Advertising and promotion . . . 12 59,199. 884. 0. 58,315. 13 Office expenses 180,308. 139,889. 26,288. 14,131. . . . . . 14 Information technology . . . . 94,848. 85,228. 9,614. 6. 15 Royalties . . . . . . . . Occupancy . . . . . . . 221,725. 91,306. 77,942. 52,477. 16 Travel . . . . . . . . . . . . 1,267,008. 1,216,577. 8,346. 42,085. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 700. 235,439. 212,030. 22,709. 20 Payments to affiliates . . . . . . . 21 22,798. 3,948. 27,679. 933. 22 Depreciation, depletion, and amortization . 23 71,228. 31,068. 31,989. 8,171. Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) a Project & field expenses 614,635. 13. 196. 614,426. Dues, books & subscriptions 13,651. 7,814. 515. 5,322. 28,494. c Promotional merchandise 25,910. 0. 2,584. Licenses, taxes & fees 11,479. 5,776. 4,613. 1,090. e All other expenses Total functional expenses. Add lines 1 through 24e 25 15,869,946. 13,705,162. 1,164,460. 1,000,324. 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

### Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	tX		🗆
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	129,116.	1	278,983.
	2	Savings and temporary cash investments	2,226,095.	2	1,591,538.
	3	Pledges and grants receivable, net	3,901,313.	3	3,410,368.
	4	Accounts receivable, net	109,685.	4	408,478.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
	6	Loans and other receivables from other disqualified persons (as defined		5	
	6	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ä	9	Prepaid expenses and deferred charges	45,736.	9	82,252.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 173,298.			
	b	Less: accumulated depreciation <b>10b</b> 147,648.	32,228.	10c	25,650.
	11	Investments—publicly traded securities	937,370.	11	1,506,365.
	12	Investments—other securities. See Part IV, line 11	9,300,000.	12	13,015,000.
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	22,980.	14	10,833.
	15	Other assets. See Part IV, line 11	11,161.	15	1,606,415.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	16,715,684.	16	21,935,882.
	17	Accounts payable and accrued expenses	796,830.	17	831,128.
	18	Grants payable		18	
	19	Deferred revenue	62,979.	19	366,523.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		00	
-ia	22	Secured mortgages and notes payable to unrelated third parties	0.	22	0.
_	23 24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X		24	
		of Schedule D	200,975.	25	1,930,742.
	26	Total liabilities. Add lines 17 through 25	1,060,784.	26	3,128,393.
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	11,829,937.	27	16,014,132.
d B	28	Net assets with donor restrictions	3,824,963.	28	2,793,357.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
80	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds .		31	
et.	32	Total net assets or fund balances	15,654,900.	32	18,807,489.
Z	33	Total liabilities and net assets/fund balances	16,715,684.	33	21,935,882.
		PEV 05/47/23 PPO			Form <b>990</b> (2022

Form 990 (2022) Page **12** 

Part	t XI Reconciliation of Net Assets			-	
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		18,8	54,7	39.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,8	69,9	46.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,9	84,7	93.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	Į.	15,6	54,9	00.
5	Net unrealized gains (losses) on investments	5	1	67,7	96.
6	Donated services and use of facilities	3			
7	Investment expenses	7			
8	Prior period adjustments	3			
9	Other changes in net assets or fund balances (explain on Schedule O)	)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	0	18,8	07,4	89.
Part	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				×
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain	ain on			
	Schedule O.				
2a			2a		×
	If "Yes," check a box below to indicate whether the financial statements for the year were compil	led or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b			2b		×
	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:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain	ain on			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	×	
b					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audit	its.	3b	×	
	PEN 05/47/22 PPO		Forr	, മമവ	(2022)

Form **990** (2022)

The Ocean Foundation 71-0863908 1

## Additional Information From Form 990: Return of Organization Exempt from Income Tax

# Form 990: Return of Organization Exempt from Income Tax Part VI, Line 17 (continued)

**Continuation Statement** 

States Where Copy of Return is Required						
CA						
FL						
ME						
SC						
WA						



# SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

OMB No. 1545-0047

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.

Open to Public Inspection

Name	of the organization					Employer identification	number
	he Ocean Foundation					71-0863908	
Pai	t I Reason for Public Char	ity Status. (All	organizations mus	t comple	ete this p	oart.) See instruction	ons.
The o	organization is not a private foundat		,		•	•	
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
2	A school described in <b>section</b>		·	-	-		
3	A hospital or a cooperative hos						···· –
4	A medical research organization hospital's name, city, and state	•	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)(	(iii). Enter the
5	An organization operated for the section 170(b)(1)(A)(iv). (Comp		college or university	owned o	r operate	ed by a government	al unit described in
6 7	<ul> <li>☐ A federal, state, or local govern</li> <li>☒ An organization that normally r described in section 170(b)(1)(</li> </ul>	receives a subst	tantial part of its sup		. ,		n the general public
8	☐ A community trust described in			Part II.)			
9	An agricultural research organize or university or a non-land-granuniversity:	zation described	d in section 170(b)(1)	( <b>A</b> )(ix) op			
10	An organization that normally re receipts from activities related to support from gross investment acquired by the organization af	to its exempt fur income and unr	nctions, subject to ce related business taxal	rtain exce ole incom	eptions; a le (less se	and (2) no more than ection 511 tax) from	33 <sup>1</sup> /3% of its
11	☐ An organization organized and	operated exclus	sively to test for public	safety. S	See <b>sect</b> i	ion 509(a)(4).	
12	☐ An organization organized and o						
	one or more publicly supported the box on lines 12a through 12a						
а	☐ Type I. A supporting organi the supported organization( supporting organization. Yo	(s) the power to	regularly appoint or e	lect a ma	jority of t		
b	Type II. A supporting organ control or management of the organization(s). You must organization	he supporting o	rganization vested in	the same			
С	Type III functionally integr its supported organization(s						ally integrated with,
d	☐ Type III non-functionally in that is not functionally integ requirement (see instruction	rated. The orgain	nization generally mus	st satisfy	a distribu	ıtion requirement an	
е	☐ Check this box if the organi functionally integrated, or T						e II, Type III
f	Enter the number of supported o						
g	Provide the following information	about the supp	orted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Tata							

