

PUBLIC DISCLOSURE COPY

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

# Form 990

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](http://www.irs.gov/Form990) for instructions and the latest information.

# 2024

Open to Public Inspection

**A** For the **2024** calendar year, or tax year beginning and ending

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>NATIONAL MARINE SANCTUARY FOUNDATION</b>		<b>D</b> Employer identification number <b>94-3370994</b>
	Doing business as		<b>E</b> Telephone number <b>(301) 608-3040</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	<b>8455 COLESVILLE ROAD</b>		<b>G</b> Gross receipts \$ <b>36,645,412.</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>SILVER SPRING, MD 20910</b>		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>F</b> Name and address of principal officer: <b>JOEL JOHNSON</b> <b>SAME AS C ABOVE</b>		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		If "No," attach a list. See instructions	
<b>J</b> Website: <b>WWW.MARINESANCTUARY.ORG</b>		<b>H(c)</b> Group exemption number	
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L</b> Year of formation: <b>2000</b>	<b>M</b> State of legal domicile: <b>MI</b>

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE PART III, LINE 1.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>16</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>16</b>
	<b>5</b> Total number of individuals employed in calendar year 2024 (Part V, line 2a)	<b>5</b>	<b>124</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>20</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 21,592,928.	<b>Current Year</b> 35,461,919.
	<b>9</b> Program service revenue (Part VIII, line 2g)	160,203.	92,298.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	39,907.	300,674.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-164,958.	126,954.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,628,080.	35,981,845.
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	7,269,711.
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,509,943.	9,098,698.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		33,524.	68,535.
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)		1,657,310.	
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		8,908,384.	19,879,294.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	22,721,562.	35,060,994.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-1,093,482.	920,851.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 9,575,940.	<b>End of Year</b> 15,457,372.
	<b>21</b> Total liabilities (Part X, line 26)	4,189,707.	9,254,155.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	5,386,233.	6,203,217.

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer		Date		
	<b>VERONICA ALI, CHIEF FINANCIAL OFFICER</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	<b>RICHARD J. LOCASTRO, CPA</b>	<i>Richard J. Locastro</i>	09/05/2025		<b>P00288314</b>
Firm's name <b>GELMAN, ROSENBERG &amp; FREEDMAN</b>			Firm's EIN <b>52-1392008</b>		
Firm's address <b>4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930</b>			Phone no. <b>301-951-9090</b>		

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE NATIONAL MARINE SANCTUARY FOUNDATION IS A LEADING VOICE FOR U.S. PROTECTED WATERS, WORKING WITH COMMUNITIES TO CONSERVE AND EXPAND THOSE SPECIAL PLACES FOR A HEALTHY OCEAN, COASTS, AND GREAT LAKES. WORKING TOGETHER, WE SAFEGUARD SPECIES AND THE PLACES THEY CALL HOME,

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 6,517,236. including grants of \$ 4,040,340. ) (Revenue \$ ) CONSERVATION & RESTORATION: OUR NATIONAL MARINE SANCTUARIES ARE AMERICA'S PROTECTED AREAS OF THE OCEAN AND GREAT LAKES THAT SAFEGUARD RICH BIODIVERSITY AND CULTURAL TREASURES. THEY ARE HOME TO ICONIC SPECIES LIKE MIGRATORY WHALES, SEABIRDS, COUNTLESS FISH SPECIES, AND HABITATS SUCH AS CORAL REEFS AND TOWERING KELP FORESTS. ALL 18 NATIONAL MARINE SANCTUARIES ALSO PRESERVE OUR MARITIME HERITAGE, PROTECTING HISTORICAL ASSETS LIKE SHIPWRECKS, AIRCRAFT, AND OTHER ARTIFACTS THAT REVEAL OUR NATION'S MARITIME HISTORY. THE NATIONAL MARINE SANCTUARY FOUNDATION FUNDS EFFORTS IN SANCTUARY COMMUNITIES THAT CENTER PEOPLE AND COMMUNITIES IN THE CONSERVATION, RESTORATION, AND EDUCATION OF OUR TREASURED WATERS. OUR APPROACH EMPHASIZES FUNDING PRACTICAL RESOURCE MANAGEMENT THAT SUPPORTS

4b (Code: ) (Expenses \$ 804,459. including grants of \$ 77,075. ) (Revenue \$ ) SCIENCE & TECHNOLOGY: THE NATIONAL MARINE SANCTUARY SYSTEM ENCOMPASSES AMERICA'S MOST ICONIC OCEAN AND GREAT LAKES PLACESOUR CORAL REEFS, SHIPWRECKS, KELP FORESTS, AND DEEP-SEA CANYONS. EACH SANCTUARY IS A NATIONAL LIVING LABORATORY THAT FUELS A POWERFUL OCEAN ENTERPRISE. THEY ARE PLATFORMS FOR SCIENCE AND INNOVATION, TESTBEDS FOR NEW TECHNOLOGIES, AND CATALYSTS FOR REGIONAL ECONOMIC GROWTH. THE FOUNDATION FUNDS AND HELPS SUPPORT THE OCEAN ENTERPRISE IN SANCTUARIES, A NETWORK OF PUBLIC, PRIVATE, AND ACADEMIC ENTITIES THAT DEVELOP AND DELIVER OCEAN OBSERVATION, MEASUREMENT, SOCIOECONOMIC STUDIES, AND DATA SERVICES. PARTNERS DEVELOP APPLICATIONS ACROSS SCIENCE, MARITIME SAFETY, NATIONAL SECURITY, AND IN SUPPORT OF MARINE AND COASTAL ECONOMIES. WE SUPPORT EXPERTS PROVIDING

4c (Code: ) (Expenses \$ 20,639,557. including grants of \$ 1,263,252. ) (Revenue \$ 132,981. ) EDUCATION & OUTREACH: THE NATIONAL MARINE SANCTUARY FOUNDATION CONNECTS PEOPLE TO THEIR SANCTUARIES AND FUNDS PUBLIC EDUCATION, OUTREACH, CONSERVATION, AND MARITIME HERITAGE PROJECTS THAT ENCOURAGE PEOPLE TO BECOME ENGAGED STEWARDS OF AMERICA'S OCEAN, COASTS, AND GREAT LAKES WATERS. WE ENCOURAGE LOCAL STEWARDSHIP AND NATIONAL ENGAGEMENT INCLUDING PROMOTING SUSTAINABLE RECREATION AND TOURISM IN NATIONAL MARINE SANCTUARIES; ESTABLISHING LIFELONG CONNECTIONS TO NATIONAL MARINE SANCTUARIES AND MONUMENTS THROUGH EDUCATION AND PUBLIC AWARENESS.

THE FOUNDATION SUPPORTS STAFF, OPERATIONS, EXHIBITS, AND/OR PROGRAMS AT TEN VISITOR CENTER SITES IN EACH OF THE THREE REGIONS OF THE NATIONAL

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,741,225. including grants of \$ 633,800. ) (Revenue \$ )

4e Total program service expenses 29,702,477.

Part IV Checklist of Required Schedules

Table with columns for question number, Yes, and No. Contains 21 main questions and sub-questions (a-f) regarding organizational requirements and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes rows 2a through 17 with various tax-related questions and answers.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 16; 1b Enter the number of voting members included on line 1a... 16; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 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... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b 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? X; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b 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... X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done... X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official... X; b Other officers or key employees of the organization... X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b 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? X

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [X] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
VERONICA ALI - (301)608-3040
8455 COLESVILLE ROAD, 1275, SILVER SPRING, MD 20910

**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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOEL JOHNSON PRESIDENT & CEO (FROM 07/2	40.00			X			277,656.	0.	16,144.	
(2) VERONICA ALI CFO	40.00			X			203,266.	0.	7,446.	
(3) ALLISON ALEXANDER VICE PRESIDENT OF PROGRAM	40.00				X		161,123.	0.	22,507.	
(4) MARGARET KNUDSON VP OF DEVELOPMENT (THROUGH 10/24)	40.00				X		163,263.	0.	10,604.	
(5) SHANNON COLBERT VICE PRESIDENT OF EXTERNAL	40.00					X	144,269.	0.	5,390.	
(6) LINDSEY REEVES SR. SCIENTIST	40.00					X	104,288.	0.	14,245.	
(7) GINAIA KELLY MB CHAPTER DIRECTOR	40.00					X	111,313.	0.	4,218.	
(8) MATTHEW MCINTOSH VISUAL INFORMATION SPECIAL	40.00					X	108,704.	0.	4,134.	
(9) BRITTA CULBERTSON TASAA MANAGER	40.00					X	100,101.	0.	10,838.	
(10) LAURA ZAGAR CO-CHAIR	1.00	X		X			0.	0.	0.	
(11) DAWN RODNEY CO-CHAIR	1.00	X		X			0.	0.	0.	
(12) ELIZABETH CREGO TREASURER	1.00	X		X			0.	0.	0.	
(13) MARK MCDADE SECRETARY	1.00	X		X			0.	0.	0.	
(14) SUSANNA KRONDAKI DIRECTOR	0.50	X					0.	0.	0.	
(15) MARTIN PETERS DIRECTOR	0.50	X					0.	0.	0.	
(16) BARBARA BIRDSEY DIRECTOR	0.50	X					0.	0.	0.	
(17) JOHN RUDOLF DIRECTOR	0.50	X					0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) HEATHER LUDERMANN DIRECTOR	0.50	X						0.	0.	0.
(19) JUSTIN DUNNAVANT DIRECTOR	0.50	X						0.	0.	0.
(20) JOSE ASTORQUI DIRECTOR	0.50	X						0.	0.	0.
(21) NIKKI BUFFA DIRECTOR	0.50	X						0.	0.	0.
(22) JOSH FRANKLIN DIRECTOR	0.50	X						0.	0.	0.
(23) JODIE NG DIRECTOR	0.50	X						0.	0.	0.
(24) SUZANNE FREY DIRECTOR	0.50	X						0.	0.	0.
(25) CHAIRMAND TIMOTHY GREENE DIRECTOR	0.50	X						0.	0.	0.
<b>1b Subtotal</b>								1,373,983.	0.	95,526.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,373,983.	0.	95,526.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 9

	Yes	No
3 Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
BLUE STATE, 3 WORLD TRADE CENTER, 30TH FLOOR 175 GREENWICH ST, NEW YORK,	MEDIA MANAGEMENT	379,130.
PRECON EVENTS, INC., 11910 PARKLAWN DRIVE, SUITE T, ROCKVILLE, MD 20852	PROFESSIONAL EVENT PRODUCTION	302,781.
DESIGN CUISINE, 2659 S. SHIRLINGTON ROAD, ARLINGTON, VA 22206	CATERING SERVICES	185,642.
OSIBEYOND L.L.C., 11921 ROCKVILLE PIKE, SUITE 210, ROCKVILLE, MD 20852	IT SERVICE	148,646.
TRADE CENTER MANAGEMENT ASSOCIATES, 1300 PENNSYLVANIA AVENUE, NW, WASHINGTON, DC	VENUE SITE FOR CONFERENCE & EVENTS	139,045.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 6

