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| Form | JJU |

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury Internal Revenue Service

Example 2 Constraints and the second seco

| -   |            |                |  |                 |                    |   |  |  |  |  |  |  |
|---|------------|----------------|--|-----------------|--------------------|---|--|--|--|--|--|--|
| <u>A</u>  |            |                | ndar year, or tax year beginning 10/01 , 2011, and ending  |                 |                    | , 20 12                                   |  |  |  |  |  |  |
| B   |            | if applicable: | C Name of organization PRINCE WILLIAM SOUND SCIENCE & TECHNOLOGY   | NSTITUTE        | J Employ           | ver identification number                 |  |  |  |  |  |  |
|   |            | s change       | Doing Business As Prince William Sound Science Center           Number and street (or P.O. box if mail is not delivered to street address)         Room/suit | ~               | Tolopho            | 92-0129853                                |  |  |  |  |  |  |
|   | Name c     | Ū.             |  | e               | E Telephone number |   |  |  |  |  |  |  |
|   | Initial re |                | PO Box 705 300 Breakwater Ave  |                 |                    | 907-424-5800                              |  |  |  |  |  |  |
| Terminated       City or town, state or country, and ZIP + 4         Amended return       Cordova, AK 99574         G Gross receipts \$ |            |                |  |                 |                    |   |  |  |  |  |  |  |
|   |            | ed return      | Cordova, AK 99574  |                 |                    | 1 - 1                                     |  |  |  |  |  |  |
|   | Applicat   | tion pending   | F Name and address of principal officer: Prince William Sound Science & Techn<br>PO Box 705, 300 Breakwater Ave, Cordova, AK 99574                           |                 |                    | for affiliates? Yes No<br>ncluded? Yes No |  |  |  |  |  |  |
|   |            | empt status:   |  | - ` '           |                    | a list. (see instructions)                |  |  |  |  |  |  |
| <u>'</u>  | Website    |                | w.pwssc.org  | H(c) Group      |                    |   |  |  |  |  |  |  |
| ĸ   |            |                | Corporation ☐ Trust  | ., .            | · · ·              | of legal domicile: AK                     |  |  |  |  |  |  |
| 1   | art I      | Summ           |  | 1000            | - in olulo         | AIN                                       |  |  |  |  |  |  |
|   | 1          |                | escribe the organization's mission or most significant activities: We are  | an independ     | ent rese           | arch and science                          |  |  |  |  |  |  |
|   | -          | -              | n institute organized to contribute to a better understanding, through monit   |                 |                    |   |  |  |  |  |  |  |
| nce   |            |                | illiam Sound, Copper River and Gulf of Alaska bio-regions. We are committe   |                 |                    |   |  |  |  |  |  |  |
| nai   |            |                | ed on Schedule O. Statement 2)   |                 |                    | - <u>-</u> - ,                            |  |  |  |  |  |  |
| Nel   | 2          |                | is box $\blacktriangleright$ if the organization discontinued its operations or disposed of  | f more than     | 25% of             | its net assets.                           |  |  |  |  |  |  |
| ğ   | 3          |                | of voting members of the governing body (Part VI, line 1a) .   |                 | 3                  | 12  |  |  |  |  |  |  |
| ŝ   | 4          |                | of independent voting members of the governing body (Part VI, line 1b)   |                 | 4                  | 12  |  |  |  |  |  |  |
| /itie   | 5          |                | nber of individuals employed in calendar year 2011 (Part V, line 2a)   |                 | 5                  | 40  |  |  |  |  |  |  |
| Activities & Governance   | 6          |                | nber of volunteers (estimate if necessary)   |                 | 6                  | 20  |  |  |  |  |  |  |
| ◄   | 7a         |                | elated business revenue from Part VIII, column (C), line 12  |                 | 7a                 | 0   |  |  |  |  |  |  |
|   | b          | Net unre       | ated business taxable income from Form 990-T, line 34  |                 | 7b                 | 0   |  |  |  |  |  |  |
|   |            |                |  | Prior Yea       | r                  | Current Year                              |  |  |  |  |  |  |
| e   | 8          | Contribu       | tions and grants (Part VIII, line 1h)  | 3,              | 077,948            | 4,286,948                                 |  |  |  |  |  |  |
| nue   | 9          | Program        | service revenue (Part VIII, line 2g)   |                 | 0                  | 0   |  |  |  |  |  |  |
| Revenue   | 10         | Investme       | nt income (Part VIII, column (A), lines 3, 4, and 7d) $\ldots$   |                 | 71,090             | 176,687                                   |  |  |  |  |  |  |
| ш   | 11         |                | /enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   |                 | 9,256              | 355                                       |  |  |  |  |  |  |
|   | 12         |                | enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)  | 3,              | 158,294            | 4,463,990                                 |  |  |  |  |  |  |
|   | 13         |                | nd similar amounts paid (Part IX, column (A), lines 1–3) $\ldots$ $\ldots$ .   |                 | 185,963            | 482,584                                   |  |  |  |  |  |  |
|   | 14         |                | paid to or for members (Part IX, column (A), line 4) ......  |                 | 0                  | 0   |  |  |  |  |  |  |
| es  | 15         |                | other compensation, employee benefits (Part IX, column (A), lines 5–10)  | 1,              | 528,762            | 1,542,055                                 |  |  |  |  |  |  |
| sue   | 16a        |                | onal fundraising fees (Part IX, column (A), line 11e)  |                 | 0                  | 0   |  |  |  |  |  |  |
| Expenses  | b          |                | draising expenses (Part IX, column (D), line 25) ► 10,558  |                 |                    |   |  |  |  |  |  |  |
| ш   | 17         |                | penses (Part IX, column (A), lines 11a–11d, 11f–24e)   | ,               | 519,620            |   |  |  |  |  |  |  |
|   | 18         |                | penses. Add lines 13–17 (must equal Part IX, column (A), line 25)  | 3,              | 234,345            | 3,962,625                                 |  |  |  |  |  |  |
|   | 19         | Revenue        | less expenses. Subtract line 18 from line 12   |                 | -76,051            | 501,365                                   |  |  |  |  |  |  |
| Net Assets or<br>Fund Balances  |            | <b>-</b>       |  | eginning of Cur |                    | End of Year                               |  |  |  |  |  |  |
| sset  | 20         |                | ets (Part X, line 16)  |                 | 888,623            |   |  |  |  |  |  |  |
| let A<br>ind E  | 21         |                | ilities (Part X, line 26)  |                 | 470,252            | · · · · · · · · · · · · · · · · · · ·     |  |  |  |  |  |  |
| Ζũ  | 22         | Net asse       | ts or fund balances. Subtract line 21 from line 20   | 2,              | 418,371            | 2,916,656                                 |  |  |  |  |  |  |

Part II Signature Block

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

| Sign<br>Here     | Signature of officer<br><u>Katrina Hoffman, President</u><br>Type or print name and title |                                      |      | Date |                           |              |
|------------------|---|--------------------------------------|------|------|---------------------------|--------------|
| Paid<br>Preparer | Print/Type preparer's name  | Preparer's signature                 | Date |      | Check if if self-employed | PTIN         |
| Use Only         | Firm's name   | Firm's EIN ►                         |      |      |                           |              |
|                  | Firm's address 🕨  | Phone no.                            |      |      |                           |              |
| May the IRS      | discuss this return with the pre  | parer shown above? (see instructions | s)   |      |                           | . 🗌 Yes 🗌 No |
|                  |   |                                      |      |      |                           |              |

For Paperwork Reduction Act Notice, see the separate instructions.

OMB No. 1545-0047

2011

**Open to Public** 

Inspection

| orm 99 | 20 (2011) Page 2  |
|--------|---|
| Part   |   |
|        | Check if Schedule O contains a response to any question in this Part III  |
| 1      | Briefly describe the organization's mission:  |
|        | We are an independent research and science education institute organized to contribute to a better understanding, through monitoring and ecological investigations, of the Prince William Sound, Copper River and Gulf of Alaska bio-regions. We are  |
|        | committed to long-term, self-regulating biodiversity, productivity and the sustainable use of renewable resources; and, we want to  |
|        | educate and inform youth and the public about the critical interdependence of the biology and regional economies of Alaska.   |
| 2      | Did the organization undertake any significant program services during the year which were not listed on the  |
|        | prior Form 990 or 990-EZ?   |
|        | If "Yes," describe these new services on Schedule O.  |
| 3      | Did the organization cease conducting, or make significant changes in how it conducts, any program  |
|        | services?   |
|        | 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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. |
| 4a     | (Code:) (Expenses \$ 855,345 including grants of \$ 482,585 ) (Revenue \$ 834,311 )   |
|        | Oil Spill Recovery Institute (OSRI) - Established to support research, education and demonstration projects designed to respond to  |
|        | and understand the effects of oil spills in the Arctic and Subarctic marine environments. OSRI's current partnerships are focused   |
|        | on improving the Hydrological Modeling to assist the Ocean Circulation Forecast System in support of Oil Spill prevention and   |
|        | response. OSRI also partners with industry and government agencies to support new equipment and technologies, ecological  |
|        | studies and workshops, OSRI also provides for Education programs, Fellowships and internships.  |
|        |   |
|        |   |
|        |   |
|        |   |
|        |   |
|        |   |
| 4b     | (Code:) (Expenses \$ 1,861,734 including grants of \$) (Revenue \$ 2,223,527 )  |
|        | Exxon Valdez Oil Spill (EVOS) Trustee Council - The EVOSTC awarded multiple grants to PWSSC researchers and others to   |
|        | investigate factors that might explain the lack of recovery of Pacific herring in Prince William Sound. These studies include a focus   |
|        | on herring life stage surveys, overwintering food sources, predation by seabirds and identification of herring nursery habitats.  |
|        |   |
|        |   |
|        |   |
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|        |   |
|        |   |
|        |   |
| 1c     | (Code:) (Expenses \$469,586 including grants of \$) (Revenue \$469,586 )  |
|        | Effects of receding ice on ecosystems: NASA and USGS are funding a pair of linked projects that together are examining the  |
|        | potential for regional changes driven by receding ice sheets in the Copper River watershed. Within the watershed, the projects are  |
|        | examining changes in ice mass, biogeochemical changes in deglaciated areas, and changes in the hydrology and nutrient   |
|        | biogeochemistry in the fresh waters of the watershed. In the coastal ocean downstream of the Copper River Delta, the projects are   |
|        | describing the nature and extent of the Copper River plume, the distribution and cycling of nutrients and plankton, and the habitat,  |
|        | food habits and growth conditions for forage fish and juvenile salmon.  |
|        |   |
|        |   |
|        |   |
|        |   |
| 4d     | Other program services (Describe in Schedule O.) See Schedule O, Statement 3  |
|        | (Expenses \$ 513,739 including grants of \$ 0 ) (Revenue \$ 803,538 )   |
| 4e     | Total program service expenses ► 3,700,404  |
|        | Form 990 (2011)   |

| Form 99 | 0 (2011)   |            | F   | Page <b>3</b> |
|---------|--|------------|-----|---------------|
| Part    | V Checklist of Required Schedules  |            |     |               |
| _       |  | ·          | Yes | No            |
| 1       | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A  | 1          | ~   |               |
| 2       | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  | 2          |     | ~             |
| 3       | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>  | 3          |     | ~             |
| 4       | <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>   | 4          | ~   |               |
| 5       | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .   | 5          |     | r             |
| 6       | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>  | 6          |     | ~             |
| 7       | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>  | 7          |     | ~             |
| 8       | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>   | 8          |     | ~             |
| 9       | Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>   |            |     | ~             |
| 10      | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V   | 9          |     | ~             |
| 11      | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable.   |            |     |               |
| а       | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  | 11a        | ~   |               |
| b       | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>   | 11b        | •   | ~             |
| С       | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>   | 11c        |     | ~             |
| d       | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>  | 11d        |     | ~             |
|         | Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i><br>Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses<br>the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> . | 11e<br>11f | ~   | ~             |
| 12 a    | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII  | 12a        | r   |               |
| b       | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional   | 12b        |     | ~             |
| 13      | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13         |     | ~             |
| 14 a    | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a        |     | ~             |
| b       | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>  | 14b        |     | ~             |
| 15      | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> .   | 15         | ~   |               |
| 16      | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>   | 16         |     | ~             |
| 17      | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>   | 17         |     | ~             |
| 18      | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .  | 18         | ~   |               |
| 19      | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>  | 19         |     | ~             |
|         | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  | 20a        |     | ~             |
| b       | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   | 20b        |     |               |

Form **990** (2011)