Schedule A (Form 990) 2022

Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 7,733,201. 17,828,372. 8,260,790. 11,114,623. 17,221,692. 62,158,678. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . . **Total.** Add lines 1 through 3 4 7,733,201. 17,828,372. 8,260,790. 11,114,623. 17,221,692. 62,158,678. 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) . . . . 12,242,775. 49,915,903. **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7,733,201. 17,828,372. 8,260,790. 11,114,623. 17,221,692. 62,158,678. 7 Amounts from line 4 . . . . . . Gross income from interest, dividends, 8 payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . 39,050, 46,083. 50,963. 44,382 68,464. 248,942. Net income from unrelated business 9 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.) . . . . . . . 0. 112,194. 131,213. 243,407. **Total support.** Add lines 7 through 10 11 62,651,027. Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 12 4,181,514. 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) . . . . . 79.67% 14 Public support percentage from 2021 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 15 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, 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 test. The organization qualifies as a publicly supported

18

b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, 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 test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

### 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.)

Secti	on A. Public Support			, ,	1	,	
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	<b>Total.</b> 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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
<u> </u>	line 6.)						
	on B. Total Support	( ) 2242	(1) 0040	4 ) 0000	( 1) 0004	( ) 2222	
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less						
-	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b		-				
11	Net income from unrelated business						
	activities not included 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	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	<b>First 5 years.</b> If the Form 990 is for the organization, check this box and <b>stop he</b>	•			•	ear as a sectio	, , , ,
Secti	on C. Computation of Public Suppor	rt Percentag	е				
15	Public support percentage for 2022 (line 8						%
16	Public support percentage from 2021 Sch	nedule A, Part	III, line 15 .			16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2022 (			-	. , ,		%
18	Investment income percentage from 202						%
19a	33¹/3% support tests—2022. If the organ						
	17 is not more than 331/3%, check this box	_	-	-		=	_
b	331/3% support tests—2021. If the organiz						
	line 18 is not more than 331/3%, check this	_	=	•	· · · · · ·		_
20	Private foundation. If the organization di	d not check a	box on line 14.	19a, or 19b, o	check this box	and see instru	ctions .

#### 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.)

ecu	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by		res	NO
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> 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.	2 3a		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
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.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
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 <b>Part VI</b> , 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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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.	6		
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).	7		
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).	8		
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 <b>Part VI</b> .	9a		
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 <b>Part VI</b> .	9b		
С	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 <b>Part VI</b> .	9c		
0a	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.	10a		
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.)

Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI</b> .	11c		
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
C1:	supported organizations played in this regard.	3		
	on E. Type III Functionally Integrated Supporting Organizations			,
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.  The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.			
2	Activities Test. <i>Answer lines 2a and 2b below.</i>		Yes	_
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below</i> .  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in <b>Part VI</b> the role played by the organization in this regard.	3h		

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations					
1	1 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.							
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3.	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6						
	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8						
Section B—Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):							
а	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):							
2	Acquisition indebtedness applicable to non-exempt-use assets	2						
3	Subtract line 2 from line 1d.	3						
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 0.035.	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Sect	ion C-Distributable Amount	•		Current Year				
1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2	Enter 0.85 of line 1.	2						
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3						
4	Enter greater of line 2 or line 3.	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6						
7	Check here if the current year is the organization's first as a non-functional (see instructions).	_	integrated Type III supporti	ng organization				

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions** Distributable **Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 **a** From 2017 . . . . . From 2018 **c** From 2019 **d** From 2020 From 2021 . . . . . Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Pt II Ln 10: Other Income Part II, Line 10 Description: Other income 2018: 0. 2019: 0. 2020: 112194. 2021: 0. 2022: 131213.

## Schedule B (Form 990)

Department of the Treasury

Internal Revenue Service

**Schedule of Contributors** 

Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2022

**Employer identification number** Name of the organization The Ocean Foundation 71-0863908 Organization type (check one): Filers of: Section: Form 990 or 990-EZ × 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 Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. 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. 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

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

The Ocean Foundation

The Ocean Foundation

The Ocean Foundation

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$1,685,385.	Person X Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,111,580.	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		\$1,731,668.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$555,176.	Person X Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$752,250.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 600,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)

Name of organization

The Ocean Foundation

Employer identification number 71-0863908

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person X 7\_\_\_\_ **Payroll** Noncash 515,201. (Complete Part II for noncash contributions.) (a) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person X 8\_\_\_\_8 **Payroll** Noncash 355,729. (Complete Part II for noncash contributions.) (d) (a) (b) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 X 9 Person **Payroll** Noncash X 351,956. (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person X 10 **Payroll** 350,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 X 11 Person **Payroll** Noncash X 3,715,000. (Complete Part II for noncash contributions.) (d) (b) (c) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.)