**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b>	Federated campaigns .....	<b>1a</b>	36,187.				
	<b>b</b>	Membership dues .....	<b>1b</b>					
	<b>c</b>	Fundraising events .....	<b>1c</b>	68,700.				
	<b>d</b>	Related organizations .....	<b>1d</b>					
	<b>e</b>	Government grants (contributions) .....	<b>1e</b>	32,683,059.				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	2,673,973.				
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 7,328.				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f .....		35,461,919.				
	Program Service Revenue	<b>2 a</b>	VESSEL OPERATIONS	<b>Business Code</b>				900099
<b>b</b>								
<b>c</b>								
<b>d</b>								
<b>e</b>								
<b>f</b>		All other program service revenue .....						
<b>g</b>		<b>Total.</b> Add lines 2a-2f .....			92,298.			
Other Revenue		<b>3</b>	Investment income (including dividends, interest, and other similar amounts) .....		291,679.			291,679.
	<b>4</b>	Income from investment of tax-exempt bond proceeds .....						
	<b>5</b>	Royalties .....		216.			216.	
	<b>6 a</b>	Gross rents .....	(i) Real	6,264.				
			(ii) Personal					
	<b>b</b>	Less: rental expenses ...	<b>6b</b>	0.				
	<b>c</b>	Rental income or (loss)	<b>6c</b>	6,264.				
	<b>d</b>	Net rental income or (loss) .....			6,264.			6,264.
	<b>7 a</b>	Gross amount from sales of assets other than inventory .....	(i) Securities	595,143.				
			(ii) Other					
	<b>b</b>	Less: cost or other basis and sales expenses .....	<b>7b</b>	586,148.				
	<b>c</b>	Gain or (loss) .....	<b>7c</b>	8,995.				
	<b>d</b>	Net gain or (loss) .....			8,995.			8,995.
<b>8 a</b>	Gross income from fundraising events (not including \$ 68,700. of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>	125,739.					
<b>b</b>	Less: direct expenses .....	<b>8b</b>	46,058.					
<b>c</b>	Net income or (loss) from fundraising events .....			79,681.			79,681.	
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b>	Less: direct expenses .....	<b>9b</b>						
<b>c</b>	Net income or (loss) from gaming activities .....							
<b>10 a</b>	Gross sales of inventory, less returns and allowances .....		72,044.					
<b>b</b>	Less: cost of goods sold .....	<b>10b</b>	31,361.					
<b>c</b>	Net income or (loss) from sales of inventory .....			40,683.	40,683.			
Miscellaneous Revenue	<b>11 a</b>	MISCELLANEOUS	<b>Business Code</b>	900099	110.		110.	
	<b>b</b>							
	<b>c</b>							
	<b>d</b>	All other revenue .....						
	<b>e</b>	<b>Total.</b> Add lines 11a-11d .....			110.			
<b>12</b>	<b>Total revenue.</b> See instructions .....			35,981,845.	132,981.	0.	386,945.	

**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  X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	6,014,467.	6,014,467.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	862,010.	119,358.	495,335.	247,317.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	6,718,566.	5,036,191.	1,218,775.	463,600.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	121,464.	94,604.	20,148.	6,712.
<b>9</b> Other employee benefits .....	804,368.	608,328.	167,481.	28,559.
<b>10</b> Payroll taxes .....	592,290.	429,566.	132,636.	30,088.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	36,017.		36,017.	
<b>c</b> Accounting .....	181,733.	7,168.	174,565.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17	68,535.			68,535.
<b>f</b> Investment management fees .....	5,168.		5,168.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	13,240,479.	12,657,391.	453,025.	130,063.
<b>12</b> Advertising and promotion .....	64,409.	17,453.	41,519.	5,437.
<b>13</b> Office expenses .....	852,680.	682,665.	124,874.	45,141.
<b>14</b> Information technology .....	616,459.	216,507.	381,033.	18,919.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	626,545.	434,082.	177,118.	15,345.
<b>17</b> Travel .....	1,296,491.	1,121,745.	140,587.	34,159.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	1,007,351.	584,825.	96,095.	326,431.
<b>20</b> Interest .....	1,113.	896.	171.	46.
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	109,826.	102,974.	6,852.	
<b>23</b> Insurance .....	15,865.	8,234.	7,631.	
<b>24</b> Other expenses. Itemize expenses not covered 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.)				
<b>a</b> <b>VESSEL OPERATIONS</b>	602,195.	598,456.	2,481.	1,258.
<b>b</b> <b>VIDEO/MEDIA PRODUCTION</b>	395,112.	184,556.	2,500.	208,056.
<b>c</b> <b>EXHIBITS &amp; KIOSKS</b>	245,843.	245,843.		
<b>d</b> <b>EQUIPMENT RENTAL &amp; MAIN</b>	244,673.	221,852.	18,919.	3,902.
<b>e</b> All other expenses	337,335.	315,316.	-1,723.	23,742.
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	35,060,994.	29,702,477.	3,701,207.	1,657,310.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	1,014,764.	<b>1</b>	2,415,014.
	<b>2</b> Savings and temporary cash investments .....	4,660,782.	<b>2</b>	4,127,977.
	<b>3</b> Pledges and grants receivable, net .....	515,689.	<b>3</b>	5,339,985.
	<b>4</b> Accounts receivable, net .....	208,220.	<b>4</b>	198,469.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	264,554.	<b>9</b>	182,979.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 886,985.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 395,835.	20,060.	<b>10c</b> 491,150.
	<b>11</b> Investments - publicly traded securities .....	885,577.	<b>11</b>	978,477.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	78,351.	<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	1,927,943.	<b>15</b>	1,723,321.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	9,575,940.	<b>16</b>	15,457,372.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,820,805.	<b>17</b>	3,337,238.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	64,791.	<b>19</b>	79,666.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	2,304,111.	<b>25</b>	5,837,251.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	4,189,707.	<b>26</b>	9,254,155.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	2,531,767.	<b>27</b>	3,371,446.
	<b>28</b> Net assets with donor restrictions .....	2,854,466.	<b>28</b>	2,831,771.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	5,386,233.	<b>32</b>	6,203,217.
	<b>33</b> Total liabilities and net assets/fund balances .....	9,575,940.	<b>33</b>	15,457,372.

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	35,981,845.
2	Total expenses (must equal Part IX, column (A), line 25)	2	35,060,994.
3	Revenue less expenses. Subtract line 2 from line 1	3	920,851.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,386,233.
5	Net unrealized gains (losses) on investments	5	-103,868.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	1.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	6,203,217.

**Part 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2024)



**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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	9348867.	11737356.	15356781.	21592928.	35598558.	93634490.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	9348867.	11737356.	15356781.	21592928.	35598558.	93634490.
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						93634490.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>7</b> Amounts from line 4 .....	9348867.	11737356.	15356781.	21592928.	35598558.	93634490.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	58,642.	126,746.	504,625.	125,455.	298,159.	1113627.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	12,702.	9,733.	22,080.	1,552.	110.	46,177.
<b>11 Total support.</b> Add lines 7 through 10						94794294.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	570,965.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	98.78	%
<b>15</b> Public support percentage from 2023 Schedule A, Part II, line 14 .....	<b>15</b>	98.56	%
<b>16a 33 1/3% support test - 2024.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2023.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2024.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2023.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			<input type="checkbox"/>

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 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) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2023 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2023 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> 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)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Rows 11, 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2.

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1.

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3.

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2a, 2b, 3a, 3b.

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		Current Year
1	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	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to under distributions of prior years		
h	Applied to 2024 distributable amount		
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2025.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

Schedule A (Form 990) 2024

**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.)

Lined area for supplemental information.

**Schedule B  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

Name of the organization

**NATIONAL MARINE SANCTUARY FOUNDATION**

Employer identification number

**94-3370994**

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 33 1/3% 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 totaling \$5,000 or more during the year ..... \$ \_\_\_\_\_

**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  <b>NATIONAL MARINE SANCTUARY FOUNDATION</b>	Employer identification number  <b>94-3370994</b>
-------------------------------------------------------------------------	---------------------------------------------------------

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>30,037,839.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>1,011,519.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>NATIONAL MARINE SANCTUARY FOUNDATION</b>	Employer identification number  <b>94-3370994</b>
-------------------------------------------------------------------------	---------------------------------------------------------

**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
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization  <b>NATIONAL MARINE SANCTUARY FOUNDATION</b>	Employer identification number  <b>94-3370994</b>
-------------------------------------------------------------------------	---------------------------------------------------------

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2024**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

**For Organizations Exempt From Income Tax Under Section 501(c) and Section 527**  
**Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.**  
**Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>NATIONAL MARINE SANCTUARY FOUNDATION</b>	Employer identification number (EIN) <b>94-3370994</b>
---------------------------------------------------------------------	-----------------------------------------------------------

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) 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-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990) 2024

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">IF the amount on line 1e, column (a) or (b), is:</th> <th>THEN the lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess 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 over \$1,500,000.	over \$17,000,000	\$1,000,000.		
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:													
not over \$500,000	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess 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 over \$1,500,000.													
over \$17,000,000	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers?		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
<b>c</b> Media advertisements?		X	
<b>d</b> Mailings to members, legislators, or the public?	X		
<b>e</b> Publications, or published or broadcast statements?		X	
<b>f</b> Grants to other organizations for lobbying purposes?		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
<b>i</b> Other activities?	X		3,920.
<b>j</b> Total. Add lines 1c through 1i			3,920.
<b>2a</b> Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments, and similar amounts from members	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):		
<b>a</b> Current year	2a	
<b>b</b> Carryover from last year	2b	
<b>c</b> Total	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
<b>5</b> Taxable amount of lobbying and political expenditures. See instructions	5	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

THE FOUNDATION'S LOBBYING ACTIVITIES SUPPORT ONLINE MAILING ADVOCACY TOOLS THAT SEND LETTERS DIRECTLY TO LEGISLATORS AND OTHER ELECTED OFFICIALS, HOSTING ONLINE HILL FLY-IN MEETINGS AND DISTRICT DAY EVENTS THAT ENABLE THE FOUNDATION TO CONNECT BUSINESSES AND COMMUNITY LEADERS TO THEIR ELECTED OFFICIALS TO VOICE THEIR SUPPORT FOR SANCTUARIES.