Form 990 (2011) Page 4 Part IV **Checklist of Required Schedules** (continued) No Yes 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . . V 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 22 ~ Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24a \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . 24b С Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c **d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a ~ **b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . . . 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III . . . . . . . . . . . ~ 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . 28a ~ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete h 28b ~ c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . . 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 V Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 ~ Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 ~ 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," ~ 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 1 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a ~ b Did the organization receive any payment from or engage in any transaction with a controlled entity within the V 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 V 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 1 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38 V 38

Form **990** (2011)

| Form 99 | 0 (2011)   |           | F   | Page 5   |
|---------|--|-----------|-----|----------|
| Part    | V Statements Regarding Other IRS Filings and Tax Compliance  |           |     |          |
|         | Check if Schedule O contains a response to any question in this Part V   |           |     |          |
|         |  |           | Yes | No       |
| 1a      | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 32   |           |     |          |
| b       | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0   |           |     |          |
| С       | Did the organization comply with backup withholding rules for reportable payments to vendors and   |           |     |          |
|         | reportable gaming (gambling) winnings to prize winners?  | 1c        | ~   |          |
| 2a      | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  |           |     |          |
|         | Statements, filed for the calendar year ending with or within the year covered by this return 2a 40  |           |     |          |
| b       | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .   | 2b        | ~   |          |
| 0-      | <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) .  | _         |     |          |
| 3a      | Did the organization have unrelated business gross income of \$1,000 or more during the year?  | <u>3a</u> |     | ~        |
| b       | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O   | 3b        |     |          |
| 4a      | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial |           |     |          |
|         |  | 40        |     | ~        |
| h       | If "Yes," enter the name of the foreign country:   | 4a        |     | -        |
| b       | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.   |           |     |          |
| 5a      | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | 5a        |     | ~        |
| b       | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   | 5a<br>5b  |     | ~        |
| c       | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  | 5c        |     | -        |
| 6a      | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the   |           |     |          |
|         | organization solicit any contributions that were not tax deductible?   | 6a        |     | ~        |
| b       | If "Yes," did the organization include with every solicitation an express statement that such contributions or   |           |     |          |
|         | gifts were not tax deductible?   | 6b        |     |          |
| 7       | Organizations that may receive deductible contributions under section 170(c).  |           |     |          |
| а       | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods  |           |     |          |
|         | and services provided to the payor?  | 7a        | ~   |          |
| b       | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | 7b        | ~   |          |
| С       | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was   |           |     |          |
|         | required to file Form 8282?  | 7c        |     | ~        |
| d       | If "Yes," indicate the number of Forms 8282 filed during the year  |           |     |          |
| е       | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  | 7e        |     | ~        |
| f       | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .   | 7f        |     | ~        |
| g       | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   | 7g        | ~   |          |
| h       | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   | 7h        | ~   |          |
| 8       | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting  |           |     |          |
|         | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring   | 0         |     |          |
| 0       | organization, have excess business holdings at any time during the year?   | 8         |     |          |
| 9       | Did the organization make any taxable distributions under section 4966?  | 9a        |     |          |
| a<br>b  | Did the organization make a distribution to a donor, donor advisor, or related person?   | 9a<br>9b  |     | <u> </u> |
| 10      | Section 501(c)(7) organizations. Enter:  |           |     |          |
| a       | Initiation fees and capital contributions included on Part VIII, line 12   |           |     |          |
| b       | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . <b>10b</b>   |           |     |          |
| 11      | Section 501(c)(12) organizations. Enter:   |           |     |          |
| а       | Gross income from members or shareholders  |           |     |          |
| b       | Gross income from other sources (Do not net amounts due or paid to other sources   |           |     |          |
|         | against amounts due or received from them.)  |           |     |          |
| 12a     | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?   | 12a       |     |          |
| b       | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b  |           |     |          |
| 13      | Section 501(c)(29) qualified nonprofit health insurance issuers.   |           |     |          |
| а       | Is the organization licensed to issue qualified health plans in more than one state?   | 13a       |     |          |
|         | <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.   |           |     |          |
| b       | Enter the amount of reserves the organization is required to maintain by the states in which   |           |     |          |
|         | the organization is licensed to issue qualified health plans   |           |     |          |
| C       | Enter the amount of reserves on hand   |           |     |          |
| 14a     | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a       |     | ~        |
| b       | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .  | 14b       |     |          |

| Form 99           | 00 (2011)  |                   | F       | Page 6           |
|-------------------|--|-------------------|---------|------------------|
| Part              | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S  | See ins           | structi | ions.            |
| <u></u>           | Check if Schedule O contains a response to any question in this Part VI  |                   |         | ~                |
| Secti             | on A. Governing Body and Management  |                   | Yes     | No               |
| 1a                | Enter the number of voting members of the governing body at the end of the tax year <b>1a 12</b><br>If there are material differences in voting rights among members of the governing body, or<br>if the governing body delegated broad authority to an executive committee or similar<br>committee, explain in Schedule O.                        | -                 | 163     | NO               |
| b<br>2            | Enter the number of voting members included in line 1a, above, who are independent . <b>1b</b> 12<br>Did any officer, director, trustee, or key employee have a family relationship or a business relationship with<br>any other officer, director, trustee, or key employee?  | 2                 |         | ~                |
| 3                 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?   | 3                 |         | ~                |
| 4<br>5<br>6<br>7a | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?<br>Did the organization become aware during the year of a significant diversion of the organization's assets? .<br>Did the organization have members or stockholders?   | 4<br>5<br>6<br>7a |         | ン<br>ン<br>ン<br>ン |
| b                 | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  | 7b                |         | ~                |
| 8                 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  |                   |         |                  |
| a                 | The governing body?  | 8a                | ~       |                  |
| ь<br>9            | Each committee with authority to act on behalf of the governing body?  | 8b<br>9           | ~       | ~                |
| Secti             | on B. Policies (This Section B requests information about policies not required by the Internal Rever  | -                 | ode.)   |                  |
|                   |  |                   | Yes     | No               |
| 10a<br>b          | Did the organization have local chapters, branches, or affiliates?   | 10a<br>10b        |         | •                |
| 11a               | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | 11a               | ~       |                  |
| b<br>12a          | Describe in Schedule O the process, if any, used by the organization to review this Form 990.<br>Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>  | 12a               | ~       |                  |
| b<br>C            | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done   | 12b<br>12c        | ۲<br>۲  |                  |
| 13<br>14<br>15    | Did the organization have a written whistleblower policy?  | 13<br>14          |         | ン<br>ン           |
| а                 | The organization's CEO, Executive Director, or top management official   | 15a               | ~       |                  |
| b                 | Other officers or key employees of the organization  | 15b               | ~       |                  |
| 16a               | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).<br>Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement<br>with a taughta antity during the year?  |                   |         |                  |
| b                 | with a taxable entity during the year?   | 16a               |         | ~                |
| <u>.</u>          | organization's exempt status with respect to such arrangements?  | 16b               |         |                  |
|                   | on C. Disclosure   |                   |         |                  |
| 17<br>18          | List the states with which a copy of this Form 990 is required to be filed ►<br>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section<br>available for public inspection. Indicate how you made these available. Check all that apply.<br>✓ Own website ✓ Another's website ✓ Upon request | ז 501(            | c)(3)s  | only)            |
| 19                | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or<br>and financial statements available to the public during the tax year.   | f intei           | rest p  | olicy,           |

| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the |
|----|---|
|    | organization: Prince William Sound Science Center, (907)424-5800  |

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

|                      |   |                                   |                       | (0      | C)           |                              |        |  | ,   | ,   |
|----------------------|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| (A)                  | (B)   | (d.a. m                           | at ab                 |         | ition        |                              |        | (D)  | (E)   | (F)   |
| Name and Title       | Average   |                                   |                       |         |              | e than o<br>is both          |        | Reportable                                     | Reportable                                  | Estimated   |
|                      | hours per   |                                   |                       |         |              | or/trust                     | ee)    | compensation                                   | compensation from                           | amount of   |
|                      | week<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | Individual trustee<br>or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from<br>the<br>organization<br>(W-2/1099-MISC) | related<br>organizations<br>(W-2/1099-MISC) | other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Eric Knudsen PhD     |   |                                   |                       |         |              |                              |        |  |   |   |
| Chair                | 1   | ~                                 |                       | ~       |              |                              |        | 10,325   | 0   | 0   |
| James R Harvey       |   |                                   |                       |         |              |                              |        |  |   |   |
| 1st Vice Chair       | 0.05  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| Clarence Pautzke PhD |   |                                   |                       |         |              |                              |        |  |   |   |
| 2nd Vice Chair       | 0.05  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| Meera Kohler         |   |                                   |                       |         |              |                              |        |  |   |   |
| Treasurer            | 1   | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| Charles P Meacham    |   |                                   |                       |         |              |                              |        |  |   |   |
| Secretary            | 0.05  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| Riki Lebman          |   |                                   |                       |         |              |                              |        |  |   |   |
| Director             | 0.05  | ~                                 |                       |         |              |                              |        | 0  | 0   | 0   |
| Michael Mahoney      |   |                                   |                       |         |              |                              |        |  |   |   |
| Director             | 0.05  | ~                                 |                       |         |              |                              |        | 0  | 0   | 0   |
| Caryn L Rea          |   |                                   |                       |         |              |                              |        |  |   |   |
| Director             | 0.5   | ~                                 |                       |         |              |                              |        | 0  | 0   | 0   |
| Andrew Smallwood     |   |                                   |                       |         |              |                              |        |  |   |   |
| Director             | 0.5   | ~                                 |                       |         |              |                              |        | 0  | 0   | 0   |
| John Garner          |   |                                   |                       |         |              |                              |        |  |   |   |
| Director             | 0.5   | ~                                 |                       |         |              |                              |        | 0  | 0   | 0   |
| Gordon Reeves PhD    |   |                                   |                       |         |              |                              |        |  |   |   |
| Director             | 0.5   | ~                                 |                       |         |              |                              |        | 0  | 0   | 0   |
| Jeffrey M Welker PhD |   |                                   |                       |         |              | ]                            |        |  |   |   |
| Director             | 0.5   | ~                                 |                       |         |              |                              |        | 0  | 0   | 0   |
| Katrina Hoffman      |   |                                   |                       |         |              |                              |        |  |   |   |
| President and CEO    | 60  |                                   |                       |         | ~            |                              |        | 78,743   | 0   | 9,826   |
| Nancy A Bird         |   |                                   |                       |         |              |                              |        |  |   |   |
| President            | 50  |                                   |                       |         | ~            |                              |        | 17,831   | 0   | 1,152   |

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| orm 990 (2011)                                  |  |        |                |       |                       |   |      |   |   | Page <b>8</b>  |
|---|--|--------|----------------|-------|-----------------------|---|------|---|---|--|
| Part VII Section A. Officers, Directors, Trusto | ees, Key E   | mploy  | /ees           | s, ar | nd H                  | lighes                                      | st C | ompensated E  | mployees (contir  | nued)  |
|   | (B)<br>Average<br>hours per<br>week<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | box, ι | ot ch<br>unles | s per | ition<br>more<br>rson | e than c<br>is both<br>pr/trust<br>employee | an   | (D)<br>Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | (E)<br>Reportable<br>compensation from<br>related<br>organizations<br>(W-2/1099-MISC) | (F)<br>Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
|   |  |        | <br>           |       |                       |   |      |   |   |  |
|   |  |        |                |       |                       |   |      |   |   |  |
|   |  |        |                |       |                       |   |      |   |   |  |
|   |  |        |                |       |                       |   |      |   |   |  |
|   |  |        |                |       |                       |   |      |   |   |  |
|   |  |        |                |       |                       |   |      |   |   |  |
|   |  |        |                |       |                       |   |      |   |   |  |
|   |  |        |                |       |                       |   |      |   |   |  |

|    |  | _           |     |  |      |         |   |        |
|----|--|-------------|-----|--|------|---------|---|--------|
|    |  |             |     |  |      |         |   |        |
| 1b | Sub-total                              |             |     |  | <br> | 106,899 | 0 | 10,978 |
| С  | Total from continuation sheets to Part | VII, Sectio | n A |  | <br> |         |   |        |
| d  | Total (add lines 1b and 1c)            |             |     |  | <br> | 106,899 | 0 | 10,978 |
| -  |  |             |     |  |      |         |   |        |

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 ► 0

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

#### **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)<br>Name and business address                                     | (B)<br>Description of services | <b>(C)</b><br>Compensation |
|-------|--|--------------------------------|----------------------------|
| Unive | ersity of Alaska Anchorage, Office of Contract & Grant Administratio | P. Olsson,PhD - J. Welker      | 224,919                    |
| Axior | m Consulting, 3420 Robin Street, Anchorage, AK 99501-1949            | Database Design & Managem      | 183,479                    |
| Cord  | ova District Fishermen United, PO Box 939, Cordova, AK 99574         | Coordinated and hired loc      | 101,433                    |
|       | Total number of independent contractors (including but not limited   |                                |                            |
| 2     |  |                                |                            |