Name of organization

The Ocean Foundation

Employer identification number
71-0863908

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
9	Various publicly traded securities (See attached list of securities)		
		\$201,866.	12/28/2022
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
11	Equity interest in Baja Dad Holdings Mexico		
		\$ 3,715,000.	07/01/2022
(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
		\$	

**Employer identification number** 

71-0863908 The Ocean Foundation 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 information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (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

Name of organization

# SCHEDULE C (Form 990)

### **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.

Open to Public Inspection

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

. , ( -					
	ection 501(c)(4), (5), or (6) orga	ınizations: Complete Part III.		1 =	
	of organization				ntification number
	Ocean Foundation			71-08639	
Part 1		e organization is exempt under the organization's direct and incompaign activities."			
2	Political campaign activit	y expenditures. See instructions .		\$	}
3	Volunteer hours for politic	cal campaign activities. See instruc	ctions		
Part		e organization is exempt unde		c)(3).	
1 2 3 4a b Part 1 2 3 4 5	Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the Enter the amount direct activities Enter the amount of the 527 exempt function activities 17b Did the filing organization Enter the names, address organization made payment the amount of political control of the amount of political control of the state of the payment of the payment of political control of the state of the payment of political control of the payment of the payment of political control of the payment of	excise tax incurred by the organization excise tax incurred by organization ed a section 4955 tax, did it file Formula.  Expended by the filing organization is exempt under the expended by the filing organization is funds contributities.  Expenditures. Add lines 1 and 2.  Expenditures. Add lines 1 and 2.	er section 501(cation for section or section	c), except section 501  527 exempt function  anizations for section  on Form 1120-POL,  contact of the filing organic delivered to a separate p	Yes No  (c)(3).  Yes No  Yes No  Xations to which the filing ization's funds. Also enter isolitical organization, such
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

30110	2410 0 (1 01111 000) 2022						i age 🗠
Pai	t II-A Complete if the organizati section 501(h)).	ion is exempt u	nder section 50	01(c)(3) and filed	d Form 5768 (ele	ection un	der
Α (	Check $\ \square$ if the filing organization belongs			art IV each affiliate	d group member's	s name, ac	dress,
	EIN, expenses, and share of ex	cess lobbying exp	oenditures).				
В	Check $\square$ if the filing organization checke	d box A and "limi	ted control" provis	sions apply.			
	Limits on Lol	bbying Expenditu	ıres		(a) Filing	(b) Affili	ated
	(The term "expenditures" i	means amounts	paid or incurred.)		organization's totals	group t	otals
1:	Total lobbying expenditures to influence	ce public opinion	(grassroots lobbyi	ng)	0.		
I	Total lobbying expenditures to influence	ce a legislative bo	dy (direct lobbying	g)	2,000.		
(	: Total lobbying expenditures (add lines	1a and 1b) .			2,000.		
(	I Other exempt purpose expenditures .				15,867,946.		
(	Total exempt purpose expenditures (a	dd lines 1c and 1	d)		15,869,946.		
1	Lobbying nontaxable amount. Enter	r the amount fr	om the following	table in both			
	columns.				943,497.		
	If the amount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amount	t is:			
	Not over \$500,000	20% of the am	ount on line 1e.				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000.			
	Over \$17,000,000	\$1,000,000.					
9	Grassroots nontaxable amount (enter a	25% of line 1f)			235,874.		
ı	<ul><li>Subtract line 1g from line 1a. If zero or</li></ul>	less, enter -0-	<u>.</u>		0.		
i	Subtract line 1f from line 1c. If zero or				0.		
j	If there is an amount other than zer		1h or line 1i, did	the organization	file Form 4720		
	reporting section 4911 tax for this year	ar?				Yes	∐ No
			Period Under Sec				
	(Some organizations that made a s See th		ection do not have uctions for lines		of the five colum	ns below.	
	Lobbyii	ng Expenditures	During 4-Year Av	eraging Period			
	Calondar year (or fiscal year	(a) 2010	(b) 2020	(a) 2021	(4) 2022	(a) To	ntal .

	Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)		(a) 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	( <b>d)</b> 2022	(e) Total				
2a	Lobbying nontaxable amount	588,032.	575,138.	727,074.	943,497.	2,833,741.				
b	Lobbying ceiling amount (150% of line 2a, column (e))					4,250,612.				
С	Total lobbying expenditures	0.	0.	0.	2,000.	2,000.				
d	Grassroots nontaxable amount	147,008.	143,785.	181,769.	235,874.	708,436.				
е	Grassroots ceiling amount (150% of line 2d, column (e))					1,062,654.				
f	Grassroots lobbying expenditures	0.	0.	0.	0.	0.				

	(election under section 501(h)).	(6	a)		(b)	
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes	No No	Δι	moun	t
		100			- Iouii	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
!	Other activities?					
J 2a	Total. Add lines 1c through 1i					
Za 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?					
Part		(5),	or se	ction		
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<u> </u>	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Part	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			3	<u> </u>	
art	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes."				ine 3	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts	s of				
	political expenses for which the section 527(f) tax was paid).					
a	Current year	•	2a 2b			
b	Carryover from last year	•	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	•	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
-	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditures next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			
Par	• •					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	oup lis	t); Par	t II-A, I	ines 1	1 and
2 (See	e instructions); and Part II-B, line 1. Also, complete this part for any additional information.					