**SCHEDULE D**  
**(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization

**NATIONAL MARINE SANCTUARY FOUNDATION**

Employer identification number

**94-3370994**

**Part I**

**Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II**

**Conservation Easements.** 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).
 

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included on line 2a .....	2c
d Number of conservation easements included on line 2c 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 tax year \_\_\_\_\_
- 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 violations, and enforcement of the conservation easements it holds? .....
- Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_
- Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_
- Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....
- 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.

**Part III**

**Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

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.
  - 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.
 

(i) Revenue included on Form 990, Part VIII, line 1 .....	\$ _____
(ii) Assets included in Form 990, Part X .....	\$ _____
- 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:
 

a Revenue included on Form 990, Part VIII, line 1 .....	\$ _____
b Assets included in Form 990, Part X .....	\$ _____

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,740,089.	4,103,404.	5,206,644.	4,934,320.	4,906,353.
b Contributions			10,042.	10,466.	10,027.
c Net investment earnings, gains, and losses	191,638.	636,685.	-887,621.	391,136.	480,678.
d Grants or scholarships					
e Other expenditures for facilities and programs			225,661.	117,083.	261,275.
f Administrative expenses				12,195.	201,463.
g End of year balance	4,931,727.	4,740,089.	4,103,404.	5,206,644.	4,934,320.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 100 %
  - b Permanent endowment .0000 %
  - c Term endowment .0000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                                                                                                                     | Yes                      | No                                  |
|---------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (i) Unrelated organizations?                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations?                                                                                         | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		119,206.	47,604.	71,602.
d Equipment		767,779.	348,231.	419,548.
e Other				

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) 491,150.

**Part VII Investments - Other Securities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

**Part IX Other Assets**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DEPOSITS	30,147.
(2) RIGHT-OF-USE ASSETS	1,693,174.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	1,723,321.

**Part X Other Liabilities**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITIES	1,871,118.
(3) REFUNDABLE ADVANCES	3,824,127.
(4) AMOUNTS HELD FOR OTHERS	142,006.
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	5,837,251.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	35,930,273.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	-103,868.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	11,406.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	46,058.
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	-46,404.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	35,976,677.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	5,168.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	5,168.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	35,981,845.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	35,113,290.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	11,406.
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	46,058.
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	57,464.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	35,055,826.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	5,168.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	5,168.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	35,060,994.

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART V, LINE 4:**  
 THE OPERATIONAL ACTIVITY FUND IS A FUND WITHOUT DONOR RESTRICTIONS THAT SUPPORTS PROGRAMS AND OPERATIONS OF THE FOUNDATION.

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**  
 SPECIAL EVENT EXPENSE INCLUDED AS EXPENSE ON THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON PART VIII, LINE 8B 46,058.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**  
 SPECIAL EVENT EXPENSE INCLUDED AS EXPENSE ON THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON PART VIII, LINE 8B 46,058.









**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 the 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 the 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 the 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 the 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 the 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 the Instructions for Form 5713; don't file with Form 990)* .....  Yes  No

Schedule F (Form 990) (Rev. 12-2024)

**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.

**PART I, LINE 3, COLUMN (E):**

**REGION: EAST ASIA AND THE PACIFIC**

(E) SPECIFIC TYPES OF SERVICES IN REGION: SUPPORT INTERNATIONAL CAPACITY BUILDING FOR SUSTAINABLE MANAGEMENT OF BLUE CARBON HABITATS AND INCLUSION IN NATIONAL GREENHOUSE GAS ACCOUNTING. DEVELOPING CURRICULUM AND FACILITATING WORKSHOPS WILL ENHANCE THE CAPACITY OF SELECTED COUNTRIES TO SUSTAINABLY MANAGE VALUABLE COASTAL HABITATS FOR CARBON STORAGE AND OTHER BENEFITS. PROJECTS IN THIS REGION ALSO PROMOTE FISHERIES GOVERNANCE AND ENFORCEMENT FOR FOOD SECURITY AND BIODIVERSITY IN THE SOUTHEAST ASIA PACIFIC REGION, AND ON STRENGTHENING CAPACITY OF COASTAL MANAGERS IN THE REGION TOWARDS COASTAL COMMUNITY AND ECONOMIC RESILIENCE. STRENGTHENING THE CAPACITY OF REGIONAL AND NATIONAL INSTITUTIONS, ENABLES PARTNERS AND FISHERIES SOURCE NATIONS TO BETTER DETECT AND INTERDICT IUU FISH PRODUCTS BEFORE IT ENTERS GLOBAL COMMERCE. MORE BROADLY, THESE EFFORTS HELP TO REDUCE THE LEVEL OF IUU FISH PRODUCTS BEING LANDED AND EXPORTED FROM NATIONS AROUND THE WORLD, SUPPORTING SUSTAINABLE FISHERIES MANAGEMENT AND LEVELING THE PLAYING FIELD FOR LEGITIMATE FISHERS. BY INCREASING AWARENESS AND COMPETENCIES OF GLOBAL LAW ENFORCEMENT PARTNERS TO COMBAT IUU FISHING, THE USG SEEKS TO PREVENT ILLEGAL FISHING AND RELATED UNLAWFUL ACTIVITIES AT THE SOURCE.

**REGION: CENTRAL AMERICA AND THE CARIBBEAN**

(E) SPECIFIC TYPES OF SERVICES IN REGION: INTER-AMERICAN CONVENTION FOR THE PROTECTION AND CONSERVATION OF SEA TURTLE THROUGHOUT CENTRAL AMERICA AND THE CARRIBEAN (BELIZE, GUATEMALA, HONDURAS, COSTA RICA, PANAMA, DOMINICAN REPUBLIC, EL SALVADOR).

**REGION: SOUTH AMERICA**

(E) SPECIFIC TYPES OF SERVICES IN REGION: BUILDING SYNERGIES BETWEEN CMAR AND USAID SOUTH AMERICA REGIONAL MISSION PARTNER PROJECTS IN THE REGION IN SUPPORT OF CMAR ACTIVITIES, WITH A WORKSHOP IN PERU DESIGNED TO COLLECTIVELY IDENTIFY GAPS AND CHALLENGES AND FORMULATE SOLUTIONS ACROSS KEY TECHNICAL AREAS SUCH FISHERIES MANAGEMENT, MARINE PROTECTED AREAS, AND TOURISM, AND BUILD AND ESTABLISH A METHODOLOGY FOR COLLABORATION AND CONTINUOUS COMMUNICATION IN THE DEVELOPMENT OF JOINT ACTIVITIES.



**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		SEA STARS BRUNCH		NONE	
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	194,439.		194,439.
	2	Less: Contributions	68,700.		68,700.
	3	Gross income (line 1 minus line 2)	125,739.		125,739.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	6,782.		6,782.
	7	Food and beverages	27,864.		27,864.
	8	Entertainment			
	9	Other direct expenses	11,412.		11,412.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				79,681.

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No

b If "Yes," explain: \_\_\_\_\_

- 11** Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13** Indicate the percentage of gaming activity conducted in:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name \_\_\_\_\_

Address \_\_\_\_\_

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b** If "Yes," enter the amount of gaming revenue received by the organization \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party \$ \_\_\_\_\_
- c** If "Yes," enter the name and address of the third party:

Name \_\_\_\_\_

Address \_\_\_\_\_

**16** Gaming manager information:

Name \_\_\_\_\_

Gaming manager compensation \$ \_\_\_\_\_

Description of services provided \_\_\_\_\_

- Director/officer       Employee       Independent contractor

**17** Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:**

(I) NAME OF FUNDRAISER: BLUE STATE

(I) ADDRESS OF FUNDRAISER:

7900 XERXES AVENUE, SOUTH, SUITE 980, MINNEAPOLIS, MN 55431

**Part IV** Supplemental Information *(continued)*

Lined area for supplemental information.

**SCHEDULE I  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization **NATIONAL MARINE SANCTUARY FOUNDATION** Employer identification number **94-3370994**

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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
MOTE MARINE LABORATORY. 1600 KEN THOMPSON PKWY SARASOTA, FL 34236	59-0756643		719,437.	0.			RESTORATION AND MONITORING OF EDR AND MISSION ICONIC REEFS - LONG TERM WAVE
MISSISSIPPI AQUARIUM 2100 E. BEACH BLVD GULFPORT, MS 39501	81-4974774	501 (C) 3	507,498.	0.			DEEP WATER OCTOCORALS AND EXHIBIT
LEHIGH UNIVERSITY ORSP 526 BROADHEAD AVENUE BETHLEHEM, PA 18015	24-0795445	501 (C) 3	440,544.	0.			CONNECTIVITY OF MESOPHOTIC AND DEEP-SEA CORAL POPULATIONS IN THE NORTHEASTERN GULF OF
UNIVERSITY OF THE VIRGIN ISLANDS 2 JOHN BREWERES BAY ST THOMAS, VI 00802	66-0432514	501 (C) 3	275,125.	0.			SCALE USVI CORAL RESTORATION USING SELECTIVE-BREEDING AND ASSISTED EVOLUTION
TEMPLE UNIVERSITY 3223 NORTH BROAD STREET; SUITE 232 PHILADELPHIA, PA 19140	23-1365971	501 (C) 3	274,005.	0.			MDBC DEEP SEA COMMUNITY CHARACTERIZATION AND MDBC CORAL PROPAGATION: 3D PRINTING CORAL STRUCTURES
THE FLORIDA AQUARIUM INC 701 CHANNELSIDE DRIVE TAMPA, FL 33602	59-2807815	501 (C) 3	264,000.	0.			EX-SITU PRODUCTION OF ELKHORN CORAL LONG-SPINED SEA URCHINS FOR MISSION: ICONIC REEFS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 52.