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| Form 9  |         |   |                    |                             |   |  | Page 9  |
|---|---------|---|--------------------|-----------------------------|---|--|---|
|   |         |   |                    | <b>(A)</b><br>Total revenue | <b>(B)</b><br>Related or<br>exempt<br>function<br>revenue | <b>(C)</b><br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512, 513, or 514 |
| Contributions, Gifts, Grants<br>and Other Similar Amounts | 1a      | 1 9   | la O               |                             |   |  |   |
|   | b       |   | lb 0               |                             |   |  |   |
| ťs,<br>An   | C       | -   | lc 87,941          |                             |   |  |   |
| Gif   | d       | 3   | ld 0               |                             |   |  |   |
| ns,<br>Sim  | e       |   | le 3,797,929       |                             |   |  |   |
| er :  | f       | All other contributions, gifts, grants,                   |                    |                             |   |  |   |
| oth   |         |   | 1f 401,078         |                             |   |  |   |
| ont   | g       | Noncash contributions included in lines 1a-1f             |                    |                             |   |  |   |
|   | h       | Total. Add lines 1a-1f                                    | ►<br>Business Code | 4,286,948                   |   |  |   |
| Program Service Revenue                                   | 0-      |   | Busiliess Code     |                             |   |  |   |
| leve  | 2a      |   |                    |                             |   |  |   |
| Э   | b       |   |                    |                             |   |  |   |
| ervio   | C<br>A  |   |                    |                             |   |  |   |
| ١Se   | d       |   |                    |                             |   |  |   |
| Jran  | e<br>f  | All other program service revenue                         |                    | 0                           | 0   | 0  | 0   |
| Proç  | g       | Total. Add lines 2a–2f                                    |                    | 0                           | U   | U  | <u> </u>  |
| -   | 3       | Investment income (including di                           | vidends interest   | 0                           |   |  |   |
|   |         | and other similar amounts)                                |                    | 176,687                     | 176.687   | 0  | 0   |
|   | 4       | Income from investment of tax-exemption                   |                    | 0                           | 0   | 0  | 0   |
|   | 5       | Royalties   |                    | 0                           | 0   | 0  | 0   |
|   |         | (i) Real  | (ii) Personal      |                             |   |  |   |
|   | 6a      | Gross rents   |                    |                             |   |  |   |
|   | b       | Less: rental expenses                                     |                    |                             |   |  |   |
|   | c       | Rental income or (loss)                                   | 0 0                |                             |   |  |   |
|   | d       |   | · · · · · •        |                             |   |  |   |
|   | 7a      | Gross amount from sales of (i) Securities                 |                    |                             |   |  |   |
|   |         | assets other than inventory                               |                    |                             |   |  |   |
|   | b       | Less: cost or other basis and sales expenses .            |                    |                             |   |  |   |
|   | с       | Gain or (loss)  | 0 0                |                             |   |  |   |
|   | d       |   | <b>&gt;</b>        |                             |   |  |   |
| Other Revenue   | 8a      | Gross income from fundraising                             |                    |                             |   |  |   |
| ver   |         | events (not including \$ 87,941                           |                    |                             |   |  |   |
| Re  |         | of contributions reported on line 1c).                    |                    |                             |   |  |   |
| ler   |         | See Part IV, line 18                                      | a 12,504           |                             |   |  |   |
| ot  |         | Less: direct expenses                                     | b 12,504           |                             |   |  |   |
| -   |         | Net income or (loss) from fundrais                        |                    | 0                           |   | 0  | 0   |
|   | 9a      | Gross income from gaming activitie                        |                    |                             |   |  |   |
|   |         | See Part IV, line 19                                      | , -                |                             |   |  |   |
|   | b       | Less: direct expenses                                     | b <u>3,080</u>     |                             |   |  |   |
|   | C       | Net income or (loss) from gaming                          |                    | 1,368                       | 1,368   | 0  | 0   |
|   | 10a     | Gross sales of inventory, les returns and allowances      | a 1,676            |                             |   |  |   |
|   | b       | Less: cost of goods sold                                  | b 2,689            |                             |   |  |   |
|   | C       | Net income or (loss) from sales of                        | -                  | -1,013                      | -1,013  | 0  | 0   |
|   | 4.4     | Miscellaneous Revenue                                     | Business Code      |                             |   |  |   |
|   | 11a     |   |                    |                             |   |  |   |
|   | b       |   |                    |                             |   |  |   |
|   | C<br>A  |   |                    |                             |   |  |   |
|   | d       | All other revenue   |                    |                             |   |  |   |
|   | е<br>12 | Total. Add lines 11a–11d Total revenue. See instructions. | · · · · ▶          | 0                           | 177.040   |  |   |
|   | 12      |   | 🚩                  | 4,463,990                   | 177,042   | 0  | U<br>Earm <b>990</b> (2011)   |

# 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) but are not required to complete columns (B), (C), and (D).

|          | Chaoli if Schodula O containa a reanon  | a to any quantion i          | in this Dort IV                           |  |                                       |
|----------|---|------------------------------|---|--|---------------------------------------|
| <b>D</b> | Check if Schedule O contains a response   |                              |   |  |                                       |
|          | ot include amounts reported on lines 6b, 7b,<br>b, and 10b of Part VIII.  | <b>(A)</b><br>Total expenses | <b>(B)</b><br>Program service<br>expenses | <b>(C)</b><br>Management and<br>general expenses | <b>(D)</b><br>Fundraising<br>expenses |
| 1        | Grants and other assistance to governments and  |                              | ·   | 5  |                                       |
|          | organizations in the United States. See Part IV, line 21  | 445,490                      | 445,490                                   |  |                                       |
| 2        | Grants and other assistance to individuals in the United States. See Part IV, line 22   | 0                            | 0   |  |                                       |
| 3        | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.   | 37,094                       | 37,094                                    |  |                                       |
| 4        | Benefits paid to or for members   | 0                            | 0   |  |                                       |
| 5        | Compensation of current officers, directors, trustees, and key employees  | 89,212                       | 41,528                                    | 47,684   | 0                                     |
| 6        | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)   | 0                            |   |  |                                       |
| 7        | Other salaries and wages  | -                            | 000.414                                   | 100.170  | 0                                     |
| 8        | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)  | 976,154<br>32,011            | <u>833,414</u><br>28,625                  | <u>138,179</u><br>3,112                          | 4,561                                 |
| 9        | Other employee benefits   | 343,144                      | 270,243                                   | 72,265   | 636                                   |
| 10       | Payroll taxes   | 101,534                      | 84,235                                    | 16,904   | 395                                   |
| 11       | Fees for services (non-employees):  |                              | 0.,200                                    |  |                                       |
| а        | Management  | 0                            | 0   | 0  | 0                                     |
| b        | Legal   | 3,968                        | 0   | 3,968  | 0                                     |
| с        | Accounting  | 23,310                       | 11,655                                    | 11,655   | 0                                     |
| d        |   | 7,943                        | 0   | 7,943  | 0                                     |
| е        | Professional fundraising services. See Part IV, line 17   | 0                            |   |  | 0                                     |
| f        | Investment management fees  | 0                            | 0   | 0  | 0                                     |
| g        | Other   | 124,083                      | 101,394                                   | 22,689   | 0                                     |
| 12       | Advertising and promotion   | 1,109                        | 144                                       | 666  | 299                                   |
| 13       | Office expenses   | 213,756                      | 181,769                                   | 31,154   | 833                                   |
| 14       | Information technology  | 35,967                       | 26,679                                    | 7,396  | 1,892                                 |
| 15       | Royalties   | 0                            | 0   | 0  | 0                                     |
| 16       | Occupancy   | 125,755                      | 24,694                                    | 101,061  | 0                                     |
| 17       | Travel  | 105,284                      | 66,093                                    | 39,191   | 0                                     |
| 18       | Payments of travel or entertainment expenses for any federal, state, or local public officials  | 0                            | 0   | 0  | 0                                     |
| 19       | Conferences, conventions, and meetings .  | 0                            | 0   | 0  | 0                                     |
| 20       | Interest  | 7,029                        | 4,815                                     | 2,214  | 0                                     |
| 21       | Payments to affiliates  | 0                            | 0   | 0  | 0                                     |
| 22       | Depreciation, depletion, and amortization .   | 184,670                      | 0   | 184,670  | 0                                     |
| 23       | Insurance   | 20,062                       | 9,587                                     | 10,475   | 0                                     |
| 24       | Other expenses. Itemize expenses not covered<br>above. (List miscellaneous expenses in line 24e. If<br>line 24e amount exceeds 10% of line 25, column<br>(A) amount, list line 24e expenses on Schedule O.) |                              |   |  |                                       |
| а        | Subcontract and Charter Costs   | 1,040,856                    | 1,037,932                                 | 2,924  | 0                                     |
| b        | Equipment Rental and Maintenance  | 5,478                        | 5,478                                     | 0  | 0                                     |
| С        | Interfund Facilities & Equipment Costs  | 0                            | 15,586                                    | -15,586  | 0                                     |
| d        | Indirect Cost Allocation  | 0                            | 461,122                                   | -461,122   | 0                                     |
| е        | All other expenses  | 38,716                       | 12,827                                    | 24,221   | 1,668                                 |
| 25       | Total functional expenses. Add lines 1 through 24e  | 3,962,625                    | 3,700,404                                 | 251,663  | 10,558                                |
| 26       | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶                                 |                              |   |  |                                       |

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| Part   | X Balance Sheet   |                                 |     |                           |
|--|---|---------------------------------|-----|---------------------------|
|  |   | <b>(A)</b><br>Beginning of year |     | <b>(B)</b><br>End of year |
| 1  | Cash-non-interest-bearing   | 0                               | 1   | 0                         |
| 2  | Savings and temporary cash investments  | 178,366                         | 2   | 157,481                   |
| 3  | Pledges and grants receivable, net  | 289,105                         | 3   | 566,177                   |
| 4  | Accounts receivable, net  | 0                               | 4   | 0                         |
| 5  | Receivables from current and former officers, directors, trustees, key  |                                 |     |                           |
|  | employees, and highest compensated employees. Complete Part II of   |                                 |     |                           |
|  | Schedule L  | 0                               | 5   | 0                         |
| 6  | Receivables from other disqualified persons (as defined under section   |                                 |     |                           |
|  | 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing   |                                 |     |                           |
|  | employers and sponsoring organizations of section 501(c)(9) voluntary   |                                 |     |                           |
| s  | employees' beneficiary organizations (see instructions)   | 0                               | 6   | 0                         |
| Assets 2                                       | Notes and loans receivable, net   | 0                               | 7   | 0                         |
| AS 8   | Inventories for sale or use   | 3,858                           | 8   | 3,405                     |
| 9  | Prepaid expenses and deferred charges   | 41,054                          | 9   | 42,785                    |
| 10   |   | ,                               |     | ,                         |
|  | other basis. Complete Part VI of Schedule D 10a 3,170,792   |                                 |     |                           |
|  | Less: accumulated depreciation 10b 1,857,504  | 759,843                         | 10c | 1,313,288                 |
| 11   | Investments-publicly traded securities  | 1,616,397                       | 11  | 1,717,883                 |
| 12   | Investments – other securities. See Part IV, line 11  | 0                               | 12  | 1,1 11,000                |
| 13   | Investments-program-related. See Part IV, line 11   | 0                               | 13  |                           |
| 14   |   | 0                               | 14  | 0                         |
| 15   | Other assets. See Part IV, line 11  | 0                               | 15  | v                         |
| 16   | Total assets. Add lines 1 through 15 (must equal line 34)   | 2,888,623                       | 16  | 3,801,019                 |
| 17   | Accounts payable and accrued expenses   | 350,415                         | 17  | 693,072                   |
| 18   | Grants payable  | 000,419                         | 18  | 000,072                   |
| 19   | Deferred revenue  | 42,735                          | 19  | 66,474                    |
| 20   | Tax-exempt bond liabilities   |                                 | 20  | 00,474                    |
| 21   | Escrow or custodial account liability. Complete Part IV of Schedule D.  | 0                               | 21  |                           |
|  | Payables to current and former officers, directors, trustees, key   | 0                               | 21  |                           |
| Ti e   | employees, highest compensated employees, and disqualified persons.   |                                 |     |                           |
| bili   | Complete Part II of Schedule L  | 0                               | 22  |                           |
| Liabilities<br>52<br>53                        | Secured mortgages and notes payable to unrelated third parties  | 67,302                          | 23  | 114 515                   |
| 24   | Unsecured notes and loans payable to unrelated third parties  | 07,302                          | 23  | 114,515                   |
| 25   | Other liabilities (including federal income tax, payables to related third  | 0                               | 24  |                           |
| 25   | parties, and other liabilities not included on lines 17-24). Complete Part X  | 0.000                           |     | 10.000                    |
|  | of Schedule D   | 9,800                           | 25  | 10,302                    |
| 26   | Total liabilities.       Add lines 17 through 25       .        .       .       . <td>470.050</td> <td>25</td> <td>004.000</td> | 470.050                         | 25  | 004.000                   |
| 20   | Organizations that follow SFAS 117, check here ► ✓ and complete   | 470,252                         | 20  | 884,363                   |
| Ses  | lines 27 through 29, and lines 33 and 34.   |                                 |     |                           |
| โต 27  | Unrestricted net assets   | 2,418,371                       | 27  | 2,916,656                 |
| 82   28  | Temporarily restricted net assets   | 0                               | 28  | 0                         |
| 29   | Permanently restricted net assets   | 0                               | 29  | 0                         |
| Net Assets or Fund Balances<br>E E E C 65 8 25 | Organizations that do not follow SFAS 117, check here ► □ and complete lines 30 through 34.   |                                 |     |                           |
| ം<br>ഇ 30                                      | Capital stock or trust principal, or current funds  |                                 | 30  |                           |
| te 31  | Paid-in or capital surplus, or land, building, or equipment fund  |                                 | 31  |                           |
| ¥ 32   | Retained earnings, endowment, accumulated income, or other funds .  |                                 | 32  |                           |
|  | Total net assets or fund balances   | 2,418,371                       | 33  | 2,916,656                 |
| Z 34   | Total liabilities and net assets/fund balances  | 2,888,623                       | 34  | 3,801,019                 |
|  |   | 2,000,020                       |     | Form <b>990</b> (2011)    |