Part IV	Supplemental Information (continued)

Page 4

Schedule C (Form 990) 2022

# SCHEDULE D (Form 990)

### **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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

The Ocean Foundation 71-0863908 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 5. 1 Total number at end of year . . . . . . . . 3. 2 Aggregate value of contributions to (during year) . 30,000. 124,559. 3 Aggregate value of grants from (during year) . . 56,878. 74,934. 4 Aggregate value at end of year . . . . . . . 229,574. 13,377. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . X Yes No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose X Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements . . . 2a Total acreage restricted by conservation easements . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register . . . . . . . . . . . . . . 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet 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: \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: 

Part								
3	Using the organization's acquisition, acceleration items (check all that apply):	ession, and othe	er recor	ds, chec	k any of the	follow	ring that make s	ignificant use of its
а	☐ Public exhibition		d	Loan	or exchange	progra	am	
b	☐ Scholarly research		e	Other				
С	☐ Preservation for future generations							
4	Provide a description of the organization' XIII.	s collections an	d expla	in how th	hey further th	ne org	anization's exem	npt purpose in Part
5	During the year, did the organization soli	cit or receive do	onation	s of art,	historical trea	asures	s, or other simila	ır
	assets to be sold to raise funds rather that	n to be maintain	ed as p	art of the	e organizatio	n's co	llection?	☐ Yes ☐ No
Part	Part IV Escrow and Custodial Arrangements.							
	Complete if the organization and 990, Part X, line 21.						•	
1a	1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?							
b	If "Yes," explain the arrangement in Part X	(III and complete	e the fo	llowing ta	able:			
							Ar	mount
С	Beginning balance					1c		
d	Additions during the year				A .	1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount or							
	If "Yes," explain the arrangement in Part X	(III. Check here i	f the ex	planation	n has been p	rovide	d on Part XIII .	🗆
Par			_					
	Complete if the organization ans							
	<u> </u>	a) Current year	(b) Prio	or year	(c) Two years	back	(d) Three years back	(e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses				·			
d	Grants or scholarships							
e	Other expenditures for facilities and							
·	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the control of	current year end	halanc	e (line 1a	column (a))	held s	ie.	
a	Board designated or quasi-endowment		Daiano	c (iiiic 19	, σοιαιτιτι (α))	noia c		
h	Permanent endowment %							
C	Term endowment %							
Ü	The percentages on lines 2a, 2b, and 2c s	should equal 100	10%					
За	Are there endowment funds not in the po			ation tha	at are held ar	nd adr	ministered for th	e
-	organization by:		o. ga					Yes No
	(i) Unrelated organizations							3a(i)
	*** - · · · · · · · · · · · · · · · · ·							3a(ii)
b	If "Yes" on line 3a(ii), are the related organ							3b
4	Describe in Part XIII the intended uses of t		-					OD
Pari			5 GIIUU	WILLDLIF IC	ai IGO.			
I GI	Complete if the organization and		on Fori	n 990 F	Part IV line	11a 9	See Form 990	Part X line 10
	Description of property	(a) Cost or othe			or other basis		Accumulated	(d) Book value
	2000 paon or proporty	(investmen		` '	ther)		preciation	(a) Book value
1a	Land		0.					0.
b	Buildings							
С	Leasehold improvements							
d	Equipment			1	55,403.		129,753.	25,650.
е	Other				17,895.		17,895.	0.
Total	Add lines 1a through 1e. (Column (d) must	egual Form 990	Part >	column	(B) line 10c	)		25.650

 $\mathsf{B}\mathsf{A}\mathsf{A}$ 

Part VII	Investments – Other Securities.			Page •	
	Complete if the organization answered "Yes" on F	orm 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value		
(1) Financia	derivatives				
	neld equity interests				
	quity interest - Baja Dad Holdings	9,300,000.	FMV		
	ty interest - Fexsua	3,715,000.	FMV		
(B)					
(C)					
(D)					
(F)					
(G) (H)					
	mn (b) must equal Form 990, Part X, col. (B) line 12.)	13,015,000.			
Part VIII	Investments—Program Related.	13,013,000.			
T die Viii	Complete if the organization answered "Yes" on F	orm 990. Part IV. lin	e 11c. See Form	990. Part X. line 13.	
	(a) Description of investment	(b) Book value		hod of valuation:	
	(a) Description of investment	(a) Been value		-of-year market value	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.	000 D 1 IV I'	44.1.0	000 D. IV II. 45	
	Complete if the organization answered "Yes" on F	orm 990, Part IV, IIn	ie 11a. See Form		
	(a) Description			(b) Book value	
	of Use Asset			1,595,254.	
	ity deposit			11,161.	
(3)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			1,606,415.	
Part X	Other Liabilities.			, ,	
	Complete if the organization answered "Yes" on F	orm 990, Part IV, lin	ne 11e or 11f. See	e Form 990, Part X,	
	line 25.				
1.	(a) Description of liability			(b) Book value	
(1) Federal in	ncome taxes				
	t security deposit			3,100.	
	red rent liability			0.	
	table gift annuity			1,915.	
	hru grant			0.	
	dable advance			252,468.	
	ting lease liability			1,673,259.	
(8)					
(9)	man (b) may at a great Farma 000 Part V and (D) the off			1 222 7:3	
	mn (b) must equal Form 990, Part X, col. (B) line 25.) r uncertain tax positions. In Part XIII, provide the text of the foo	tnote to the erganization	n's financial statemen	1,930,742.	
	s liability for uncertain tax positions under FASB ASC 740. Che				
				. —	