3 Enter total number of other organizations listed in the line 1 table 9.

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

Schedule I (Form 990) (Rev. 12-2024)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GULF OF MAINE RESEARCH INSTITUTE 350 COMMERICAL STREET PORTLAND, ME 04101	01-0504905	501 (C) 3	242,752.	0.			MARINE RESOURCES EDUCATION PROGRAM
AUDUBON NATURE INSTITUTE 6500 MAGAZINE STREET NEW ORLEANS, LA 70118	51-0157624	501 (C) 3	232,000.	0.			MESOPHOTIC CORAL EXHIBIT INSTALLATION AND INTERPRETATION
MOODY GARDENS ONE HOPE BLVD GALVESTON, TX 77554	76-0288131	501 (C) 3	200,000.	0.			GULF MESOPHOTIC AND DEEP BENTHIC COMMUNITIES TECHNICAL DIVING OPERATIONS AND
UNIVERSITY OF GUAM MARINE LABORATORY - 303 UNIVERSITY DR., UOG MARINE LABE, UOG STATION - MANGILAO, GUAM 96923	98-0032933	501 (C) 3	185,494.	0.			SUPPORTING AND EXPANDING CORAL RESTORATION IN GUAM, MICRONESIA
HI DEPARTMENT OF LAND AND NATURAL RESOURCES - 1151 PUNCHBOWL ST. RM 330 - HONOLULU , HI 96813	99-0266119		183,604.	0.			STATEWIDE COORDINATION USING THE HAWAII CORAL REEF STRATEGY MAKAI RESTORATION ACTION PLANS
JOHNSTON APPLIED MARINE SCIENCE PMB 280 PO BOX 10001 SAIPAN, MP 96950	66-0948844		154,262.	0.			CORAL REEF RESTORATION AND CAPACITY BUILDING TO ENHANCE ECOSYSTEM AND COMMUNITY RESILENCE
UNIVERSITY OF HAWAII 2440 CAMPUS ROAD, BOX 368 HONOLULU , HI 96822	99-6000354	501 (C) 3	146,149.	0.			SEDIMENT THRESHOLDS TO IMPROVE CORAL RESTORATION OUTCOMES AT OLOWALU REEF AND HE'ELA AHUPUA'S
UNIVERSITY CORPORATION AT MONTEREY BAY - 100 CAMPUS CENTER - SEASIDE, CA 93955	77-0387459	501 (C) 3	141,693.	0.			IMMERSIVE VR DRIVE CURRICULUM: CHUMASH HERITAGE NATIONAL MARINE SANCTUARY
SUSTAINABLE OCEANS & REEFS 103 PACIFIC AVENUE TAVERNIER, FL 33070	99-4246258	501 (C) 3	132,708.	0.			CAPACITY EXPANSIONS FOR IN-SITU DIADEMA SETTLEMENT AND GROW-OUT FOR THE BENEFIT OF

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DUKE UNIVERSITY 2200 W. MAIN STREET STE 710 DURHAM, NC 27705	56-0532129	501 (C) 3	131,250.	0.			LONG TERM WAVE ATTENUATION AND HYDRODYNAMICS STUDY
NATIONAL PARK TRUST 401 E JEFFERSON STREET SUITE 207 ROCKVILLE, MD 20850	52-1691924	501 (C) 3	120,000.	0.			YOUTH AND FAMILY FISHING DAYS IN NATIONAL MARINE SANCTUARIES 2024
REGIONAL SCIENCE CONSORTIUM AT PRESQUE ISLE CENTER - 30 PENINSULA DRIVE, SUITE 9 - ERIE, PA 16505	03-0455278	501 (C) 3	100,000.	0.			DOCUMENTATION OF THE SHIPWRECKS AND SUBMERGED CULTURAL SITES IN THE PROPOSED LAKE ERIE
TEXAS A&M UNIVERSITY AT GALVESTON PO BOX 1675 GALVESTON, TX 77553	74-2125225	501 (C) 3	97,290.	0.			GENOTYPING AND PARENTAGE ANALYSIS OF MESOPHOTIC CORALS
GULF AND CARIBBEAN FISHERIES INSTITUTE - 175 CARTERS LANDING - PINEY FLATS, TN 37686	59-2592122	501 (C) 3	80,379.	0.			CONNECT IUUF WORKSHOPS FOR CARIBBEAN ENFORCEMENT OFFICIALS
EAST-WEST CENTER 1601 EAST-WEST ROAD HONOLULU, HI 96848	99-0161603	501 (C) 3	76,000.	0.			SUPPORTING AKAMAI AGRICULTURE IN KEAUKAHA-PANA'EWA COMMUNITY USING A PDKE
CALIFORNIA STATE UNIVERSITY CHANNEL ISLANDS - ATTN: BUSINESS SERVICES, ONE UNIVERSITY DRIVE - CAMARILLO, CA 93012	91-2153805	501 (C) 3	65,934.	0.			HIGH-IMPACT AND LARGE MARINE DEBRIS REMOVAL THROUGHOUT THE NATIONAL MARINE SANCTUARY SYSTEM
KEAUKAHA-PANA'EWA COMMUNITY ALLIANCE - PO BOX 6844 - HILO, HI 96720	46-1490067	501 (C) 3	60,673.	0.			POLY FORESTRY AND CLIMATE DASHBOARD PROJECT
CORAL RESTORATION FOUNDATION 89111 OVERSEAS HWY TAVERNIER, FL 33070	65-1054647	501 (C) 3	58,500.	0.			RESTORATION AND MONITORING OF EDR AND CORAL BLEACHING EMERGENCY RESPONSE

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAKAH INDIAN TRIBE PO BOX 115, 100 RESORT DRIVE NEAH BAY, WA 98357			50,000.	0.			ENGAGING IN AND COMMUNICATING OCEAN SCIENCE IN MAKAH WATERS
QUINAULT INDIAN NATION PO BOX 189 TAHOLAHA, WA 98587	91-0760952		50,000.	0.			SUPPORT QUINAULT INDIAN NATION PARTICIPATION IN OLYMPIC COAST NATIONAL MARINE SANCTUARY,
SEA RESEARCH FOUNDATION 55 COOGAN BOULEVARD MYSTIC, CT 06355	06-1480300	501 (C) 3	47,833.	0.			COMMUNITY ECOLOGY IN SUPPORT OF MANAGEMENT FOR STELLWAGEN BANK AND OCEAN EXPLORATION
SKIDMORE COLLEGE 815 NORTH BROADWAY SARATOGA SPRING, NY 12866	14-1338562	501 (C) 3	41,262.	0.			SEDIMENT DYNAMICS FOR CORAL REEF RESTORATION SITE POTENTIAL AND RESILIENCY
CITY OF CAPITOLA 420 CAPITOLA AVENUE CAPITOLA, CA 95010	94-6002834	GOV'T	40,000.	0.			CITY OF CAPITOLA WHARF INTERPRETIVE SIGNAGE PROJECT
MALAMA HONUA PUBLIC CHARTER SCHOOL 41-054 EHUKAI STREET WAIMANALO, HI 96795	46-5734248	501 (C) 3	40,000.	0.			OCEAN GUARDIAN SCHOOL GRANT 2024-2025
WEST VIRGINIA UNIVERSITY FOUNDATION - ONE WATERFRONT PLACE, 7TH FLOOR, PO BOX 1650 - MORGANTOWN, WV 26501	55-6017181	501 (C) 3	40,000.	0.			UNDERSTANDING HUMAN USE THUNDER BAY AND WISCONSIN SHIPWRECK COAST NMS SETTINGS
THE OCEAN FOUNDATION (FISCAL SPONSOR FOR THE OCEAN PROJECT) - 1320 19TH STREET, NW, SUITE 500 - WASHINGTON, DC 20036	71-0863908	501 (C) 3	39,050.	0.			GROWING DIVERSE YOUTH ENGAGEMENT AND LEADERSHIP FOR OUR OCEAN
SECORE INTERNATIONAL 4673 NORTHWEST PARKWAY HILLIARD, OH 43026	47-5385160	501 (C) 3	37,573.	0.			TOWARDS A US PACIFIC IMPLEMENTATION NETWORK FOR CORAL LARVAL PROPAGATION FOR

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GULF REACH INSTITUTE 7326 GOLD RIDGE ROAD CORPUS CHRISTI, TX 78413	83-1384441	501 (C) 3	34,045.	0.			GENERAL SUPPORT
WISCONSIN MARITIME MUSEUM 75 MARITIME DRIVE MANITOWOC, WI 54220	39-1128473	501 (C) 3	25,000.	0.			EXHIBIT UPGRADES AT WISCONSIN MARITIME MUSEUM
SEAFOOD NUTRITION PARTNERSHIP 1001 19TH STREET N. SUITE 1200 ARLINGTON, VA 22209	90-0948097	501 (C) 3	25,000.	0.			STATE OF THE SCIENCE SYMPOSIUM
CALIFORNIA MARINE SANCTUARY FOUNDATION - PO BOX 8346 - SANTA CRUZ, CA 95061	94-3225675	501 (C) 3	21,700.	0.			PROTECTING BLUE WHALES AND BLUE SKIES IN THE MONTEREY BAY NATIONAL MARINE SANCTUARY AND TEAM
JOHNS HOPKINES UNIVERSITY APPLIED PHYSICS LABORATORY - 11100 JOHNS HOPKINS ROAD 1-S140 - LAUREL, MD 20723	52-0595111	501 (C) 3	20,000.	0.			BIENNIAL NATIONAL WORKSHOP ON MARINE ENVIRONMENTAL DNA
MINORITIES IN SHARK SCIENCE PO BOX 10493 BRADENTON, FL 34282	85-2192211	501 (C) 3	20,000.	0.			MISSION AQUATICA
S.C. SEA GRANT CONSORTIUM 287 MEETING STREET CHARLESTON, SC 29401	30-0757407		20,000.	0.			OCEAN ODYSSEY EDUCATION PROGRAM: CRUISING THE CAREER COASTLINE
THE ARTIST BOAT 13330 SETTEGAST ROAD GALVESTON, TX 77554	56-2394277	501 (C) 3	20,000.	0.			SEAING OUR FUTURE: A SCIENCE EXPLORATION ADVENTURE BUILDING CAREER SKILLS
SANTA BARBARA CHANNELKEEPER 714 BOND AVENUE SANTA BARBARA, CA 93103	91-2151460	501 (C) 3	15,000.	0.			WATERSHED BRIDGE PROGRAM

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE INSTITUTE OF DIVING DBA MAN IN THE SEA MUSEUM - 17314 PANAMA CITY BEACH PARKWAY - PANAMA CITY BEACH, FL 32413	59-1765527	501 (C) 3	14,000.	0.			EXHIBIT FOR NEDU AND MESOPHOTIC AND DEEP BENTHIC COMMUNITIES (MDBC) RESTORATION CORAL
UNIVERSITY OF NORTH CAROLINA AT WILMINGTON - 601 S COLLEGE ROAD - WILMINGTON, NC 28403	56-1258660	501 (C) 3	13,408.	0.			BENTHIC-PELAGIC COUPLING ON MESOPHOTIC REEFS
OCEAN RESEARCH COLLEGE ACADEMY AT EVERTT COMMUNITY COLLEGE - 1205 CRAFTSMAN WAY SUITE 203 - EVERETT, WA 98201		501 (C) 3	12,500.	0.			OCEAN DATA SYNTHESIS WITH STATISTICS
NEW MEXICO WILDLIFE FEDERATION 3620 WYOMING BLVD. NE, SUITE 222 ALBURQUERQUE, NM 87111	85-0160947	501 (C) 3	12,000.	0.			SUPPORT FOR NYCALC 2024
MARINE TECHNOLOGY SOCIETY INC. (MTS) - ONE THOMAS CIRCLE; SUITE 700 - WASHINGTON, DC 20005	52-0805471	501 (C) 3	10,043.	0.			OCEAN EXPLORATION VIDEO CHALLENGE
NATIONAL MARINE EDUCATORS ASSOCIATION - 50 FURBISH ROAD - WELLS, ME 04090	01-0412164	501 (C) 3	10,000.	0.			ANNUAL CONFERENCE OF MARINE EDUCATION PROFESSIONALS
IUP RESEARCH INSTITUTE 1179 GRANT STREET; SUITE 1 INDIANA, PA 15701	57-1175778	501 (C) 3	9,618.	0.			INDIGENOUS ENGAGEMENT IN SUBMERGED CULTURAL RESOURCES MANAGEMENT FIELD SCHOOL
AKIAK NATIVE COMMUNITY TRIBE PO BOX 52127 AKIACHAK, AK 99551			7,500.	0.			AKIAK ORGANIZED CLEAN-UP
FRIENDS OF THUNDER BAY NMS 500 W FLETCHER STREET ALPENA, MD 49707	27-3494471	501 (C) 3	7,500.	0.			MARINE DEBRIS COLLECTION AND DATA ANALYSIS ON GREAT LAKES SHORELINES