|        | 0 (2011)   |    | Pa   | age <b>12</b> |
|--------|--|----|------|---------------|
| Par    |  |    |      |               |
|        | Check if Schedule O contains a response to any question in this Part XI  |    |      | . 🗸           |
| 1      | Total revenue (must equal Part VIII, column (A), line 12)  |    | 4 40 | 2 000         |
| -      |  |    |      | 53,990        |
| 2<br>3 |  |    |      | 62,625        |
| 3<br>4 |  |    |      | 01,365        |
| -      |  |    |      | 8,371         |
| 5      | Other changes in net assets or fund balances (explain in Schedule O)       5         Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,                                  |    |      | -3,080        |
| 6      | column (B))  |    | 2.01 | C CEC         |
| art    | XII Financial Statements and Reporting   |    | 2,91 | 6,656         |
| ure    | Check if Schedule O contains a response to any question in this Part XII   |    |      |               |
|        |  |    | Yes  | No            |
| 1      | Accounting method used to prepare the Form 990: Cash Accrual Other Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.                               | i  |      |               |
| 2a     | Were the organization's financial statements compiled or reviewed by an independent accountant?  | 2a |      | ~             |
| b      | Were the organization's financial statements audited by an independent accountant?   | 2b | ~    |               |
| С      | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | ~    |               |
|        | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  |    |      |               |
| d      | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:   | •  |      |               |
|        | Separate basis Consolidated basis Both consolidated and separate basis   |    |      |               |
| 3a     | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?   | 3a | ~    |               |
| b      | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the   |    | •    |               |

Form **990** (2011)

| SCH   | ΞDL | JLI | Е  | Α   |     |
|-------|-----|-----|----|-----|-----|
| (Form | 990 | or  | 99 | 90- | EZ) |

Department of the Treasury

Name of the organization

Internal Revenue Service

h

# **Public Charity Status and Public Support**

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

| Dublia Chavity Status and Dublia Supp.                              |                      |                |  |
|---|----------------------|----------------|--|
| Public Charity Status and Public Supp                               | 2011                 |                |  |
| nplete if the organization is a section 501(c)(3) organization or a |                      |                |  |
| 4947(a)(1) nonexempt charitable trust.                              |                      | Open to Public |  |
| ► Attach to Form 990 or Form 990-EZ. ► See separate instruction     | Inspection           |                |  |
|   | Employer identificat | on number      |  |
| & TECHNOLOGY INSTITUTE  | 92-0129853           |                |  |
| Charity Status (All organizations must complete this page)          | ions                 |                |  |

OMB No. 1545-0047

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2

**PRINCE WILLIAM SOUND SCIENCE & TECHNOLOGY INSTITUTE** 

- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state:
- An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.)
- A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8
- $\Box$  An organization that normally receives: (1) more than  $33^{1/3}$ % of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a 🗌 Type I **b** Type II **c** Type III–Functionally integrated **d** Type III–Other e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting f

  - Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons?

| (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and |          | res | NO |
|---|----------|-----|----|
| (iii) below, the governing body of the supported organization?  | 11g(i)   |     |    |
| (ii) A family member of a person described in (i) above?  | 11g(ii)  |     |    |
| (iii) A 35% controlled entity of a person described in (i) or (ii) above?                                     | 11g(iii) |     |    |

| (iii) A 3570 controlled entity of a person described in (i) of (ii) above: |
|--|
| Provide the following information about the supported organization(s).     |

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization<br>(described on lines 1–9<br>above or IRC section<br>(see instructions)) | in col. (i) lis | organization<br>sted in your<br>document? | our the organization in |    | (i) of your (i) organization in col. |    | <b>(vii)</b> Amount of support |  |
|------------------------------------|----------|--|-----------------|---|-------------------------|----|--------------------------------------|----|--------------------------------|--|
|                                    |          | , <i>"</i>   | Yes             | No  | Yes                     | No | Yes                                  | No |                                |  |
| (A)                                |          |  |                 |   |                         |    |                                      |    |                                |  |
| (B)                                |          |  |                 |   |                         |    |                                      |    |                                |  |
| (C)                                |          |  |                 |   |                         |    |                                      |    |                                |  |
| (D)                                |          |  |                 |   |                         |    |                                      |    |                                |  |
| (E)                                |          |  |                 |   |                         |    |                                      |    |                                |  |
| Total                              |          |  |                 |   |                         |    |                                      |    |                                |  |

#### Schedule A (Form 990 or 990-EZ) 2011 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total grants, contributions, 1 Gifts and membership fees received. (Do not include any "unusual grants.") . . . 2,716,183 3,243,332 2,776,902 3,077,948 4,286,948 16,101,313 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge . . . . 0 0 0 0 0 0 Total. Add lines 1 through 3. 4 3,243,332 2,716,183 2,776,902 3,077,948 4,286,948 16,101,313 5 The portion of total contributions by each person (other than а governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . Public support. Subtract line 5 from line 4. 6 16,101,313 Section B. Total Support Calendar year (or fiscal year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 7 Amounts from line 4 . . . . . . 3,243,332 4,286,948 16,101,313 2,716,183 2,776,902 3,077,948 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . . . . . . . . 9,713 3,785 127,247 80,346 177,042 398,133 Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . 0 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . . . . 0 0 0 0 0 0 **Total support.** Add lines 7 through 10 11 16,499,446 Gross receipts from related activities, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f) 14 14 97.59 % 15 15 97.84 % 331/3% support test-2011. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a ~ **33**<sup>1</sup>/<sub>3</sub>% support test-2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33<sup>1</sup>/<sub>3</sub>% or more, b check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . $\square$ 17a 10%-facts-and-circumstances test-2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test-2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line b 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Schedule A (Form 990 or 990-EZ) 2011

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Secti | on A. Public Support   |                 |                 |                |                |                 |                   |
|-------|--|-----------------|-----------------|----------------|----------------|-----------------|-------------------|
| Calen | dar year (or fiscal year beginning in) 🕨   | (a) 2007        | (b) 2008        | (c) 2009       | (d) 2010       | (e) 2011        | (f) Total         |
| 1     | Gifts, grants, contributions, and membership fees  |                 |                 |                |                |                 |                   |
|       | received. (Do not include any "unusual grants.")   |                 |                 |                |                |                 |                   |
| 2     | Gross receipts from admissions, merchandise  |                 |                 |                |                |                 |                   |
|       | sold or services performed, or facilities furnished in any activity that is related to the   |                 |                 |                |                |                 |                   |
|       | organization's tax-exempt purpose  |                 |                 |                |                |                 |                   |
| 3     | Gross receipts from activities that are not an   |                 |                 |                |                |                 |                   |
|       | unrelated trade or business under section 513  |                 |                 |                |                |                 |                   |
| 4     | Tax revenues levied for the  |                 |                 |                |                |                 |                   |
|       | organization's benefit and either paid   |                 |                 |                |                |                 |                   |
|       | to or expended on its behalf   |                 |                 |                |                |                 |                   |
| 5     | The value of services or facilities  |                 |                 |                |                |                 |                   |
|       | furnished by a governmental unit to the  |                 |                 |                |                |                 |                   |
|       | organization without charge  |                 |                 |                |                |                 |                   |
| 6     | Total. Add lines 1 through 5   |                 |                 |                |                |                 |                   |
| 7a    | Amounts included on lines 1, 2, and 3  |                 |                 |                |                |                 |                   |
|       | received from disqualified persons .   |                 |                 |                |                |                 |                   |
| b     | Amounts included on lines 2 and 3  |                 |                 |                |                |                 |                   |
|       | received from other than disqualified  |                 |                 |                |                |                 |                   |
|       | persons that exceed the greater of \$5,000   |                 |                 |                |                |                 |                   |
|       | or 1% of the amount on line 13 for the year  |                 |                 |                |                |                 |                   |
| с     | Add lines 7a and 7b  |                 |                 |                |                |                 |                   |
| 8     | Public support (Subtract line 7c from  |                 |                 |                |                |                 |                   |
|       | line 6.)   |                 |                 |                |                |                 |                   |
| Secti | on B. Total Support  |                 |                 |                |                |                 |                   |
| Calen | dar year (or fiscal year beginning in) 🕨   | <b>(a)</b> 2007 | <b>(b)</b> 2008 | (c) 2009       | (d) 2010       | <b>(e)</b> 2011 | (f) Total         |
| 9     | Amounts from line 6  |                 |                 |                |                |                 |                   |
| 10a   | Gross income from interest, dividends,   |                 |                 |                |                |                 |                   |
|       | payments received on securities loans, rents,  |                 |                 |                |                |                 |                   |
|       | royalties and income from similar sources .  |                 |                 |                |                |                 |                   |
| b     | Unrelated business taxable income (less  |                 |                 |                |                |                 |                   |
|       | section 511 taxes) from businesses   |                 |                 |                |                |                 |                   |
|       | acquired after June 30, 1975   |                 |                 |                |                |                 |                   |
| С     | Add lines 10a and 10b  |                 |                 |                |                |                 |                   |
| 11    | Net income from unrelated business   |                 |                 |                |                |                 |                   |
|       | activities not included in line 10b, whether   |                 |                 |                |                |                 |                   |
|       | or not the business is regularly carried on  |                 |                 |                |                |                 |                   |
| 12    | Other income. Do not include gain or   |                 |                 |                |                |                 |                   |
|       | loss from the sale of capital assets   |                 |                 |                |                |                 |                   |
| 40    | (Explain in Part IV.)  |                 |                 |                |                |                 |                   |
| 13    | <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)  | ĺ               |                 |                |                |                 |                   |
| 14    |  |                 | 'a firat accor  | d third fourth | or fifth tox y |                 | 1 = 501(a)(2)     |
| 14    | First five years. If the Form 990 is for the organization, check this box and stop he  | •               |                 |                |                |                 |                   |
| Secti | on C. Computation of Public Suppor   |                 |                 |                |                |                 |                   |
| 15    | Public support percentage for 2011 (line 8   |                 |                 | 3 column (fl)  |                | 15              | %                 |
| 16    | Public support percentage from 2010 Sch  |                 | •               |                |                | 16              | %                 |
|       | on D. Computation of Investment In   |                 |                 |                |                | 10              | 70                |
| 17    |  |                 | -               | v line 13 colu | mn (f))        | 17              | %                 |
| 18    |  |                 |                 |                |                | %               |                   |
| 19a   | 33 <sup>1</sup> / <sub>3</sub> % support tests – 2011. If the organ  |                 |                 |                |                | -               |                   |
|       | 17 is not more than $33^{1/3}$ %, check this box   |                 |                 |                |                |                 |                   |
| b     | <b>33<sup>1</sup>/3% support tests</b> — <b>2010.</b> If the organiz   | -               | -               | -              |                | -               |                   |
|       | line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this l  |                 |                 |                |                |                 |                   |
| 20    | <b>Private foundation.</b> If the organization di  | -               | -               |                |                |                 |                   |
|       | and the second s |                 |                 | , , 0          |                |                 | · · · · · · · · · |