X

Part	<u> </u>		Retu	rn.	
	Complete if the organization answered "Yes" on Form 990, F				
1	Total revenue, gains, and other support per audited financial statements		1	19,129,021.	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	<b>2a</b> 167,796.			
b	Donated services and use of facilities	<b>2b</b> 117,755.			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	<b>2d</b> -11,269.			
е	Add lines 2a through 2d		2e	274,282.	
3	Subtract line <b>2e</b> from line <b>1</b>		3	18,854,739.	
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			
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	-	5	18,854,739.	
Part			er Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.			
1			1	15,976,432.	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 🛦 1			
а	Donated services and use of facilities	<b>2a</b> 117,755.			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	<b>2d</b> −11,269.			
е	Add lines 2a through 2d		2e	106,486.	
3	Subtract line 2e from line 1		3	15,869,946.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b		4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5	15,869,946.	
Part 2		1.4.5 10.4		V II	
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and				
z, Pari	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional in	iomia	uon.	
D+ Y	Line 2: The organization is exempt from income t	avec under Interna	1 De	ovenije	
	Inte 2: The organization is exempt from income to	axes under incerna		······	
Code	501(c)(3) and applicable DC statutes. No provisi	on for income taxe	s is	1	
				, 	
reau	ired at June 30, 2023, as the Organization had no	net unrelated busi	ness	<b>!</b>	
1					
incor	ne. The organization follows FASB ASC 740-10, Inc	ome Taxes the auth	orit	ative	
quida	ance relating to accounting for uncertainty in inc	ome taxes. These	prov	risions	
provi	ide consistent guidance for the accounting for unc	ertainty in income	tax	es	
recognized in an entity's financial statements and prescribe a threshold of "more					
like	ly than not" for recognition and derecognition of	tay nogitions take	n or		
TTV6-	ry chan not for recognition and defection of	positions take			
evne	sted to be taken in a tay return. The Organization	in nerformed an our	1112+	ion	
expected to be taken in a tax return. The Organization performed an evaluation					
of uncertain tax positions for the year ended June 30, 2023, and determined that					
or ancerearn can positions for the year chaca dulie 30, 2023, and determined that					
there were no matters that would require recognition in the financial statements					

Part XIII Supplemental Information (continued)
or which may have any effect on its tax-exempt status. As of June 30, 2023,
the statute of limitations for tax years 2019 through 2021 remains open with
federal and state authorities
Pt XI, Line 2d: Investment fees
Pt XII, Line 2d: Investment fees

# 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.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

The Ocean Foundation 71-0863908 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? × Yes □ No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (a) Region (b) Number (d) Activities conducted in the (e) If activity listed in (d) is (f) Total employees, expenditures for of offices in region (by type) (such as, a program service, agents, and the region fundraising, program services, describe specific type of and investments independent investments, grants to recipients service(s) in the region in the region contractors located in the region) in the region 0 (1) North America program service research 1,101,571. (2) North America 0 grantmaking grants to recipients 324,116. 0 (3) Central America program service research & conferences 437,381. 184,109. (4) Central America 0 grantmaking grants to recipients 0 (5) South America 0 program service 199,208. research 0 (6) South America grantmaking grants to recipients 113,500. (7) Sub-Saharan Africa 0 program service 131,180. research (8) Sub-Saharan Africa 0 47,291. grantmaking grants to recipients 0 (9) East Asia and Pacific 0 program service research & conferences 305,997. (10) East Asia and Pacific 0 1,308,988. grantmaking grants to recipients 0 (11) Russia 509. program service program support 0 **(12)** Russia 0 grantmaking grants to recipients 155,600. 0 (13) Europe program service research & conferences 1,082,732. 0 (14) Europe grantmaking grants to recipients 301,495. (15) South Asia 0 program service program support 4,324. 0 9,470. (16) South Asia grantmaking grants to recipients (17) See Statement **3a** Subtotal . . . . . . 0 0 5,717,258. from continuation 0 0 29,760. sheets to Part I . . . .

0

0

c Totals (add lines 3a and 3b)

5,747,018.

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			North America	General Support	7,965.	wire	0.	n/a	Actual
(2)			North America	General Support	135,196.	wire	0.	n/a	Actual
(3)			North America	General Support	28,130.	wire	0.	n/a	Actual
(4)			North America	General Support	40,000.	wire	0.	n/a	Actual
(5)			Central America	Hawksbill monitoring	7,000.	wire	0.	n/a	Actual
(6)			Central America	Hawksbill monitoring	7,000.	wire	0.	n/a	Actual
(7)			Central America	General Support	10,000.	wire	0.	n/a	Actual
(8)			Central America	Coastal remediation	136,059.	wire	0.	n/a	Actual
(9)			South America	General Support	45,000.	wire	0.	n/a	Actual
(10)			South America	Prarie Restoration	10,000.	wire	0.	n/a	Actual
(11)			South America	Loggerhead	16,500.	wire	0.	n/a	Actual
(12)			South America	Hawksbill monitoring	7,000.	wire	0.	n/a	Actual
(13)			South America	High Freq Radio	5,500.	wire	0.	n/a	Actual
(14)			Sub-Saharan Africa	Bldg Capacity	10,000.	wire	0.	n/a	Actual
(15)			Sub-Saharan Africa	General Support	10,000.	wire	0.	n/a	Actual
(16)			See Statement		1,613,017.		0.		

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 . . .