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GULLAH/GEECHEE LEGACY PO BOX 1207 ST HELENA ISLAND, SC 29920	85-3735782		7,500.	0.			EXPANSION OF THE GULLAH/GEECHEE REMOVAL ENGAGING ARTISTS THROUGH ENVIRONMENTAL (CREATE)
SONSORAL STATE GOVERNMENT PO BOX 1077 KOROR, PALAU 96940		GOV'T	7,500.	0.			BEACH CLEAN-UPS ON THE ISLANDS OF THE STATE OF SONSOROL: DONGOSARO, FANNA, PULO ANNA AND
UNIVERSITY OF HAWAII AT THE KEWALO MARINE LABORATORY - 41 AHUI STREET - HONOLULU, HI 96813	99-6000354	501 (C) 3	7,500.	0.			INCREASING OCEAN LITERACY THROUGH EXPLORATION OF CORALS EATING MICROPLASTICS
THE ELIZABETH RIVER PROJECT 4610 COLLEY AVENUE NORFOLK, VA 23508	54-1663058	501 (C) 3	7,493.	0.			C.L.E.A.N. YOUTH REMOVE ELIZABETH RIVER MARINE DEBRIS IN NORFOLK, VIRGINIA
RESEARCH FOUNDATION OF CUNY ON BEHALF OF QUEEN COLLEGE CUNY - QUEENS COLLEGE CUNY, 650-30 KISSENA BLVD - FLUSHING, NY 11367	11-6080521	501 (C) 3	7,470.	0.			ASSESSING MARINE DEBRIS TO FOSTER STEM ENGAGEMENT AND ENVIRONMENTAL STEWARDSHIP
SEA TURTLE INC 6617 PADRE BLVD SOUTH PADRE ISLAND, TX 78597	74-2042030	501 (C) 3	7,040.	0.			ONE YEAR OF SUSTAINABILITY WITH SEA TURTLE INC
RESILIENCE EDUCATION TRAINING AND INNOVATION CENTER - 701 COLUMBIA STREET - BROOKLYN, NY 11231	81-2381283	501 (C) 3	7,000.	0.			RETI CENTER MARINE DEBRIS FIELD KIT: A PILOT PROGRAM
NATIVE VILLAGE OF AFOGNAK 115 MILL BAY ROAD KODIAK, AK 99615			6,116.	0.			CATCHER BEACH CLEAN-UP
MYSITC RIVER WATERSHED ASSOCIATION 20 ACADEMY STREET, SUITE 306 ARLINGTON, MA 02476	23-7221094	501 (C) 3	5,860.	0.			TRASH, STORMWATER AND MARINE DEBRIS CURRUCULUM - EXPERIENTIAL FIELD TRIPS

Schedule I (Form 990)



**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

EACH GRANTEE IS REQUIRED BY MUTUALLY SIGNED AGREEMENT TO SUBMIT TO THE FOUNDATION BOTH NARRATIVE AND FINANCIAL REPORTS USING SPECIFIC FORMS. REPORTS ARE DUE TO THE FOUNDATION ONCE A YEAR FOR THE DURATION OF THE PROJECT, AND GRANTEES ARE EXPECTED TO SUBMIT A FINAL REPORT AS WELL. THE FOUNDATION RESERVES THE RIGHT AS NECESSARY TO MONITOR AND CONDUCT AN EVALUATION OF THE PROJECT BEING FUNDED, WHICH MAY INCLUDE A VISIT FROM THE FOUNDATION'S PERSONNEL TO OBSERVE THE ORGANIZATION'S PROJECT, DISCUSS THE PROJECT WITH THE ORGANIZATION'S PERSONNEL, AND REVIEW FINANCIAL AND OTHER MATERIALS CONNECTED WITH THE ACTIVITIES FUNDED BY THE FOUNDATION.

**PART II, LINE 1, COLUMN (H):**

NAME OF ORGANIZATION OR GOVERNMENT: MOTE MARINE LABORATORY.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTORATION AND MONITORING OF EDR AND MISSION ICONIC REEFS - LONG TERM WAVE ATTENUATION AND HYDRO AMD RESTORING AND PROTECTING US MARINE HABITATS

NAME OF ORGANIZATION OR GOVERNMENT: LEHIGH UNIVERSITY

**Part IV Supplemental Information**

(H) PURPOSE OF GRANT OR ASSISTANCE: CONNECTIVITY OF MESOPHOTIC AND DEEP-SEA CORAL POPULATIONS IN THE NORTHEASTERN GULF OF MEXICO

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF THE VIRGIN ISLANDS  
(H) PURPOSE OF GRANT OR ASSISTANCE: SCALE USVI CORAL RESTORATION USING SELECTIVE-BREEDING AND ASSISTED EVOLUTION TECHNOLOGIES

NAME OF ORGANIZATION OR GOVERNMENT: MOODY GARDENS  
(H) PURPOSE OF GRANT OR ASSISTANCE: GULF MESOPHOTIC AND DEEP BENTHIC COMMUNITIES TECHNICAL DIVING OPERATIONS AND COORDINATION

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF HAWAII  
(H) PURPOSE OF GRANT OR ASSISTANCE: SEDIMENT THRESHOLDS TO IMPROVE CORAL RESTORATION OUTCOMES AT OLOWALU REEF AND HE'ELA AHUPUA'S RESTORATION PROJECT

NAME OF ORGANIZATION OR GOVERNMENT: SUSTAINABLE OCEANS & REEFS  
(H) PURPOSE OF GRANT OR ASSISTANCE: CAPACITY EXPANSIONS FOR IN-SITU DIADEMA SETTLEMENT AND GROW-OUT FOR THE BENEFIT OF MISSION: ICONIC REEFS RESTORATION NEEDS

NAME OF ORGANIZATION OR GOVERNMENT: REGIONAL SCIENCE CONSORTIUM AT PRESQUE ISLE CENTER  
(H) PURPOSE OF GRANT OR ASSISTANCE: DOCUMENTATION OF THE SHIPWRECKS AND SUBMERGED CULTURAL SITES IN THE PROPOSED LAKE ERIE NATIONAL MARINE SANCTUARY

NAME OF ORGANIZATION OR GOVERNMENT: EAST-WEST CENTER  
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING AKAMAI AGRICULTURE IN KEAUKAHA-PANA'EWA COMMUNITY USING A PDKE CO-PRODUCTION APPROACH

NAME OF ORGANIZATION OR GOVERNMENT: QUINAULT INDIAN NATION  
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT QUINAULT INDIAN NATION PARTICIPATION IN OLYMPIC COAST NATIONAL MARINE SANCTUARY, INTERGOVERNMENTAL POLICY COUNCIL

NAME OF ORGANIZATION OR GOVERNMENT: SEA RESEARCH FOUNDATION  
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY ECOLOGY IN SUPPORT OF MANAGEMENT FOR STELLWAGEN BANK AND OCEAN EXPLORATION ADVENTURE NATIONAL MARINE SANCTUARY

NAME OF ORGANIZATION OR GOVERNMENT: SECORE INTERNATIONAL  
(H) PURPOSE OF GRANT OR ASSISTANCE: TOWARDS A US PACIFIC IMPLEMENTATION NETWORK FOR CORAL LARVAL PROPAGATION FOR RESTORATION AND ENHANCEMENT

NAME OF ORGANIZATION OR GOVERNMENT: CALIFORNIA MARINE SANCTUARY FOUNDATION  
(H) PURPOSE OF GRANT OR ASSISTANCE: PROTECTING BLUE WHALES AND BLUE SKIES IN THE MONTEREY BAY NATIONAL MARINE SANCTUARY AND TEAM OCEAN VOLUNTEER PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT: THE INSTITUTE OF DIVING DBA MAN IN THE SEA MUSEUM  
(H) PURPOSE OF GRANT OR ASSISTANCE: EXHIBIT FOR NEDU AND MESOPHOTIC AND DEEP BENTHIC COMMUNITIES (MDBC) RESTORATION CORAL RESTORATION PROJECT

**Part IV Supplemental Information**

NAME OF ORGANIZATION OR GOVERNMENT: GULLAH/GEECHEE LEGACY  
(H) PURPOSE OF GRANT OR ASSISTANCE: EXPANSION OF THE GULLAH/GEECHEE  
REMOVAL ENGAGING ARTISTS THROUGH ENVIRONMENTAL (CREATE) ACTION PLAN

NAME OF ORGANIZATION OR GOVERNMENT: SONSORAL STATE GOVERNMENT  
(H) PURPOSE OF GRANT OR ASSISTANCE: BEACH CLEAN-UPS ON THE ISLANDS OF  
THE STATE OF SONSOROL: DONGOSARO, FANNA, PULO ANNA AND MELIELI

Multiple horizontal lines for supplemental information.