Schedule A (Form 990 or 990-EZ) 2011

| Schedule A (Form 990 or 990-EZ) 2011 |  |  |  |  |  |
|--------------------------------------|--|--|--|--|--|
| Part IV                              | <b>Supplemental Information.</b> Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). |  |  |  |  |
|                                      |  |  |  |  |  |
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|                                      |  |  |  |  |  |

| SCHEDULE C           | Political Campaign and Lobbying Activities                                     | OM |
|----------------------|--|----|
| (Form 990 or 990-EZ) | For Organizations Example From Income Tax Under section 501(a) and section 527 |    |

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury Internal Revenue Service

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

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

| <ul> <li>Se</li> </ul> | ction 501(c)(4), (5), or (6) organizations: Complete Part III.   |             |                   |           |
|------------------------|--|-------------|-------------------|-----------|
|                        |  | Employer id | lentification num | ber       |
| PRINC                  | E WILLIAM SOUND SCIENCE & TECHNOLOGY INSTITUTE   |             | 92-0129853        |           |
| Part                   | I-A Complete if the organization is exempt under section 501(c) or is a section 501(c) or i | ection 527  | 7 organizatior    | <b>).</b> |
| 1                      | Provide a description of the organization's direct and indirect political campaign activities  |             |                   |           |
| 2                      | Political expenditures   | 🕨           | \$                |           |
| 3                      | Volunteer hours  |             |                   |           |
|                        |  |             |                   |           |
| 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 495   | 5 🕨         | \$                |           |
| 3                      | If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  |             | 🗌 Ye              | s 🗌 No    |
| 4a                     | Was a correction made?   |             | 🗌 Ye              | s 🗌 No    |
| b                      | If "Yes," describe in Part IV.   |             |                   |           |
| Part                   | I-C Complete if the organization is exempt under section 501(c), except s  | section 50  | 01(c)(3).         |           |
| 1                      | Enter the amount directly expended by the filing organization for section 527 exemp  | t function  |                   |           |
|                        | activities   | 🕨           | \$                |           |
| 2                      | Enter the amount of the filing organization's funds contributed to other organizations for   | or section  |                   |           |
|                        | 527 exempt function activities   | 🕨           | \$                |           |
| 3                      | Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1  | 120-POL,    |                   |           |
|                        | line 17b   | 🕨           | \$                |           |
| 4                      | Did the filing organization file Form 1120-POL for this year?  |             | 🗌 Ye              | s 🗌 No    |
|                        |  |             |                   |           |

5 Enter the names, addresses and employer identification number (EIN) 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.

| <b>(a)</b> Name | <b>(b)</b> Address | <b>(c)</b> EIN | <b>(d)</b> Amount paid from<br>filing organization's<br>funds. If none, enter -0 | (e) Amount of political<br>contributions received and<br>promptly and directly<br>delivered to a separate<br>political organization. If<br>none, enter -0 |
|-----------------|--------------------|----------------|--|---|
| (1)             |                    |                |  |   |
| (2)             |                    |                |  |   |
| (3)             |                    |                |  |   |
| (4)             |                    |                |  |   |
| (5)             |                    |                |  |   |
| (6)             |                    |                |  |   |

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

Schedule C (Form 990 or 990-EZ) 2011



Inspection

| Pa | art | II-A Complete if the organization section 501(h)). | is exempt under section 501(c)(3) and filed        | d Form 5768 (ele      | ction under    |
|----|-----|--|--|-----------------------|----------------|
| Α  | С   | neck 🕨 🗌 if the filing organization belo           | ongs to an affiliated group (and list in Part IV e | each affiliated gro   | up member's    |
|    |     | name, address, EIN, expens                         | ses, and share of excess lobbying expenditur       | es).                  |                |
| В  | С   | neck 🕨 🗌 if the filing organization che            | cked box A and "limited control" provisions a      | ipply.                |                |
|    |     |  | ving Expenditures                                  | (a) Filing            | (b) Affiliated |
|    |     | (The term "expenditures" me                        | ans amounts paid or incurred.)                     | organization's totals | group totals   |
| _  | 1a  | Total lobbying expenditures to influence p         | oublic opinion (grass roots lobbying)              | 0                     |                |
|    | b   | Total lobbying expenditures to influence a         | a legislative body (direct lobbying)               | 7,943                 |                |
|    | С   | Total lobbying expenditures (add lines 1a          | and 1b)  | 7,943                 |                |
|    | d   | Other exempt purpose expenditures                  |  | 3,954,682             |                |
|    | е   | Total exempt purpose expenditures (add             | lines 1c and 1d)                                   | 3,962,625             |                |
|    | f   | Lobbying nontaxable amount. Enter the columns.     | ne amount from the following table in both         | 348,131               |                |
|    | [   | If the amount on line 1e, column (a) or (b) is:    | 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.                                       |                       |                |
|    | g   | Grassroots nontaxable amount (enter 259            | % of line 1f)                                      | 87,033                |                |
|    | h   | Subtract line 1g from line 1a. If zero or les      | ss, enter -0                                       | 0                     |                |
|    | i   | Subtract line 1f from line 1c. If zero or les      | s, enter -0  | 0                     |                |
|    | j   | If there is an amount other than zero of           | on either line 1h or line 1i, did the organization | file Form 4720        |                |
|    |     | reporting section 4911 tax for this year?          |  |                       | Yes 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 instructions for lines 2a through 2f on page 4.)

|    | Lobbying Expenditures During 4-Year Averaging Period       |                 |                 |                 |                 |                  |  |  |  |
|----|--|-----------------|-----------------|-----------------|-----------------|------------------|--|--|--|
|    | Calendar year (or fiscal year beginning in)                | <b>(a)</b> 2008 | <b>(b)</b> 2009 | <b>(c)</b> 2010 | <b>(d)</b> 2011 | <b>(e)</b> Total |  |  |  |
| 2a | Lobbying nontaxable amount                                 | 287,110         | 296,961         | 312,607         | 348,131         | 1,244,809        |  |  |  |
| b  | Lobbying ceiling amount<br>(150% of line 2a, column (e))   |                 |                 |                 |                 | 1,867,214        |  |  |  |
| С  | Total lobbying expenditures                                | 12,284          | 25,493          | 4,183           | 7,943           | 49,903           |  |  |  |
| d  | Grassroots nontaxable amount                               | 71,778          | 74,240          | 78,152          | 87,033          | 311,203          |  |  |  |
| e  | Grassroots ceiling amount<br>(150% of line 2d, column (e)) |                 |                 |                 |                 | 466,805          |  |  |  |
| f  | Grassroots lobbying expenditures                           | 0               | 0               | 0               | 0               | 0                |  |  |  |

Schedule C (Form 990 or 990-EZ) 2011

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

| For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description |   | (a      | I)    | (b)   |       |      |
|---|---|---------|-------|-------|-------|------|
|   | bbying activity.  | Yes     | No    | Am    | nount |      |
| 1   | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: |         |       |       |       |      |
| а   | Volunteers?   |         |       |       |       |      |
| b   | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  |         |       |       |       |      |
| С   | Media advertisements?   |         |       |       |       |      |
| d   | Mailings to members, legislators, or the public?  |         |       |       |       |      |
| е   | Publications, or published or broadcast statements?   |         |       |       |       |      |
| f   | Grants to other organizations for lobbying purposes?  |         |       |       |       |      |
| g   | Direct contact with legislators, their staffs, government officials, or a legislative body?   |         |       |       |       |      |
| h   | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?   |         |       |       |       |      |
| i   | Other activities?   |         |       |       |       |      |
| j   | Total. Add lines 1c through 1i  |         |       |       |       |      |
| 2a  | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?   |         |       |       |       |      |
| b   | If "Yes," enter the amount of any tax incurred under section 4912   |         |       |       |       |      |
| с   | If "Yes," enter the amount of any tax incurred by organization managers under section 4912  |         |       |       |       |      |
| d   | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  |         |       |       |       |      |
| Part  | III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)<br>501(c)(6).  | )(5), c | or se | ction |       |      |
|   |   |         |       |       | Yes   | No   |
| 1   | Were substantially all (90% or more) dues received nondeductible by members?  |         |       | 1     |       |      |
| 2   | Did the organization make only in-house lobbying expenditures of \$2,000 or less?   |         |       | 2     |       |      |
| 3   | Did the organization agree to carry over lobbying and political expenditures from the prior year? .   |         |       | 3     |       |      |
| Part  | III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)<br>501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OF<br>answered "Yes."                                   |         |       |       | ne 3  | , is |

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

# Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

| <br> | <br> |  |
|------|------|--|
| <br> | <br> |  |
| <br> | <br> |  |
|      |      |  |
|      |      |  |
| <br> | <br> |  |

| SCHEDULE   | D |
|------------|---|
| (Form 990) |   |

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

| OMB No. 1545-0047            |
|------------------------------|
| 2011                         |
| Open to Public<br>Inspection |

| Name o     | f the organization  | Employer identification number            |
|------------|---|---|
| PRINC      | E WILLIAM SOUND SCIENCE & TECHNOLOGY INSTITUTE  | 92-0129853                                |
| Par        | t I Organizations Maintaining Donor Advised Funds or Other Similar F  | unds or Accounts. Complete if the         |
|            | organization answered "Yes" to Form 990, Part IV, line 6.   |   |
|            | (a) Donor advised funds   | (b) Funds and other accounts              |
| 1          | Total number at end of year   |   |
| 2          | Aggregate contributions to (during year)  |   |
| 3          | Aggregate 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 asset   | s held in donor advised                   |
|            | funds are the organization's property, subject to the organization's exclusive legal col  |   |
| 6          | Did the organization inform all grantees, donors, and donor advisors in writing that g  |   |
|            | only for charitable purposes and not for the benefit of the donor or donor advisor, o   |   |
|            | conferring impermissible private benefit?   |   |
| Par        | t II Conservation Easements. Complete if the organization answered "Ye  | s" to Form 990, Part IV, line 7.          |
| 1          | Purpose(s) of conservation easements held by the organization (check all that apply).   | · · · ·                                   |
|            | Preservation of land for public use (e.g., recreation or education)   | n of an historically important land area  |
|            |   | n of a certified historic structure       |
|            | Preservation of open space  |   |
| 2          | Complete lines 2a through 2d if the organization held a qualified conservation contrib  | ution in the form of a conservation       |
|            | easement on the last day of the tax year.   |   |
|            |   | Held at the End of the Tax Year           |
| а          | Total number of conservation easements  | <b>2</b> a                                |
| b          | Total acreage restricted by conservation easements  | 2b  |
| с          | Number of conservation easements on a certified historic structure included in (a) .  | 2c  |
| d          | Number of conservation easements included in (c) acquired after 8/17/06, and n  | ot on a                                   |
|            | historic structure listed in the National Register  | · · · 2d                                  |
| 3          | Number of conservation easements modified, transferred, released, extinguished, or  | terminated by the organization during the |
|            | tax year ►  |   |
| 4          | Number of states where property subject to conservation easement is located   |   |
| 5          | Does the organization have a written policy regarding the periodic monitoring,  |   |
|            | violations, and enforcement of the conservation easements it holds?   | · · · · · · · · 🗌 Yes 🗌 No                |
| 6          | Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservat  | ion easements during the year             |
|            | ▶   |   |
| 7          | Amount of expenses incurred in monitoring, inspecting, and enforcing conservation e   | asements during the year                  |
| _          | ▶\$   |   |
| 8          | Does each conservation easement reported on line 2(d) above satisfy the requirement   |   |
|            | (i) and section 170(h)(4)(B)(ii)?   |   |
| 9          | In Part XIV, describe how the organization reports conservation easements in its reve   |   |
|            | 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       |   |   |
| 4 -        | Complete if the organization answered "Yes" to Form 990, Part IV, line  |   |
| <b>1</b> a | If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in works of art, historical treasures, or other similar assets held for public exhibition,  |   |
|            | public service, provide, in Part XIV, the text of the footnote to its financial statements  |   |
| h          |   |   |
| D          | If the organization elected, as permitted under SFAS 116 (ASC 958), to report in works of art, historical treasures, or other similar assets held for public exhibition,  |   |
|            | public service, provide the following amounts relating to these items:  | education, or research in furtherance of  |
|            |   | ◆   |
|            | (i) Revenues included in Form 990, Part VIII, line 1         .          .   | · · · · · <b>P</b>                        |
| 2          | (II) Assets included in Form 990, Part X  | · · · · · ► ⊅                             |
| 2          | following amounts required to be reported under SFAS 116 (ASC 958) relating to these  |   |
| ~          |   |   |
| a<br>b     | Revenues included in Form 990, Part VIII, line 1         . <th< th=""><th>· · · · · <b>F P</b></th></th<> | · · · · · <b>F P</b>                      |
| b          | $\neg$ 33C13 III VIUUCU III FUIIII 33U, Fail $\land$  | 🚩 👌                                       |