Schedule F (Form 990) 2022

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Grant	Central America	1	5,700.	Wire	0.	n/a	n/a
(2) Grant	Central America	1	50,000.	Wire	0.	n/a	n/a
(3) Grant	Russia	1	30,000.	Wire	0.	n/a	n/a
<b>(4)</b> Grant	Europe	1	22,500.	Wire	0.	n/a	n/a
<b>(5)</b> Grant	Europe	1	6,700.	Wire	0.	n/a	n/a
<b>(6)</b> Grant	Europe	1	23,300.	Wire	0.	n/a	n/a
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2022 Page **4** 

### Part IV Foreign Forms

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

Schedule F (Form 990) 2022 Page 5

### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Pt I Line 2: The Ocean Foundation's fund and project managers work very closely
with foreign grantees on public education, ocean preservation, and achieving
the organization's programmatic goals. In addition to regular reporting, the
relationship between the Foundation's various funds & projects and foreign grantees
is closer to that of a partnership than a passive grantor relationship. Frequent
visits and direct involvement in all cases contribute to direct oversight over
foreign grant recipients. Other Required Narrative Information - The instructions
ask that we report the accounting method used to determine the amounts in Part
I, Column F. We have no employees stationed in foreign countries, so there is
no payroll included. We analyzed line item detail for Consultants and Service
Providers of all types, Meeting and Conferences, and Travel, as well as Grants
Awarded, to identify monies spent in foreign regions and that is the method used
for reporting on Column F. For Parts II and III the accounting method used was
to include and report all foreign grantees (subject to the Part II threshold).
Part II and Part III amounts are included in Part I column F (which is therefore
the total spent in each region on all types of activity).

The Ocean Foundation 71-0863908

### Schedule F: Statement of Activities Outside U.S.

### Part II: Grants and Other Assistance to Organizations or Entities Outside the U.S.

### **Continuation Statement**

Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of noncash assistance	Description of noncash assistance	Method of valuation
East Asia and Pacific	Leatherback turtle	18,000.	wire	0.	n/a	Actual
East Asia and Pacific	General Support	10,000.	wire	0.	n/a	Actual
East Asia and Pacific	General Support	1,263,098.	wire	0.	n/a	Actual
East Asia and Pacific	General Support	8,000.	wire	0.	n/a	Actual
Russia	General support	34,700.	wire	0.	n/a	Actual
Russia	General support	5,250.	wire	0.	n/a	Actual
Europe	Transform mkts	6,750.	wire	0.	n/a	Actual
Europe	General Support	37,204.	wire	0.	n/a	Actual
Europe	Support Deep-Ocean	7,000.	wire	0.	n/a	Actual
Europe	General Support	58,060.	wire	0.	n/a	Actual
Europe	General Support	25,000.	wire	0.	n/a	Actual
Europe	General Support	6,750.	wire	0.	n/a	Actual
Europe	General Support	5,500.	wire	0.	n/a	Actual
Europe	General Support	8,985.	wire	0.	n/a	Actual
Europe	General Support	9,250.	wire	0.	n/a	Actual
Europe	General Support	90,000.	wire	0.	n/a	Actual
Europe	General Support	10,000.	wire	0.	n/a	Actual
South Asia	General Support	9,470.	wire		n/a	Actual
		1,613,017.		0.		

The Ocean Foundation 71-0863908 1

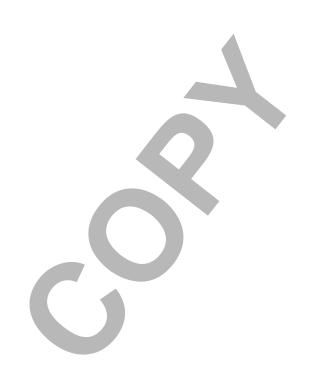
## Additional Information From Schedule F: Statement of Activities Outside U.S

### Schedule F: Statement of Activities Outside U.S

Part I: General Information on Activities Outside the United States

**Continuation Statement** 

Region	No. of Offices	No. of Employ	Act Conducted	Description	Total
Middle East	0	0	program service	conferences & travel	9,787.
Middle East	0	0	program service	grants to recipients	29,760.
Total	0	0			39,547.



### **SCHEDULE I** (Form 990)

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Name of the organization **Employer identification number** The Ocean Foundation 71-0863908 **General Information on Grants and Assistance** 

the selection criteria used to	award the grants	or assistance?					· · 🗵 Yes 🗌 No
2 Describe in Part IV the organ	nization's procedu	res for monitoring	the use of grant fu	nds in the United	States.		
Part II Grants and Other As Part IV, line 21, for ar							wered "Yes" on Form 990
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
(1) Attagene Inc. 7020 Kilcreek Rd Morrisville NC 27560	56-2267354	n/a	12,240.	0.	Actual	n/a	general ops support
(2) Brick City TV, LLC 601 W 26th St New York NY 10001	26-2087540	n/a	194,936.	0.	Actual	n/a	general ops support
(3) Coastal Cordination Prgm 6947 Cliff Ave. Bodega Bay CA 94923	-1	n/a	13,650.	0.	Actual	n/a	general ops support
(4) Conservacion ConCiencia 806 Calle Lafayette RQ San Juan		n/a	192,844.	0.	Actual	n/a	general ops support
(5) Deep Green Wilderness 2400 NW 80th St PMB 127 Seattle WA 98117	27-0290082	n/a	58,000.	0.	Actual	n/a	general ops support
(6) East Carolina University 209 East 5 Street Mail Stop 211 Greenville NC 27858	1	n/a	12,395.	0.	Actual	n/a	support underwater
(7) Ecolibrium Inc. 5343 Aztec Drive Boulder CO 80303	38-4097020	n/a	6,500.	0.	Actual	n/a	Enhancing leatherback
(8) Havenworth Coastal Conserv. 5120 Beacon Rd Palmetto FL 34221	27-3351539	n/a	8,235.	0.	Actual	n/a	general ops support
(9) Inst. for Tropical Ecology & Conserv 2911 NW 40th Place Gainesville FL 32605	59-3434081	501(c)(3)	20,000.	0.	Actual	n/a	general ops support
(10) Marine Conservation Inst 1914 N 34th St #400 Seattle WA 98103		501(c)(3)	13,350.	0.	Actual	n/a	support High Seas
(11) N. Amer Assoc. for Enviro Ed. 1250 24th St NW #801 Washington DC 20037	23-7158061	501(c)(3)	10,000.	0.	Actual	n/a	support of NAAEE's
(12) See Statement			471,322.	0.			
2 Enter total number of section		•					. 13
3 Enter total number of other of	organizations listed	d in the line 1 table					. 9