**SCHEDULE J  
(Form 990)**

(Rev. December 2024)  
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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization

**NATIONAL MARINE SANCTUARY FOUNDATION**

Employer identification number

**94-3370994**

**Part I Questions Regarding Compensation**

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

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

Schedule J (Form 990) (Rev. 12-2024)

**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		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOEL JOHNSON PRESIDENT & CEO (FROM 07/2	(i)	277,656.	0.	0.	0.	16,144.	293,800.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) VERONICA ALI CFO	(i)	203,266.	0.	0.	5,762.	1,684.	210,712.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ALLISON ALEXANDER VICE PRESIDENT OF PROGRAM	(i)	158,123.	3,000.	0.	4,906.	17,601.	183,630.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARGARET KNUDSON VP OF DEVELOPMENT (THROUGH 10/24)	(i)	163,263.	0.	0.	0.	10,604.	173,867.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

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

PART I, LINE 7:

BONUSES WERE MERIT BASED AND THE FOLLOWING EMPLOYEES RECEIVED BONUSES:

ALLISON ALEXANDER \$3,000

**SCHEDULE O  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization

NATIONAL MARINE SANCTUARY FOUNDATION

Employer identification number

94-3370994

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:  
AND PRESERVE AMERICA'S MARITIME RESOURCES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

BOTH THRIVING MARINE INDUSTRIES AND ROBUST COASTAL TOURISM MARKETS. THE PROGRAM WORKS TO ENSURE THAT SANCTUARY MARINE TOURISM SECTORS REMAIN COMPETITIVE AND PROFITABLE FOR GENERATIONS OF AMERICAN WORKERS AND BUSINESS OWNERS. WE ARE COMMITTED TO BUILDING HEALTHIER MARINE ECOSYSTEMS AND A STRONGER ECONOMIC FOUNDATION THAT CREATES JOBS AND GENERATES REVENUE WHILE MAINTAINING THE NATURAL ASSETS THAT MAKE SANCTUARIES A PREMIER DESTINATION FOR ALL VISITORS.

AS HOTSPOTS FOR BIODIVERSITY, NATIONAL MARINE SANCTUARIES ARE CRITICAL PLATFORMS FOR DEVELOPING COMPREHENSIVE WHALE PROTECTION SOLUTIONS THROUGH STRATEGIC PARTNERSHIPS WITH COMMUNITIES, TECHNOLOGY COMPANIES, AND INDUSTRY STAKEHOLDERS. THE FOUNDATION FUNDS PARTNER-LED DISENTANGLEMENT WORKSHOPS TO IMPROVE EMERGENCY RESPONSE AND PREPAREDNESS TO RESCUE ENTANGLED WHALES, SUPPORTS CUTTING-EDGE RESEARCH TO IDENTIFY WHALE USE AREAS TO REDUCE CO-OCCURRENCE WITH FISHING ACTIVITY, VESSEL TRAFFIC, AND OTHER THREATS, AND ACTIVELY TESTS AND SUPPORTS NEW COMMERCIAL FISHING GEAR INNOVATIONS THAT REDUCE THE RISK OF ENTANGLEMENTS WHILE SUPPORTING MARITIME ECONOMIES AND LIVELIHOODS.

IN 2024, THE NATIONAL MARINE SANCTUARY FOUNDATION IN CLOSE PARTNERSHIP WITH NOAA FISHERIES, FUNDED AND HOSTED ANNUAL TRAINING FOR MEMBERS OF THE CALIFORNIA LARGE WHALE ENTANGLEMENT RESPONSE NETWORK IN MONTEREY BAY AND CHANNEL ISLANDS NMS. SUCH TRAININGS ARE CRITICAL FOR PREPARING FOR THE HIGH SEASON OF EMERGENCY RESCUES AND INCLUDE ON-THE-WATER VESSEL OPERATIONS WHERE RESPONDERS ARE ABLE TO PRACTICE VALUABLE SKILLS WHILE SIMULATING REAL-WORLD RESCUE SCENARIOS TO PRACTICE SAFETY AND REDUCE RISK. THE FOUNDATION ALSO ACHIEVED SIGNIFICANT PROGRESS IN TESTING FISHING GEAR INNOVATIONS IN PARTNERSHIP WITH CALIFORNIA FISHERMEN, WHICH COULD OFFER SOLUTIONS TO REDUCE WHALE ENTANGLEMENT RISK WHILE ALLOWING FISHING TO CONTINUE. THESE TRIALS ARE VITAL FOR ASSESSING THE GEAR'S PERFORMANCE AND FEASIBILITY IN REAL-WORLD CONDITIONS AND FOR OBTAINING FEEDBACK ON HOW TO IMPROVE AND REFINE THE GEAR TO MEET SPECIFIC NEEDS. AS OF YEAR-END 2024, COMMERCIAL DUNGENESS CRAB FISHERMEN HAVE CARRIED OUT OVER 745 TRIALS WITH FIVE DIFFERENT SYSTEMS.

MARINE DEBRIS REMOVAL REPRESENTS A GROWING INITIATIVE FOR THE FOUNDATION, ENCOMPASSING BOTH UNDERWATER AND COASTAL CLEANUP EFFORTS. IN 2024, THE FOUNDATION AND ITS PARTNERS REMOVED 30,380 POUNDS OF DEBRIS UNDER THE FOUNDATION SPONSORED I.CARE TRASH DERBY AND THE FOUNDATION'S TWO COMMUNITY-BASED DEBRIS REMOVAL PROGRAMS: GOAL: CLEAN SEAS FLORIDA KEYS AND CHANNEL ISLANDS MARINE DEBRIS REMOVAL PROGRAM IN THE FLORIDA KEYS AND CHANNEL ISLANDS (AS OF DEC. 2024). THE FOUNDATION CONTINUED ITS MULTI-YEAR LARGE MARINE DEBRIS EFFORT, INITIATED IN 2023, TO REMOVE LARGE DEBRIS WHICH INCLUDES ABANDONED OR DERELICT VESSELS AND STRUCTURES, FROM FIVE NATIONAL MARINE SANCTUARIES. THE FOUNDATION SECURED FEDERAL, STATE, AND TRIBAL PERMITS AND WORKED ALONGSIDE TEN PARTNERS AT FEDERAL, STATE, AND TRIBAL LEVELS TO REMOVE 16 DERELICT

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Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

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VESSELS, AND AN OLD BRIDGE PONTOON FROM THE WATERS OF THE OLYMPIC COAST NATIONAL MARINE SANCTUARY, THE QUILEUTE USUAL AND ACCUSTOMED TREATY AREA, AND THE MAKAH USUAL AND ACCUSTOMED TREATY AREA TOTALING 7,896,669 POUNDS OF DEBRIS.	

THE NATIONAL MARINE SANCTUARY FOUNDATION IS SUPPORTING COMMUNITY PARTNERS ON RESTORATION INITIATIVES ACROSS THE COUNTRY TO REVERSE THE DEGRADATION AFFECTING MANY KEY HABITATS INCLUDING CORAL RESTORATION IN FLORIDA, GUAM, THE COMMONWEALTH OF NORTHERN MARIANA ISLANDS, HAWAII, AMERICAN SAMOA AND THE U.S. VIRGIN ISLANDS, DEEPWATER AND MESOPHOTIC CORAL COMMUNITIES IN THE GULF OF MEXICO AND SUBMERGED AQUATIC VEGETATION ALONG THE WEST COAST. SEVEN GRANTS WERE AWARDED TO SUPPORT CAPACITY-BUILDING EFFORTS FOR CORAL RESTORATION IN THE US PACIFIC. THE FOUNDATION HOSTED TWO WORKSHOPS FOR PARTNERS IN THE PACIFIC JURISDICTIONS TO BUILD CAPACITY FOR SEXUAL CORAL RESTORATION EFFORTS AND INNOVATIVE MONITORING TECHNIQUES AS WELL AS A WORKSHOP TO BUILD PARTNERSHIPS ACROSS BOTH KELP AND CORAL RESTORATION PARTNERS. IN THE GULF OF MEXICO, THE FOUNDATION'S ROV WAS UPGRADED TO INCREASE ITS DEPTH CAPACITY FOR FURTHER RESEARCH ON MESOPHOTIC AND DEEP BENTHIC CORAL (MDBC) REEFS, AND AQUARIUM AND MUSEUM PARTNERS HAVE DESIGNED NEW EXHIBITS TO DISPLAY COLLECTED MESOPHOTIC CORALS AND CONDUCT SCIENTIFIC EXPERIMENTS TO TEST THE FEASIBILITY OF LAND-BASED PROPAGATION TECHNIQUES. PROGRESS WAS MADE IN A PROJECT TO STRENGTHEN THE SCIENCE AND COLLABORATIVE DECISION-MAKING TOOLS THAT CONTRIBUTE TO THE CONSERVATION AND MANAGEMENT OF NEARSHORE HABITATS THAT SUPPORT FOUNDATIONAL SUBMERGED AQUATIC VEGETATION, INCLUDING THE PUBLICATION OF A LITERATURE REVIEW, TWO MANAGER WORKSHOPS IN CALIFORNIA AND WASHINGTON, AND A WEBINAR.

PROJECT ADVANCEMENT WAS MADE WITHIN THE ICONIC REEF GUARDIANS (IRG) PROGRAM WHICH FURTHER ENHANCES THE COMMUNITY STEWARDSHIP EFFORTS AND LOCAL DIVE SHOP BUSINESSES INVOLVEMENT WITHIN THE CONSERVATION AND RESTORATION OF THE VITAL CORAL REEF ECOSYSTEMS FOUND WITHIN THE FLORIDA KEYS NATIONAL MARINE SANCTUARY. IRG CURRENTLY OFFERS TWO UNIQUE PROGRAMMATIC EXPERIENCES, PASSIVE CORAL NURSERY AND CORAL HEALTH, AND CURRENTLY PARTNERS WITH NINE DIVE SHOPS WHICH HAVE SUBSEQUENTLY INCREASED PROGRAM LOCALITY THROUGHOUT THE ENTIRETY OF THE FLORIDA KEYS. THERE ARE TWO ADDITIONAL PROGRAMMATIC EXPERIENCES, REEF AND ACTIVE CORAL NURSERY, WHICH ARE CURRENTLY UNDER DEVELOPMENT AND SET TO LAUNCH IN 2025.