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

| Schedu     | e D (Form 990) 2011   |              |                                 |               |           |                         |          |                            |                  | Page <b>2</b> |
|------------|---|--------------|---------------------------------|---------------|-----------|-------------------------|----------|----------------------------|------------------|---------------|
| Part       | III Organizations Maintaining   | Collectior   | ns of Art, H                    | listo         | rical 1   | reasures                | , or Ot  | her Similar A              | Assets (co       | ontinued)     |
| 3          | Using the organization's acquisition, a collection items (check all that apply):  | ccession, a  | and other re                    | cord          | s, chec   | k any of th             | e follov | ving that are a            | significan       | t use of its  |
| а          | Public exhibition   |              | c                               | 1 🗌           | ] Loan    | or exchang              | ge prog  | rams                       |                  |               |
| b          | Scholarly research  |              | (                               | •             | ] Other   | r                       |          |                            |                  |               |
| С          | Preservation for future generations   |              |                                 |               |           |                         |          |                            |                  |               |
| 4          | Provide a description of the organization XIV.                                    | on's collec  | tions and ex                    | plain         | n how t   | hey further             | the org  | anization's exe            | empt purp        | ose in Part   |
| 5          | During the year, did the organization s assets to be sold to raise funds rather t |              |                                 |               |           |                         |          |                            |                  | es 🗌 No       |
| Part       |   |              |                                 |               |           | anization               | answe    | red "Yes" to I             | Form 990         | , Part IV,    |
|            | line 9, or reported an amount   |              |                                 |               |           |                         |          |                            |                  |               |
| 1a         | Is the organization an agent, trustee, included on Form 990, Part X?              |              |                                 |               |           |                         |          |                            |                  |               |
|            |   |              |                                 |               |           |                         | • •      |                            | · [] Y           | es 📙 No       |
| b          | If "Yes," explain the arrangement in Pa   | rt XIV and o | complete the                    | e tollo       | owing t   | able:                   |          |                            | Amount           |               |
|            | 5   |              |                                 |               |           |                         |          |                            | Amount           |               |
| C          | Beginning balance   |              |                                 |               |           |                         | 10       |                            |                  |               |
| d          | Additions during the year   |              |                                 |               |           |                         | 10       |                            |                  |               |
| e          | Distributions during the year   |              |                                 |               |           |                         | 1e       |                            |                  |               |
| f          | Ending balance  |              |                                 |               |           |                         | 1f       |                            | v                | es 🗌 No       |
| 2a<br>b    | If "Yes," explain the arrangement in Pa   |              | 990, Fart A, I                  | ine z         | 11.       |                         | • •      |                            | · 🗆 T            |               |
| Par        |   |              | raanization                     | ans           | wered     | "Yes" to F              | Form 9   | 90 Part IV lir             | ne 10            |               |
| i ai       |   | (a) Current  | -                               | Prior         |           | (c) Two yea             |          | (d) Three years ba         |                  | r years back  |
| 1a         | Beginning of year balance   | .,           |                                 |               |           | ., ,                    |          | ., ,                       |                  | ,             |
| b          | Contributions   |              |                                 |               |           |                         |          |                            |                  |               |
| c          | Net investment earnings, gains, and   |              |                                 |               |           |                         |          |                            |                  |               |
|            | losses  |              |                                 |               |           |                         |          |                            |                  |               |
| d          | Grants or scholarships  |              |                                 |               |           |                         |          |                            |                  |               |
| е          | Other expenditures for facilities and   |              |                                 |               |           |                         |          |                            |                  |               |
|            | programs  |              |                                 |               |           |                         |          |                            |                  |               |
| f          | Administrative expenses   |              |                                 |               |           |                         |          |                            |                  |               |
| g          | End of year balance   |              |                                 |               |           |                         |          |                            |                  |               |
| 2          | Provide the estimated percentage of th  | ne current y | ear end bala                    | ance          | (line 1g  | , column (a             | a)) held | as:                        |                  |               |
| а          | Board designated or quasi-endowment   | t 🕨          | %                               |               |           |                         |          |                            |                  |               |
| b          | Permanent endowment   | %            |                                 |               |           |                         |          |                            |                  |               |
| С          | Temporarily restricted endowment  |              | %                               |               |           |                         |          |                            |                  |               |
|            | The percentages in lines 2a, 2b, and 2c   |              |                                 |               |           |                         |          |                            |                  |               |
| 3a         | Are there endowment funds not in the  | possessio    | n of the org                    | aniza         | tion that | at are held             | and ad   | ministered for             | the              |               |
|            | organization by:  |              |                                 |               |           |                         |          |                            |                  | Yes No        |
|            | (i) unrelated organizations   |              |                                 |               |           |                         |          |                            | . <b>3a(i)</b>   |               |
|            | (ii) related organizations  |              |                                 |               |           |                         |          |                            | . 3a(ii)         |               |
| b          | If "Yes" to 3a(ii), are the related organiz                                       |              |                                 |               |           |                         | • •      |                            | . <b>3b</b>      |               |
| 4<br>Dorf  | Describe in Part XIV the intended uses<br>VI Land, Buildings, and Equipt          |              |                                 |               |           |                         |          |                            |                  |               |
| Part       |   |              |                                 |               |           |                         | (-)      | A                          | (-I) D-          |               |
|            | Description of property   |              | ost or other bas<br>investment) | s (r          |           | or other basis<br>ther) |          | Accumulated<br>epreciation | ( <b>a</b> ) Boo | ok value      |
| 1a         |   |              |                                 | 0             |           | 0                       |          |                            |                  | 0             |
| b          | Buildings   |              |                                 | 0             |           | 0                       |          | 0                          |                  | 0             |
| c          | Leasehold improvements  |              | 560,0                           |               |           | 0                       |          | 540,217                    |                  | 19,803        |
| d          | Equipment   |              | 2,610,7                         |               |           | 0                       |          | 1,317,287                  |                  | 1,293,485     |
| e<br>Total | Other   |              | orm 000 Da                      |               | oolum     | 0<br>(P) line 1(        |          | 0                          |                  | 0             |
| i otal.    | $\pi u u m e s ra u n u u u u u re. (U u u u n u u u) m u$                        | υσι σγμαι Γ  | <u>onn 330, Fa</u>              | ιι Λ <u>,</u> | Column    | י <i>שווו , נט</i> ו י  | 1011     | 🖛                          |                  | 1,313,288     |

Schedule D (Form 990) 2011

| Schedule D (Fo          | rm 990) 2011  |                           |   | Page <b>3</b>   |
|-------------------------|---|---------------------------|---|-----------------|
| Part VII                | Investments-Other Securities  | . See Form 990, Part X, I | ine 12.   |                 |
| (a)                     | Description of security or category<br>(including name of security)                 | <b>(b)</b> Book value     | <b>(c)</b> Method of val<br>Cost or end-of-year n |                 |
| (1) Financial           | derivatives   |                           |   |                 |
|                         | eld equity interests  |                           |   |                 |
| (3) Other               |   |                           |   |                 |
| (A)                     |   |                           |   |                 |
| (B)                     |   |                           |   |                 |
| (C)                     |   |                           |   |                 |
| (D)                     |   |                           |   |                 |
| (E)                     |   |                           |   |                 |
| (F)                     |   |                           |   |                 |
| (G)                     |   |                           |   |                 |
| (H)                     |   |                           |   |                 |
|                         |   |                           |   |                 |
|                         | b) must equal Form 990, Part X, col. (B) line 12.) ►<br>Investments—Program Related | A Saa Farm 000 Dart V     | line 10   |                 |
| Part VIII               | a) Description of investment type   |                           |   | luation         |
|                         | a) Description of investment type   | (b) Book value            | (c) Method of va<br>Cost or end-of-year n         |                 |
| (1)                     |   |                           |   |                 |
| (2)                     |   |                           |   |                 |
| (3)                     |   |                           |   |                 |
| (4)                     |   |                           |   |                 |
| (5)                     |   |                           |   |                 |
| (6)                     |   |                           |   |                 |
| (7)                     |   |                           |   |                 |
| (8)                     |   |                           |   |                 |
| (9)                     |   |                           |   |                 |
| (10)<br>Total (Column ( | b) must equal Form 990, Part X, col. (B) line 13.) 🕨                                |                           |   |                 |
| Part IX                 | Other Assets. See Form 990, Pa  | art X line 15             |   |                 |
|                         |   | a) Description            |   | (b) Book value  |
| (1)                     |   |                           |   | (1) 20011 14140 |
| (1) (2)                 |   |                           |   |                 |
| (3)                     |   |                           |   |                 |
| (4)                     |   |                           |   |                 |
| (5)                     |   |                           |   |                 |
| (6)                     |   |                           |   |                 |
| (7)                     |   |                           |   |                 |
| (8)                     |   |                           |   |                 |
| (9)                     |   |                           |   |                 |
| (10)                    |   |                           |   |                 |
| Total. (Colui           | mn (b) must equal Form 990, Part X, c   |                           |   |                 |
| Part X                  | Other Liabilities. See Form 990,  | Part X, line 25.          |   |                 |
| 1.                      | (a) Description of liability  | (b) Book value            |   |                 |
|                         | income taxes  | 10,302                    |   |                 |
| (2)                     |   |                           |   |                 |
| (3)                     |   |                           |   |                 |
| (4)                     |   |                           |   |                 |
| (5)                     |   |                           |   |                 |
| (6)                     |   |                           |   |                 |
| (7)                     |   |                           |   |                 |
| (8)                     |   |                           |   |                 |
| (9)                     |   |                           |   |                 |
| (10)                    |   |                           |   |                 |
| (11)<br>Tatal (Oakuma ( |   |                           |   |                 |
| i otal. (Column (l      | b) must equal Form 990, Part X, col. (B) line 25.) ►                                | 10,302                    |   |                 |