Schedule I (Form 990) 2022

Grants and Other Assistance Part III can be duplicated if ad	ditional space is needed	. Complete il ti	le organization answ	vered res on Form 990,	ran iv, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
			/		
t IV Supplemental Information. P	Provide the information re	equired in Part I I	ine 2: Part III. colum	n (b): and any other addition	onal information
'					

The Ocean Foundation 71-0863908

# Schedule I: Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments Continuation Statement

Name and address of organization or government	EIN	IRC Section (if applicable)	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of noncash assistance	Purpose of grant or assistance
Netcentric Campaigns 5335 Wisconsin Ave, NW #440, Washington, DC 20015	300166103	n/a	50,000.	0.	Actual	n/a	general ops support
Only One, Inc. 435 Hudson Street, New York, NY 10014	462746860	501(c)(3)	25,000.	0.	Actual	n/a	support of IGC5-Bis
Oregon State Univ. A312 Kerr Admin Bldg, Corvallis, OR 97331	611730890	501(c)(3)	70,514.	0.	Actual	n/a	general ops support
Ocean Risk & Resilience Action Alliance 2336 Wisconsin Ave., NW #32043, Washington, DC 20007	833580499	501(c)(3)	50,000.	0.	Actual	n/a	support early adoptors
Playa Viva LLC 20 Melrose Court, San Mateo, CA 94402	208019563	n/a	36,068.	0.	Actual	n/a	support turtle camp
Restore America's Estuaries 601 13th St, NW Fl 12, Washington, DC 20005	541965304	501(c)(3)	9,000.	0.	Actual	n/a	general ops support
Sea Mamal Educ. Learning 1003 Iowa Heights Rd, Sedro Woolley, WA 98284	473370136	501(c)(3)	10,000.	0.	Actual	n/a	general ops support
Sustainable Travel Interntl 3523 Burke Ave N, Seattle, WA 98103	371461679	501(c)(3)	11,000.	0.	Actual	n/a	general ops support
University of Miami PO Box 405803, Atlanta, GA 30384	590624458	501(c)(3)	10,000.	0.	Actual	n/a	general ops support
University of Oregon 5219 University of Oregon, Eugene, OR 97403	464727800	501(c)(3)	124,740.	0.	Actual	n/a	utilize new & existing data
Woods Hole Oceanographic Inst 256 Woods Hole Rd MS #40, Woods Hole, MA 02543	042105850	501(c)(3)	75,000.	0.	Actual	n/a	support black box
			471,322.	0.			

#### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

The	Ocean Foundation 71-08639	80		
Par	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed o 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	<ul> <li>☐ First-class or charter travel</li> <li>☐ Travel for companions</li> <li>☐ Tax indemnification and gross-up payments</li> <li>☐ Discretionary spending account</li> <li>☐ Housing allowance or residence for personal us</li> <li>☐ Payments for business use of personal residence</li> <li>☐ Health or social club dues or initiation fees</li> <li>☐ Personal services (such as maid, chauffeur, che</li> </ul>	ce		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding particles or reimbursement or provision of all of the expenses described above? If "No," complete Partexplain	t III to		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked 1a?	on line		
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 related organization to establish compensation of the CEO/Executive Director, but explain in Part III.  Compensation committee  Independent compensation consultant  Compensation survey or study  Form 990 of other organizations  Approval by the board or compensation commit			
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	1	×
b	Participate in or receive payment from a supplemental nonqualified retirement plan?		)	×
С	Participate in or receive payment from an equity-based compensation arrangement?		;	×
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrecompensation contingent on the revenues of:	ue any		
а	The organization?	5a	1	×
b	Any related organization?	5b	)	×
6	If "Yes" on line 5a or 5b, describe in Part III.  For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accre compensation contingent on the net earnings of:	ue any		
а	The organization?	6a	ı	×
b	Any related organization?	6b		×
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any no payments not described on lines 5 and 6? If "Yes," describe in Part III			×
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subto the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," described in Regulations section 53.4958-4(a)(3)?	oject		
	in Part III			×
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure descri Regulations section 53.4958-6(c)?			

9

Schedule J (Form 990) 2022

#### 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.

(A) Name and Title				1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Mark J Spalding	(i)	331,854.	0.	0.	23,698.	16,767.	372,319.	0.
1 President	(ii)	0.	0.	0.	0.	0.	0.	0.
Shana Miller	(i)	157,210.	0.	0.	11,170.	1,241.	169,621.	0.
2 Program Director	(ii)	0.	0.	0.	0.	0.	0.	0.
Tamika Washington	(i)	146,541.	0.	0.	10,648.	10,754.	167,943.	0.
3 Finance & Operations Director	(ii)	0.	0.	0.	0.	0.	0.	0.
Kate Morrison	(i)	140,884.	0.	0.	10,240.	1,430.	152,554.	0.
4 Strategic Partnerships Director	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)		<u></u>					
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part
for any additional information.

Schedule J (Form 990) 2022

### **SCHEDULE M** (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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.