THE FOUNDATION CREATED A NEW SANCTUARY GUARDIAN INITIATIVE THAT FOCUSES ON EXPANDING VISITOR EXPERIENCES, STRENGTHENING LOCAL BUSINESS PARTNERSHIPS, AND DEVELOPING INNOVATIVE TOURISM PRODUCTS THAT PROTECT LOCAL HABITATS AND DRIVE ECONOMIC GROWTH FOR COASTAL COMMUNITIES. THIS INITIATIVE REPRESENTS A SMART INVESTMENT IN AMERICAN TOURISM INFRASTRUCTURE THAT PAYS DIVIDENDS THROUGH INCREASED VISITOR SPENDING, JOB CREATION, AND LONG-TERM ECONOMIC STABILITY FOR FLORIDA KEYS COMMUNITIES. THE FOUNDATION HOSTED THE FIRST-EVER CORAL THERMAL STRESS DESIGN THINKING CHALLENGE WITH 64 ATTENDEES IN WHICH 18 ENGINEERING STUDENTS FROM GEORGIA TECH, TEXAS A&M, UNIVERSITY OF MIAMI, AND THE UNIVERSITY OF DELAWARE RANGING FROM UNDERGRADUATES TO PHD CANDIDATES DESIGNED A NOVEL CORAL SHADING DEVICE WHICH IS IN CONTINUED REFINEMENT PRIOR TO IN-WATER FIELD VALIDATIONS IN 2025. THIS CHALLENGE WAS PART OF A NEW FOUNDATION EVENT SERIES -- SANCTUARY SOLUTIONS -- THAT CREATES TANGIBLE SOLUTIONS TO PRESSING ECONOMIC AND ECOLOGICAL ISSUES WITHIN

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**SANCTUARIES.**

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:  
 INPUT TO FISHERIES ECOLOGY, WHALE BEHAVIORAL ECOLOGY, WHALE AND BIRD  
 TAGGING TO BETTER UNDERSTAND WHERE KEYSTONE WILDLIFE AND ENDANGERED  
 SPECIES FOUND IN SANCTUARIES. THIS INCLUDES ONE OF THE LONGEST-RUNNING,  
 CONSECUTIVE-YEAR SEABIRD TAGGING PROJECTS ON THE U.S. EAST COAST.  
 LONG-TERM DATA COLLECTION AND PRESERVATION ARE CENTRAL TO OUR EFFORTS,  
 ENABLING RESEARCHERS TO DETECT TRENDS OVER TIME, INFORM POLICY  
 DECISIONS, AND SUPPORT THE CONTINUED REUSE AND INTEGRATION OF DATA  
 ACROSS DISCIPLINES.

RECENT TAGGING OF NORTH ATLANTIC RIGHT WHALES, IS HELPING INVESTIGATE  
 FINE-SCALE WHALE BEHAVIOR IN RELATION TO ENVIRONMENTAL CONDITIONS AND  
 PREY DISTRIBUTION. WE ADVANCE WATER QUALITY MONITORING AND HABITAT  
 ASSESSMENTS THAT ESTABLISH CRITICAL BASELINES FOR CORAL REEF HEALTH,  
 ENABLING FASTER IDENTIFICATION AND MITIGATION OF ENVIRONMENTAL THREATS.  
 WE SUPPORT ACOUSTIC MONITORING PROJECTS USING STANDARDIZED MEASUREMENTS  
 TO IDENTIFY MARINE ANIMAL, PHYSICAL, AND HUMAN SOUNDS ACROSS 30 SITES.  
 A RELATED PROJECT USES DRIFTING ACOUSTIC RECORDERS IN THE CALIFORNIA  
 CURRENT, INCLUDING THE WEST COAST SANCTUARIES. THE PROJECT EXPANDED TO  
 HAWAII IN 2023 AND NOW COVERS THE PACIFIC ISLANDS REGION. BUILDING ON  
 THIS WORK, WE USE MACHINE LEARNING TO DETECT AND CLASSIFY SOUNDS IN  
 SANCTUARIES ACROSS AMERICAN SAMOA, PAPAHAUMOKUKEA, AND HAWAII,  
 CREATING TRAINING DATASETS AND MODELS FOR SANCTUARY MANAGEMENT. THESE  
 EFFORTS ALSO SUPPORT VESSEL SPEED REDUCTION PROGRAMS IN CALIFORNIA BY  
 DEVELOPING NOISE METRICS ALIGNED WITH REGIONAL AND INTERNATIONAL  
 STANDARDS.

WE FUND SOCIOECONOMIC RESEARCH THAT PROVIDES INFORMATION ON HOW MANY  
 PEOPLE ENGAGE IN AND HOW THEY USE NATIONAL MARINE SANCTUARIES. THIS  
 WORK IS IMPORTANT BECAUSE IT BENEFITS LOCAL COMMUNITIES TO HAVE AN  
 INCREASED UNDERSTANDING OF THE IMPORTANCE OF NATIONAL MARINE  
 SANCTUARIES TO THEIR LOCAL ECONOMIES AS WELL AS HAVE ACCESS TO CRITICAL  
 SOCIOECONOMIC DATA THAT CAN FURTHER INFORM LOCAL COMMUNITY DISCUSSIONS  
 REGARDING RESOURCE CONSERVATION AND REGULATORY PROCESSES, AND  
 DECISIONS. THE FOUNDATION SUPPORTS THE INTEGRATION OF SCIENCE  
 ACTIVITIES ACROSS THE NATIONAL MARINE SANCTUARY SYSTEM TO ENHANCE  
 AWARENESS AND ENGAGEMENT WITH LOCAL COMMUNITIES ACROSS THE COUNTRY WITH  
 REGARDS TO ONGOING COLLABORATIVE RESEARCH, COMMUNITY SCIENCE,  
 MONITORING AND ASSESSMENT ACTIVITIES. THE FOUNDATION FUNDED A SIDE-SCAN  
 SONAR PROJECT IN STELLWAGEN BANK NATIONAL MARINE SANCTUARY THAT IS  
 IDENTIFY MARINE DEBRIS AND ENGAGE THE LOCAL FISHING COMMUNITY AT LEAST  
 5 SHIPWRECKS WERE IDENTIFIED IN THE PROCESS. IN PARTNERSHIP WITH  
 MASSACHUSETTS FISHERMEN AND FISHING CHARTERS, WHO TOW THE EQUIPMENT AND  
 OFFER LOCAL KNOWLEDGE, THE PROJECT ADVANCES CULTURAL HERITAGE  
 PROTECTION, AND BUILDS SANCTUARY AWARENESS.

FOR SANCTUARY OCEAN COUNT THE WORLD'S LONGEST RUNNING COMMUNITY SCIENCE  
 PROJECT TRAINED VOLUNTEERS TO SPOT AND IDENTIFY WHALES IN HAWAIIAN  
 ISLANDS HUMPBACK WHALE NATIONAL MARINE SANCTUARY, TALLYING HUMPBACK  
 WHALE SIGHTINGS, AND DOCUMENTING THE ANIMALS' SURFACE BEHAVIOR DURING  
 THE SURVEY. IN 2024, OCEAN COUNT AND PARTNER EVENTS, MORE THAN 1,300  
 VOLUNTEER COMMUNITY SCIENTISTS PARTICIPATED IN THREE COORDINATED WHALE  
 COUNT EVENTS ACROSS THE STATE OF HAWAII AND OBSERVED A TOTAL OF 5,120  
 HUMPBACK WHALES FROM SHORE-BASED SITES. DATA COLLECTED COMBINED WITH

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OTHER RESEARCH EFFORTS CAN HELP REVEAL TRENDS IN HUMPBACK WHALE OCCURRENCE WITHIN AND AMONGST WHALE SEASONS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:  
 MARINE SANCTUARY SYSTEM, INCLUDING LAUNCHING A NEW VISITOR CENTER, PACIFIC ISLANDS OCEAN EXPLORATION CENTER, DESIGNED TO CONNECT VISITORS IN THE HIGH-TOURISM AREA OF DOWNTOWN HONOLULU TO NATIONAL MARINE SANCTUARIES IN THE PACIFIC ISLANDS. NEW EXHIBITS WERE DEVELOPED FOR THE NEW GRAY'S REEF OCEAN DISCOVERY CENTER, TO ATTRACT THE ATTENTION OF THE MILLIONS OF VISITORS TO SAVANNAH, GEORGIA EVERY YEAR TO LEARN MORE ABOUT THE RESOURCES OF THE OFFSHORE GRAY'S REEF NATIONAL MARINE SANCTUARY AND THEIR VALUE TO THE COMMUNITIES OF THE COASTAL EMPIRE. ANNUALLY ON OCTOBER 23, THE FOUNDATION HOSTS NATIONAL MARINE SANCTUARY DAY, A NATIONAL DAY OF CELEBRATION OF OUR TREASURED WATERS IN THE OCEAN AND GREAT LAKES THAT DEMONSTRATE HOW AMERICA'S SHARED MARITIME HERITAGE AND COASTAL COMMUNITIES ARE DEEPLY WOVEN TOGETHER IN OUR NATIONAL CHARACTER. NMSD 2024 FEATURED STORIES OF YOUTH LEADERSHIP AND ACTIVISM FOR OUR OCEAN AND GREAT LAKES, EXPANDING PUBLIC ACCESS TO SANCTUARIES FOR TOURISM AND RECREATION, AND HERITAGE AND CULTURE INSPIRED BY THESE SPECIAL PLACES.

THE NATIONAL MARINE SANCTUARY FOUNDATION FUNDS PROGRAMS THAT REACH MORE THAN 1,000 K-12 EDUCATORS ANNUALLY; AND CONNECT SITES IN THE NATIONAL MARINE SANCTUARY SYSTEM TO SUSTAINABLE FISHERIES/SEAFOOD AND ENDANGERED/PROTECTED SPECIES. WE PROVIDE STUDENTS, EDUCATORS, AND LIFELONG LEARNERS WITH OPPORTUNITIES TO EXPLORE AND DISCOVER CONNECTIONS TO THE NATURAL WORLD, NO MATTER WHERE THEY LIVE. OUR FUNDING PROMOTES IN- AND OUT-OF-CLASSROOM LEARNING EXPERIENCES, TEACHER TRAININGS, AND EDUCATIONAL EXHIBITS AT SANCTUARY VISITOR CENTERS, ZOOS, AND AQUARIUMS ACROSS THE COUNTRY. AS PART OF REINVIGORATING SUSTAINABLE RECREATION INITIATIVES IN THE NATIONAL MARINE SANCTUARY SYSTEM, THE FOUNDATION EXPANDED A PUBLIC-PRIVATE PARTNERSHIP TO SUPPORT FAMILY FISHING CLINICS TO FIVE NATIONAL MARINE SANCTUARIES IN 2024, WITH 168 PARTICIPANTS FROM 65 FAMILIES.

THE FOUNDATION ALSO SUPPORTS PROJECTS THAT WORK CLOSELY WITH INDIGENOUS COMMUNITIES TO ADVANCE THE UNDERSTANDING AND USE OF INDIGENOUS KNOWLEDGE, ENCOURAGE BETTER PUBLIC UNDERSTANDING OF THE ROLE OF NATIVE PEOPLE IN OUR HISTORY WITH OUR WATERS, AND CELEBRATE THE CULTURES OF INDIGENOUS COMMUNITIES. IN 2024, THE FOUNDATION HELPED FACILITATE THE SECOND CROSS-PACIFIC INDIGENOUS EXCHANGE, HELD IN MONTEREY AND SEASIDE, CALIFORNIA. THIS EXCHANGE INCLUDED 36 INDIGENOUS LEADERS AND REPRESENTATIVES FROM ALASKA, HAWAI'I, AMERICAN SAMOA, SAIPAN, CALIFORNIA, WASHINGTON, AND MARYLAND. WE ALSO HELPED SUPPORT INDIGENOUS FILMS, EXHIBITS, AND OUTREACH EVENTS THROUGHOUT THE PACIFIC.