**2.** FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

| Schedu | e D (Form 990) 2011  |        |                        |       | Page <b>4</b>           |
|--------|--|--------|------------------------|-------|-------------------------|
| Part   | XI Reconciliation of Change in Net Assets from Form 990 to Au                          | dite   | d Financial Staten     | nent  | S                       |
| 1      | Total revenue (Form 990, Part VIII, column (A), line 12)                               |        |                        | 1     | 4,463,990               |
| 2      | Total expenses (Form 990, Part IX, column (A), line 25)                                |        |                        | 2     | 3,962,625               |
| 3      | Excess or (deficit) for the year. Subtract line 2 from line 1                          |        |                        | 3     | 501,365                 |
| 4      | Net unrealized gains (losses) on investments   |        |                        | 4     | 0                       |
| 5      | Donated services and use of facilities   |        |                        | 5     | 30,250                  |
| 6      | Investment expenses  |        |                        | 6     | 0                       |
| 7      | Prior period adjustments   |        |                        | 7     | 0                       |
| 8      | Other (Describe in Part XIV.)  |        |                        | 8     | 0                       |
| 9      | Total adjustments (net). Add lines 4 through 8   |        |                        | 9     | 30,250                  |
| 10     | Excess or (deficit) for the year per audited financial statements. Combine I           |        |                        | 10    |                         |
| Part   |  |        |                        | r Re  | eturn                   |
| 1      | Total revenue, gains, and other support per audited financial statements .             | • •    |                        |       | 1 4,476,494             |
| 2      | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                    | 1      |                        |       |                         |
| а      | Net unrealized gains on investments  | 2a     |                        | 0     |                         |
| b      | Donated services and use of facilities   | 2b     |                        | 0     |                         |
| c      | Recoveries of prior year grants  | 2c     |                        | 0     |                         |
| d      | Other (Describe in Part XIV.)  | 2d     | 12,50                  |       |                         |
| e      | Add lines <b>2a</b> through <b>2d</b>  |        |                        | -     | le 12,504               |
| 3      | Subtract line <b>2e</b> from line <b>1</b>   | •••    |                        |       | 3 4,463,990             |
| 4      | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                   | 4 -    |                        |       |                         |
| a<br>L | Investment expenses not included on Form 990, Part VIII, line 7b                       | 4a     |                        | 0     |                         |
| b      | Other (Describe in Part XIV.)  | 4b     |                        | 0     |                         |
| с<br>5 | Add lines <b>4a</b> and <b>4b</b>  |        |                        |       | c 0<br>5 4.463.990      |
| Part   |  |        |                        |       | -,,                     |
| 1      | Total expenses and losses per audited financial statements                             |        |                        |       | 1 3,978,209             |
| 2      | Amounts included on line 1 but not on Form 990, Part IX, line 25:                      | •••    |                        |       | 3,970,209               |
| a      | Donated services and use of facilities   | 2a     |                        | 0     |                         |
| b      | Prior year adjustments   | 2b     |                        | 0     |                         |
| c      | Other losses   | 2c     |                        | 0     |                         |
| d      | Other (Describe in Part XIV.)  | 2d     | 15.58                  | -     |                         |
| e      | Add lines <b>2a</b> through <b>2d</b>  |        |                        |       | e 15,584                |
| 3      | Subtract line <b>2e</b> from line <b>1</b>   |        |                        | 3     | 3 3,962,625             |
| 4      | Amounts included on Form 990, Part IX, line 25, but not on line 1:                     |        |                        |       |                         |
| а      | Investment expenses not included on Form 990, Part VIII, line 7b                       | 4a     |                        | 0     |                         |
| b      | Other (Describe in Part XIV.)  | 4b     |                        | 0     |                         |
| С      | Add lines <b>4a</b> and <b>4b</b>  |        |                        | 4     | c 0                     |
| 5      | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line            | e 18.) |                        | 5     | 5 3,962,625             |
| Part   | XIV Supplemental Information   |        |                        |       |                         |
|        | lete this part to provide the descriptions required for Part II, lines 3, 5, and 9     |        |                        |       |                         |
|        | , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, I | lines  | 2d and 4b. Also cor    | mplet | te this part to provide |
| -      | Iditional information.   |        |                        |       |                         |
| Scheo  | ule D, Part XII, Line 2d - Copper River Nouveau Revenues less expenses that ar         | re not | contributions.         |       |                         |
|        |  |        |                        |       |                         |
|        |  |        |                        |       |                         |
|        |  |        |                        |       |                         |
|        | ule D, Part XIII, Line 2d - Copper River Nouveau Annual Fundraiser expenses ex         | xclud  | ed from Part I - 12,50 | 4 Gai | ming Expense            |
| exclu  | led from part IX = 3,080   |        |                        |       |                         |
|        |  |        |                        |       |                         |
|        |  |        |                        |       |                         |
|        |  |        |                        |       |                         |
|        |  |        |                        |       |                         |
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|        |  |        |                        |       |                         |
|        |  |        |                        |       |                         |
|        |  |        |                        |       |                         |

| SCHEDULE F<br>(Form 990) |   | State                           |   | OMB No. 1545-0047   |  |  |                                      |   |  |
|--------------------------|---|---------------------------------|---|---|--|--|--------------------------------------|---|--|
|                          |   |                                 |   | 2011  |  |  |                                      |   |  |
|                          | nent of the Treasury<br>Revenue Service |                                 | Part IV, line 14b, 15, or 16.<br>► Attach to Form 990. ► See separate instructions. |   |  |  |                                      |   |  |
|                          | of the organization                     |                                 |   |   |  |  |                                      | Inspection<br>dentification number                            |  |
| PRIN                     | CE WILLIAM SOU                          | IND SCIENCE 8                   |   | GY INSTITUTE  |  |  | g                                    | 2-0129853   |  |
| Par                      |   | Information<br>), Part IV, line |   | ies Outside   | the United States. Comp  | plete if the organ   | ization and                          | swered "Yes" to   |  |
| 1                        | assistance, the                         | e grantees' eli                 | gibility for the  | e grants or as  | ords to substantiate the amount of the selection   |  |                                      |   |  |
|                          | grants or assis                         | tance?                          |   |   |  |  |                                      | ∐Yes ∐No  |  |
| 2                        | For grantmak<br>assistance out          |                                 |   | the organizati  | on's procedures for monit  | toring the use c   | of its gran                          | its and other   |  |
| 3                        | Activities per F                        | Region. (The fo                 | llowing Part  | I, line 3 table o   | can be duplicated if addition  | nal space is need  | led.)                                |   |  |
|                          | (a) Regior                              |                                 | (b) Number of<br>offices in the<br>region   | (c) Number of<br>employees,<br>agents, and<br>independent<br>contractors<br>in region | (d) Activities conducted in<br>region (by type) (e.g.,<br>fundraising, program services,<br>investments,<br>grants to recipients<br>located in the region) | (e) If activity liste<br>a program se<br>describe specifi<br>service(s) in | ed in (d) is<br>ervice,<br>c type of | (f) Total<br>expenditures for<br>and investments<br>in region |  |
| (1)                      |   |                                 |   |   |  |  |                                      |   |  |
| (2)                      |   |                                 |   |   |  |  |                                      |   |  |
| (3)                      |   |                                 |   |   |  |  |                                      |   |  |
| (4)                      |   |                                 |   |   |  |  |                                      |   |  |
| (5)                      |   |                                 |   |   |  |  |                                      |   |  |
| (6)                      |   |                                 |   |   |  |  |                                      |   |  |
| (7)                      |   |                                 |   |   |  |  |                                      |   |  |
| (8)                      |   |                                 |   |   |  |  |                                      |   |  |
| (9)                      |   |                                 |   |   |  |  |                                      |   |  |
| (10)                     |   |                                 |   |   |  |  |                                      |   |  |
| (11)                     |   |                                 |   |   |  |  |                                      |   |  |
| (12)                     |   |                                 |   |   |  |  |                                      |   |  |
| (13)                     |   |                                 |   |   |  |  |                                      |   |  |
| (14)                     |   |                                 |   |   |  |  |                                      |   |  |
| (15)                     |   |                                 |   |   |  |  |                                      |   |  |
| (16)                     |   |                                 |   |   |  |  |                                      |   |  |
| (17)                     |   |                                 |   |   |  |  |                                      |   |  |
| <u>3a</u>                | Sub-total                               |                                 |   |   |  |  |                                      |   |  |
| b                        | Total from<br>sheets to Part            |                                 |   |   |  |  |                                      |   |  |
| с                        | Totals (add line                        | es 3a and 3b)                   |   |   |  |  |                                      |   |  |

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

Part II

(16)

Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 . . . . . .

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

Schedule F (Form 990) 2011

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2

Part III

| Part III can be duplica (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of<br>cash<br>disbursement | (f) Amount of<br>non-cash<br>assistance | (g) Description<br>of non-cash assistance | (h) Method of<br>valuation<br>(book, FMV,<br>appraisal,<br>other) |
|---|------------|--------------------------|--------------------------|---------------------------------------|---|---|---|
| (1)   |            |                          |                          |                                       |   |   |   |
| (2)   |            |                          |                          |                                       |   |   |   |
| (3)   |            |                          |                          |                                       |   |   |   |
| (4)   |            |                          |                          |                                       |   |   |   |
| (5)   |            |                          |                          |                                       |   |   |   |
| (6)   |            |                          |                          |                                       |   |   |   |
| (7)   |            |                          |                          |                                       |   |   |   |
| (8)   |            |                          |                          |                                       |   |   |   |
| (9)   |            |                          |                          |                                       |   |   |   |
| 10)   |            |                          |                          |                                       |   |   |   |
| 11)   |            |                          |                          |                                       |   |   |   |
| (12)  |            |                          |                          |                                       |   |   |   |
| 13)   |            |                          |                          |                                       |   |   |   |
| 14)   |            |                          |                          |                                       |   |   |   |
| 15)   |            |                          |                          |                                       |   |   |   |
| 16)   |            |                          |                          |                                       |   |   |   |
| 17)   |            |                          |                          |                                       |   |   |   |
| 18)   |            |                          |                          |                                       |   |   |   |

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Page 3

Schedule F (Form 990) 2011

| Page | 4 |
|------|---|
|------|---|

| Part | IV Foreign Forms   |     |      |
|------|--|-----|------|
| 1    | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)   | Yes | ₽ No |
| 2    | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) | Yes | ₽ No |
| 3    | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)  | Yes | 🖌 No |
| 4    | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)                   | Yes | 🖌 No |
| 5    | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)  | Yes | 🖌 No |
| 6    | Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)   | Yes | ✔ No |

Schedule F (Form 990) 2011

# Part V Supplemental Information

Complete this part to 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).

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| (Form<br>Departr<br>Internal<br>Name | Fundrai<br>Form 99<br>Indicate wheth<br>Mail solicit<br>Internet an<br>Phone solicit<br>In-person s | Complete if the organization entered more than \$15,000 on Form 990-EZ, line 6a.       ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.         UND SCIENCE & TECHNOLOGY INSTITUTE       92         ising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, 20-EZ filers are not required to complete this part.       92         her the organization raised funds through any of the following activities. Check all that apply.       92         traitions       e       Solicitation of non-government grants         ad email solicitations       f       Solicitation of government grants |                    |                |  |                                   |  | 2-0129853<br>, line 17.                                 |
|--------------------------------------|---|---|--------------------|----------------|--|-----------------------------------|--|---|
| b                                    | If "Yes," list th   |   | d individuals or e | entities (fund |  | •                                 | undraising service:<br>nents under which                                   | the fundraiser is to be                                 |
|                                      | (i) Name and addre<br>or entity (fur  |   | (ii) Activity      | custody o      | draiser have<br>r control of<br>outions? | (iv) Gross receipts from activity | (v) Amount paid to<br>(or retained by)<br>fundraiser listed in<br>col. (i) | (vi) Amount paid to<br>(or retained by)<br>organization |
| 1                                    |   |   |                    | Yes            | No                                       | _                                 |  |   |
| 2                                    |   |   |                    |                |  |                                   |  |   |
| 3                                    |   |   |                    |                |  |                                   |  |   |
| 4                                    |   |   |                    |                |  |                                   |  |   |
| 5                                    |   |   |                    |                |  |                                   |  |   |
| 6                                    |   |   |                    |                |  |                                   |  |   |
| 7                                    |   |   |                    |                |  |                                   |  |   |
| 8                                    |   |   |                    |                |  |                                   |  |   |
| 9                                    |   |   |                    |                |  |                                   |  |   |
| 10                                   |   |   |                    |                |  |                                   |  |   |
|                                      | List all states<br>registration or  | n which the orga<br>licensing.  | Inization is regis | stered or lic  | ensed to s                               |                                   | s or has been noti   | fied it is exempt from                                  |

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

Part II Fundraising Events. Complete if the organization answered "Yes" to 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                   |  |  |
|------------------------|--------|----------------------------|---|-----------------------|-----------------------------|------------------------------------|--|--|
|                        |        |                            | Nouveau Annual Fundra                   |                       |                             | (add col. (a) through<br>col. (c)) |  |  |
|                        |        |                            | (event type)                            | (event type)          | (event type) (total number) |                                    |  |  |
| ne                     |        |                            |   |                       |                             |                                    |  |  |
| Revenue                | 1      | Gross receipts             | 100,445                                 |                       |                             | 100,445                            |  |  |
| Ве                     | 2      | Less: Charitable           |   |                       |                             |                                    |  |  |
|                        |        | contributions              | 87,941                                  |                       |                             | 87,941                             |  |  |
|                        | 3      | Gross income (line 1 minus |   |                       |                             | ,                                  |  |  |
|                        |        | line 2)                    | 12,504                                  |                       |                             | 12,504                             |  |  |
|                        |        |                            | 0                                       |                       |                             | 0                                  |  |  |
|                        | 4      | Cash prizes                | 0                                       |                       |                             | 0                                  |  |  |
|                        |        |                            |   |                       |                             |                                    |  |  |
|                        | 5      | Noncash prizes             | 0                                       |                       |                             | 0                                  |  |  |
| ŝ                      |        |                            |   |                       |                             |                                    |  |  |
| nse                    | 6      | Rent/facility costs        | 650                                     |                       |                             | 650                                |  |  |
| <b>Direct Expenses</b> | -      |                            |   |                       |                             |                                    |  |  |
| Ê                      | 7      | Food and beverages         | 3,187                                   |                       | 0                           | 3,187                              |  |  |
| rec                    | 8      | Entertainment              | 0                                       |                       | 0                           | •                                  |  |  |
| ā                      | o      |                            | U                                       |                       | U                           | 0                                  |  |  |
|                        | 9      | Other direct expenses .    | 8,667                                   |                       |                             | 8,667                              |  |  |
|                        |        |                            | 0,001                                   |                       |                             | 0,001                              |  |  |
|                        | 10     | Direct expense summary. A  | dd lines 4 through 9 in c               | olumn (d)             |                             | ( 12,504 )                         |  |  |
|                        | 11     |                            | Combine line 3, column (d), and line 10 |                       |                             |                                    |  |  |
| Pa                     | rt III |                            |   |                       |                             | eported more                       |  |  |
|                        |        | than \$15,000 on Form 9    | 90-EZ, line 6a.                         |                       |                             |                                    |  |  |
| a)                     |        |                            |   | (b) Pull tabs/instant |                             | (d) Total gaming (add              |  |  |