Name o	f the organization			Empl	oyer identification nu	ımber	
The	Ocean Foundation			71-	0863908		
Part	Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contributio amounts reported c Form 990, Part VIII, lin	n wethou	(d) of determinir ntribution am	-
1	Art—Works of art						
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	×	1	205,1			
10	Securities—Closely held stock .	×	1	3,715,0	00.		
11	Securities—Partnership, LLC,						
	or trust interests						
12	Securities – Miscellaneous						
13	Qualified conservation contribution—Historic						
	structures			,			
14	Qualified conservation						
17	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						
	which the organization completed	1 Form 8283	3, Part V, Donee Acknowled	agement	. 29	1	
						Yes	No
30a	During the year, did the organiza						
	28, that it must hold for at least 3 used for exempt purposes for the					00	
J.			ing penou:			30a	×
	If "Yes," describe the arrangement Does the organization have a		stance policy that requir	es the review of a	av nonetandard		
31	contributions?				-	24	
32a	Does the organization hire or us					31 ×	+
U_L		-		•		32a	×
h	If "Yes," describe in Part II.	• •		· · ·		OZ.u	
33	If the organization didn't report an	amount in	column (c) for a type of pro	perty for which colum	n (a) is checked,		

describe in Part II.

Schedule M (Form 990) 2022 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether Part II the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

### **SCHEDULE 0** (Form 990)

### 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.

OMB No. 1545-0047 Open to Public

Department of the Treasury

Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.	Inspection	
Name of the organization		Employer identification number	
The Ocean Found	dation	71-0863908	

Pt VI, Line 2: RELATIONSHIPS AMONG DIRECTORS, OFFICERS & KEY EMPLOYEES - Angel
Braestrup, Director & Mark Spalding, President/Officer, own real estate together,
unrelated to the business of the Foundation.
Pt VI, Line 11b: PROCESS FOR REVIEW OF FORM 990 - Prior to filing a complete
copy of the Form 990 it is emailed to all Foundation directors calling their
attention to sections most likely to be of interest to contributors, the public
and seeking comments on any part of the Form 990.
Pt VI, Line 12c: CONFLICT OF INTEREST MONITORING & ENFORCEMENT - The Foundation's
conflict of interest policy covers all directors, officers & staff. Any conflict
of interest is to be reported to either the Chair or President. The "cure" is
full disclosure, and recusal by the conflicted person form participating in a
decision that could lead to a personal gain.
Pt VI, Line 15a: REVIEW OF COMPENSATION OF CEO - An independent director annually
surveys the field of intl NGOs marine philanthropic orgs & community foundations.
This director also is on the compensation committee of the Board of a comparable
size international NGO which receives a report by an independent compensation
consultant based on a compensation survey. Based on this research and experience,
the director reports the findings to the Foundation Board. The Board approves
Mr. Spalding's (CEO/President) compensation, with Ms. Braestrup (Director) abstaining.
Pt VI, Line 15b: COMPENSATION OF OFFICERS AND KEY EMPLOYEES - The President
of the organization sets salaries levels for officers & key employees which is
then approved by the board of directors in the salary line of the budget.
Pt VI, Line 19: DISCLOSURE - The Foundation considers all requests for disclosures
of documents on a case by case basis. It annually posts a copy of its audit
to Guidestar in the section which allows additional information, and as a California

Page **2** 

Name of the organization **Employer identification number** The Ocean Foundation 71-0863908 nonprofit public benefit corporation, makes its audited financials available to the public on request. It also publishes on its website an annual report containing summary information derived from the audited financial statements. Pt XII, Line 3b: The organization is in the process of completing their 6/30/23 financial audit and uniform guidance audit. The audits are expected to be completed in the next 45 days. Pt III, Line 4d: \_\_\_\_\_\_ Expenses: \$2,486,655 including grants of: \$968,716 Revenue: \$73,322 Description: BUILDING THE CAPACITY OF THE MARINE CONSERVATION COMMUNITY -There are many outstanding conservation organizations dedicated to protecting and preserving our oceans. The Ocean Foundation provides assistance to these entities, which have a need to develop a certain skill or competence, or for general upgrading of performance ability. The Ocean Foundation was created in part to bring new financial and technical resources to the table so that we can increase the capacity of these organizations to pursue their missions. Pt VI, Section C, Line 17: State: FL State: ME State: SC State: WA Pt IX, Line 11g: Description: Scientific & technical consultants Total: \$58,525 \_\_\_\_\_ Program services: \$26,838 Management and general: \$18,248 Fundraising: \$13,439 Description: Research & advocacy fees Total: \$2,000 Program services: \$2,000 Management and general: \$0

Schedule O (Form 990) 2022 Page **2** 

Name of the organization	Employer identification number
The Ocean Foundation	71-0863908
Fundroiging: 60	
Fundraising: \$0	
Description: Program mgt & support fees	
7 . 44 400 040	
Total: \$4,198,242	
Program services: \$4,170,417	
Management and general: \$22,508	
Fundraising: \$5,317	
Description: Communication & design fees	
Total: \$623,258	
10041. 4023,230	
Program services: \$623,056	
Management and general: \$0	
Fundraising: \$202	

2022

Name Employer Identification No.
The Ocean Foundation 71-0863908

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Scientific & technical consultants Research & advocacy fees Program mgt & support fees Communication & design fees	58,525. 2,000. 4,198,242. 623,258.	26,838. 2,000. 4,170,417. 623,056.	18,248. 0. 22,508. 0.	13,439. 0. 5,317. 202.
Total to Form 990, Part IX, line 11g	4,882,025.	4,822,311.	40,756.	18,958.