THE FOUNDATION MADE 12 GRANTS TOTALING MORE THAN \$84,000 TO ORGANIZATIONS THROUGHOUT THE U.S. HELPING TO CLEAR MARINE DEBRIS FROM OUR NATION'S WATERS, AND PROVIDE PREVENTION EDUCATION. AS WELL AS 15 ADDITIONAL GRANTS TOTALING NEARLY \$150,000 DESIGNED TO SUPPORT ENGAGEMENT WITH OCEAN EXPLORATION AND SCIENCE. THE FOUNDATION FUNDS NETWORKS OF EDUCATORS TO SHARE IDEAS, BEST PRACTICES, AND ACTIVITIES THAT ENGAGE STUDENTS IN THE CLASSROOM. THE FOUNDATION LOOKS OUTSIDE OF THE CLASSROOM AS WELL TO IMMERSIVE, HANDS-ON EDUCATION ACTIVITIES, IN SANCTUARIES AND THEIR WATERSHEDS. FOR EXAMPLE, THE PROJECT ROVE PROGRAM HELPED TRAIN TEACHERS ACROSS THE U.S. ON THE SKILLS NEEDED TO BRING

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UNDERWATER ROBOTICS TO THEIR CLASSROOM, INCLUDING A TEACHER COHORT PARTICIPATING IN SYNCHRONOUS AND ASYNCHRONOUS ONLINE COURSES, CULMINATING IN AN IN-PERSON WORKSHOP IN OLYMPIC COAST NATIONAL MARINE SANCTUARY.

THE FOUNDATION SUPPORTS NOAA OCEAN GUARDIAN SCHOOLS IN 14 STATES AND 3 TERRITORIES, HELPING SCHOOLS PROTECT LOCAL WATERSHEDS, THE OCEAN, AND SPECIAL AREAS LIKE SANCTUARIES THROUGH SCHOOL- AND COMMUNITY-BASED CONSERVATION PROJECTS. SINCE INCEPTION, STUDENTS HAVE COLLECTED OVER 180,000 POUNDS OF TRASH, DISTRIBUTED 44,000 REUSABLE ITEMS, AND AVOIDED MORE THAN A MILLION SINGLE-USE BOTTLES. PARENTS REPORT A 66% INCREASE IN THEIR CHILDREN'S ENVIRONMENTAL ADVOCACY. NEARLY 90,000 STUDENTS, OVER HALF FROM TITLE I SCHOOLS, AND ABOUT 3,600 EDUCATORS HAVE PARTICIPATED. IN 2024, 33 SCHOOLS RECEIVED MORE THAN \$115,000 IN GRANTS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CAPITOL HILL OCEAN WEEK (CHOW), THE NATION'S PREMIER OCEAN POLICY CONFERENCE FOCUSED ON THE THEME OF LEADERSHIP. CHOW ELEVATED FEDERAL, STATE AND LOCAL LEADERS, TRIBAL AND INDIGENOUS ELDERS, BUSINESS EXECUTIVES, WORLD RENOWN SCIENTISTS, CONSERVATION LUMINARIES, AND YOUTH ACTIVISTS. EARLY-CAREER AND YOUTH ADVOCATES FROM ACROSS THE COUNTRY CAME OUT IN FORCE TO WASHINGTON, DC, TO CHAMPION OCEAN PROTECTION. THEY TOOK CENTER STAGE TO SHARE THEIR INITIATIVES AND KNOWLEDGE, ADVOCATE TO ELECTED OFFICIALS, AND INSPIRE US ALL TO BE BOLD. EACH YEAR, CHOW STRENGTHENS OUR ABILITY TO LEAD THE STEWARDSHIP OF OUR OCEAN AND GREAT LAKES BY MAKING NEW CONNECTIONS AND FORGING NEW POSSIBILITIES, UPLIFTING NEW VOICES, AND HONORING OUR CHAMPIONS. DURING CHOW, THE FOUNDATION HONORED LEADERS DURING THE OCEAN AWARDS AMONG THEIR PEERS, MEMBERS OF THE ADMINISTRATION, AND CHOW ATTENDEES. EXPENSES \$ 1,741,225. INCLUDING GRANTS OF \$ 633,800. REVENUE \$ 0.

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

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE AUDIT COMMITTEE ALSO DISCUSSED AND REVIEWED THE RETURN IN CONJUNCTION WITH THE OUTSIDE ACCOUNTANTS. IT WAS THEN SENT TO THE FULL BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION REQUIRES EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS TO ANNUALLY SIGN A STATEMENT WHICH AFFIRMS THAT SUCH PERSON HAS RECEIVED, UNDERSTANDS, AND COMPLIED WITH THE ORGANIZATION'S CONFLICT OF INTEREST POLICY. IN THE EVENT THAT A CONFLICT OR POTENTIAL CONFLICT OF INTEREST IS DISCOVERED, THE BOARD OR COMMITTEE MEMBERS, EXCEPT FOR THOSE INTERESTED PERSONS, REVIEW THE CIRCUMSTANCES OF THE CONFLICT OR POTENTIAL CONFLICT OF INTEREST AND DETERMINE THE APPROPRIATE COURSE OF ACTION WHICH SERVES THE BEST INTEREST OF THE ORGANIZATION. THE BOARD'S OR COMMITTEE'S DETERMINATION INCLUDES A PRESENTATION FROM THE INTERESTED PERSONS, BUT EXCLUDES THE INTERESTED PERSONS FROM PARTICIPATING IN THE BOARD'S OR COMMITTEE'S DISCUSSION AND VOTING REGARDING THE TRANSACTION OR AGREEMENT WHICH RESULTED IN THE CONFLICT OF INTEREST OR THE POTENTIAL CONFLICT OF INTEREST.

THE FOUNDATION STAFF ANNUALLY SIGNS A STATEMENT AFFIRMING RECEIPT OF THE CONFLICT OF INTEREST POLICY AND MUST REFRAIN FROM ANY ACTIVITY WHICH CREATES A CONFLICT OF INTEREST. THE POLICY IS DESCRIBED IN THE PERSONNEL

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POLICY HANDBOOK AND IS MORE RESTRICTIVE THAN THE BOARD POLICY DESCRIBED ABOVE.

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

THE BOARD OF TRUSTEES OF THE FOUNDATION HAS CONCLUDED THAT THE EXECUTIVE COMMITTEE IS THE MOST APPROPRIATE BODY TO REVIEW AND APPROVE EXECUTIVE COMPENSATION. THIS POLICY IS DESIGNED TO BE CONSISTENT WITH INFORMATION REQUESTED ON THE FORM 990 AND ALSO CONSISTENT WITH INTERNAL REVENUE CODES "EXCESS BENEFIT TRANSACTION" RULES. THE POLICY ON THE PROCESS FOR DETERMINING COMPENSATION OF THE FOUNDATION APPLIES TO THE COMPENSATION OF THE FOLLOWING PERSONS EMPLOYED BY THE FOUNDATION: THE FOUNDATION'S CHIEF EMPLOYED EXECUTIVE (THE CEO/PRESIDENT) AND OTHER COMPENSATED OFFICERS AND KEY EMPLOYEES OF THE FOUNDATION (IF ANY). THE LAST REVIEW TOOK PLACE IN DECEMBER 2023.

THE PROCESS INCLUDES ALL OF THESE ELEMENTS: (1) REVIEW AND APPROVAL BY THE BOARD OF DIRECTORS OR THE COMPENSATION COMMITTEE OF THE FOUNDATION; (2) USE OF DATA ON COMPARABLE COMPENSATION; AND (3) CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING, AS FOLLOWS:

1. REVIEW AND APPROVAL: THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE, PROVIDED THAT PERSONS WITH CONFLICTS OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT AT ISSUE ARE NOT INVOLVED IN THIS REVIEW AND APPROVAL.
2. USE OF DATA AS TO COMPARABLE COMPENSATION: THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED USING DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS.
3. CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING: THERE IS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT  
VA, WV, WI

## FORM 990, PART VI, SECTION C, LINE 18:

THE 1023 FORM IS AVAILABLE UPON REQUEST; AND THE 990 ARE AVAILABLE ON THE THE FOUNDATION'S WEBSITE, AND ON CHARITY INFORMATION WEBSITES.

## FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST; AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE THE FOUNDATION'S WEBSITE AND ON CHARITY INFORMATION WEBSITES.

## FORM 990, PART IX, LINE 11G, OTHER FEES:

## COMMERCIAL DIVING &amp; SALVAGE:

PROGRAM SERVICE EXPENSES	8,175,172.
MANAGEMENT AND GENERAL EXPENSES	250.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	8,175,422.

## RESEARCH OCEANOGRAPHY &amp; MARINE BIOLOGY:

PROGRAM SERVICE EXPENSES	602,370.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.

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<b>TOTAL EXPENSES</b>	<b>602,370.</b>
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**ENVIRONMENTAL CONSULTING & TECHNOLOGY:**

PROGRAM SERVICE EXPENSES	448,312.
MANAGEMENT AND GENERAL EXPENSES	1,200.
FUNDRAISING EXPENSES	0.
<b>TOTAL EXPENSES</b>	<b>449,512.</b>

**ADTECH:**

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	245,549.
FUNDRAISING EXPENSES	100,250.
<b>TOTAL EXPENSES</b>	<b>345,799.</b>

**TRANSLATION SERVICES:**

PROGRAM SERVICE EXPENSES	227,887.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
<b>TOTAL EXPENSES</b>	<b>227,887.</b>

**BUSINESS MANAGEMENT:**

PROGRAM SERVICE EXPENSES	110,134.
MANAGEMENT AND GENERAL EXPENSES	81,329.
FUNDRAISING EXPENSES	25,805.
<b>TOTAL EXPENSES</b>	<b>217,268.</b>

**EXHIBITS:**

PROGRAM SERVICE EXPENSES	162,600.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
<b>TOTAL EXPENSES</b>	<b>162,600.</b>

**CURRICULUM DEVELOPMENT:**

PROGRAM SERVICE EXPENSES	152,123.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
<b>TOTAL EXPENSES</b>	<b>152,123.</b>

**MAINTENANCE:**

PROGRAM SERVICE EXPENSES	104,274.
MANAGEMENT AND GENERAL EXPENSES	5,590.
FUNDRAISING EXPENSES	0.
<b>TOTAL EXPENSES</b>	<b>109,864.</b>

**OTHER CONSULTING FEE:**

PROGRAM SERVICE EXPENSES	2,674,519.
MANAGEMENT AND GENERAL EXPENSES	119,107.
FUNDRAISING EXPENSES	4,008.
<b>TOTAL EXPENSES</b>	<b>2,797,634.</b>
<b>TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A</b>	<b>13,240,479.</b>