| Revenue         |   |  | (a) Bingo                 | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add<br>col. (a) through col. (c)) |  |
|-----------------|---|--|---------------------------|---|------------------|---|--|
| Rev             | 1   | Gross revenue  |                           |   |                  |   |  |
| ses             | 2   | Cash prizes  |                           |   |                  |   |  |
| Expen           | 3   | Noncash prizes   |                           |   |                  |   |  |
| Direct Expenses | 4   | Rent/facility costs                                    |                           |   |                  |   |  |
|                 | 5   | Other direct expenses .                                |                           |   |                  |   |  |
|                 | 6   | Volunteer labor  | □ Yes%<br>□ No            | □ Yes%<br>□ No                                | □ Yes%<br>□ No   |   |  |
|                 | 7   | Direct expense summary. Ac                             | dd lines 2 through 5 in c | olumn (d)     .     .    .                    |                  | ( )   |  |
|                 | 8   | Net gaming income summar                               | y. Combine line 1, colur  | nn d, and line 7                              |                  |   |  |
| -               | <ul> <li>9 Enter the state(s) in which the organization operates gaming activities:</li> <li>a Is the organization licensed to operate gaming activities in each of these states?</li> <li>b If "No," explain:</li> </ul> |  |                           |   |                  |   |  |
| 10              |   | Were any of the organization's g<br>If "Yes," explain: |                           |   |                  |   |  |

| Schedu   | ile G (Form 990 or 990-EZ) 2011 Page <b>3</b>  |
|----------|--|
| 11<br>12 | Does the organization operate gaming activities with nonmembers?   |
| 13       | Indicate the percentage of gaming activity operated in:  |
| а        | The organization's facility         13a         %  |
| b        | An outside facility  |
| 14       | Enter the name and address of the person who prepares the organization's gaming/special events books and records:  |
|          | Name ►   |
|          | Address ►  |
| 15a      | Does the organization have a contract with a third party from whom the organization receives gaming revenue?   |
|          | If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$ If "Yes," enter name and address of the third party:  |
|          | Name ►   |
|          | Address ►  |
| 16       | Gaming manager information:  |
|          | Name ►   |
|          | Gaming manager compensation  |
|          | Description of services provided ►   |
|          | Director/officer   |
| 17<br>а  | Mandatory distributions:<br>Is the organization required under state law to make charitable distributions from the gaming proceeds to<br>retain the state gaming license?  |
| b        | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$   |
| Part     | Supplemental Information. Complete this part to 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 complete this part to provide any additional information (see instructions). |
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Schedule G (Form 990 or 990-EZ) 2011

| SCHEDULE I<br>(Form 990)   | Grants and Other Assistance to Organizations,<br>Governments, and Individuals in the United States |                                  |                             |                                       |   |   |                                |  |  |
|--|--|----------------------------------|-----------------------------|---------------------------------------|---|---|--------------------------------|--|--|
| Department of the Treasury<br>Internal Revenue Service                               | C  | complete if the orga             |                             | "Yes" to Form 990<br>o Form 990.      | ), Part IV, line 21 or 2                                    | 2.                                      | Open to Public<br>Inspection   |  |  |
| Name of the organization   |  |                                  |                             |                                       |   |   | Employer identification number |  |  |
| PRINCE WILLIAM SOUND SCIENC  | E & TECHNOLOGY IN  | ISTITUTE                         |                             |                                       |   |   | 92-0129853                     |  |  |
| Part I General Informati   | on on Grants and   | Assistance                       |                             |                                       |   | 1                                       |                                |  |  |
| 1 Does the organization ma the selection criteria used                               | to award the grants  | or assistance?                   |                             |                                       |   | •                                       |                                |  |  |
| 2 Describe in Part IV the org  |  |                                  |                             |                                       |   |   |                                |  |  |
| Part II Grants and Other<br>to Form 990, Part<br>Part II can be dupl                 | V, line 21, for any  | recipient that red               | ceived more thar            | n \$5,000. Check                      | this box if no on   |   | red more than \$5,000.         |  |  |
| 1 (a) Name and address of organization<br>or government                              |  | (c) IRC section<br>if applicable | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash assistance | (f) Method of valuation<br>(book, FMV, appraisal,<br>other) | <b>(g)</b> Description non-cash assista | of (h) Purpose of grant        |  |  |
| (1) Sch I, Stmt 1  |  |                                  |                             |                                       |   |   |                                |  |  |
| (2)  |  |                                  |                             |                                       |   |   |                                |  |  |
| (3)  |  |                                  |                             |                                       |   |   |                                |  |  |
| (4)  |  |                                  |                             |                                       |   |   |                                |  |  |
| (5)  |  |                                  |                             |                                       |   |   |                                |  |  |
| (6)  |  |                                  |                             |                                       |   |   |                                |  |  |
| (7)  |  |                                  |                             |                                       |   |   |                                |  |  |
| (8)  |  |                                  |                             |                                       |   |   |                                |  |  |
| (9)  |  |                                  |                             |                                       |   |   |                                |  |  |
| (10)   |  |                                  |                             |                                       |   |   |                                |  |  |
| (11)   |  |                                  |                             |                                       |   |   |                                |  |  |
| (12)   |  |                                  |                             |                                       |   |   |                                |  |  |
| <ul><li>2 Enter total number of sect</li><li>3 Enter total number of other</li></ul> |  |                                  |                             |                                       | · · · · · · ·   | · · · · · · · ·                         | · · · ▶ <u>8</u><br>· · · ▶ 3  |  |  |

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

Schedule I (Form 990) (2011)

| Part III    | Grants and Other Assistance to Inc<br>Part III can be duplicated if additiona                         |                          |                          | nplete if the organiz             | ation answered "Yes" to                                  | Form 990, Part IV, line 22.            |
|-------------|---|--------------------------|--------------------------|-----------------------------------|--|--|
|             | (a) Type of grant or assistance   | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book,<br>FMV, appraisal, other) | (f) Description of non-cash assistance |
| 1           |   |                          |                          |                                   |  |  |
| 2           |   |                          |                          |                                   |  |  |
| 3           |   |                          |                          |                                   |  |  |
| 4           |   |                          |                          |                                   |  |  |
| 5           |   |                          |                          |                                   |  |  |
| 6           |   |                          |                          |                                   |  |  |
| 7           |   |                          |                          |                                   |  |  |
| Part IV     | Supplemental Information. Comple  | te this part to pro      | ovide the informatic     | on required in Part I             | , line 2, and any other add                              | ditional information.                  |
|             | I, Part I, Line 2 - Schedule I, Part I, Line 2 - The<br>I work plan is developed and then approved by |                          |                          |                                   |  |  |
| responsib   | ility for these funds. These funds are passed t included in the work plan. Proposals are acce         | hrough the USGS D        | ept. of Treasury and a   | re treated as federal fo          | r reporting purposes. These a                            | wards include grants and service       |
| plan need   | s. These proposals are required to meet the re  | porting requiremen       | ts for sub recipients a  | s stated in A-133 are th          | en sent to our Science & Tecl                            | hnical Committee for peer review       |
| -           | oval. If approved they then go to the Board cha   |                          |                          |                                   |  | -                                      |
|             | expectations are included in the award docum  |                          |                          |                                   |  |  |
| stated in A | -   |                          |                          |                                   |  |  |
|             |   |                          |                          |                                   |  |  |
|             |   |                          |                          |                                   |  |  |
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|             |   |                          |                          |                                   |  |  |
|             |   |                          |                          |                                   |  |  |

# Schedule I, Part IV, Statement 1 Form: Schedule I Page: 1 Line Number: Part II

|                     |   | Amount of cash grant | Amount of non-cash assistance |
|---------------------|---|----------------------|-------------------------------|
| Name and address    | AXIOM Consulting and Design                     | 5,554                | C                             |
|                     | 3420 Robin Street                               |                      |                               |
|                     | Anchorage, AK 99504                             |                      |                               |
| EIN                 | 92-8078209                                      |                      |                               |
| IRC code section    |   |                      |                               |
| Method of valuation |   |                      |                               |
| Description of non- | 0   |                      |                               |
| cash assistance     | Data Managament                                 |                      |                               |
| Purpose of grant    | Data Management                                 |                      |                               |
| Name and address    | USDA Natural Resources Conservation Service     | 20,000               | C                             |
|                     | 8510 L Street STE 270                           |                      |                               |
|                     | Anchorage, AK 99518                             |                      |                               |
| EIN                 | 72-0564834                                      |                      |                               |
| IRC code section    | 0   |                      |                               |
| Method of valuation |   |                      |                               |
| Description of non- | 0   |                      |                               |
| cash assistance     | CNOTEL Met Cretice Meintenenes                  |                      |                               |
| Purpose of grant    | SNOTEL Met Station Maintenance                  |                      |                               |
| Name and address    | Environmental Research for Descision            | 64,428               | C                             |
|                     | PO Box 30601                                    |                      |                               |
|                     | Seattle, WA 98113                               |                      |                               |
| EIN                 | 27-1399189                                      |                      |                               |
| IRC code section    | 0   |                      |                               |
| Method of valuation |   |                      |                               |
| Description of non- | 0   |                      |                               |
| cash assistance     | Lana Man  |                      |                               |
| Purpose of grant    | Larva Map                                       |                      |                               |
| Name and address    | GenWest   | 29,415               | C                             |
|                     | PO BOX 397                                      |                      |                               |
|                     | Edmonds, WA 98020                               |                      |                               |
| EIN                 | 91-1336969                                      |                      |                               |
| IRC code section    | 0   |                      |                               |
| Method of valuation |   |                      |                               |
| Description of non- | 0   |                      |                               |
| cash assistance     |   |                      |                               |
| Purpose of grant    | Arctic ERMA                                     |                      |                               |
| Name and address    | University of Alaska Fairbanks                  | 57,129               | C                             |
|                     | 109 Administrative Services Center              |                      |                               |
|                     | Fairbanks, AK 99775                             |                      |                               |
| EIN                 | 92-6000147                                      |                      |                               |
| IRC code section    | 0   |                      |                               |
| Method of valuation |   |                      |                               |
| Description of non- | 0   |                      |                               |
| cash assistance     |   |                      |                               |
| Purpose of grant    | Fellowship - Bluhm Grad Research Fellowship -   |                      |                               |
|                     | Ravelo Grad Research Fellowship - Springer Grad |                      |                               |
|                     | Research  |                      |                               |
| Name and address    | North Pacific Research Board                    | 99,629               | C                             |
|                     | C O Alaska Sealife Center                       |                      |                               |
|                     | PO Box 1329                                     |                      |                               |
|                     |   |                      |                               |
|                     | Seward, AK 99664-1329<br>92-0132479             |                      |                               |

| Schedule I, Part IV, | Statement 1   | PRINCE WILLIAM SOUND SCIENCE & TECHNOLOGY INSTITUTE |
|----------------------|---|---|
| IRC code section     | 0   |   |
| Method of valuation  | 0   |   |
| Description of non-  | 0   |   |
| cash assistance      |   |   |
| Purpose of grant     | NPRB Project 1225 - Improvements to bathymetric       |   |
|                      | models  |   |
| Name and address     | Alaska Ocean Observing Network                        | 24,800 0  |
|                      | C O Alaska SeaLife Center                             |   |
|                      | PO Box 1329   |   |
|                      | Seward, AK 99664                                      |   |
| EIN                  | 92-0132479  |   |
| IRC code section     | 0   |   |
| Method of valuation  | 0   |   |
| Description of non-  | 0   |   |
| cash assistance      |   |   |
| Purpose of grant     | Sound Predictions Model Validation Study              |   |
| Name and address     | Woods Hole Ocenographic Institution                   | 69,787 0  |
|                      | MS 39   |   |
|                      | Woods Hole, MA 02543                                  |   |
| EIN                  | 04-2105850  |   |
| IRC code section     | 0   |   |
| Method of valuation  | 0   |   |
| Description of non-  | 0   |   |
| cash assistance      |   |   |
| Purpose of grant     | DAMOS - Detection and Mapping of Oil Spills under     |   |
|                      | Sea Ice   |   |
| Name and address     | The Regents of the University of California Riverside | 12,948 0  |
|                      | 200 University Office Bldg                            |   |
|                      | Riverside, CA 92521-0217                              |   |
| EIN                  | 95-6006142  |   |
| IRC code section     | 0   |   |
| Method of valuation  | 0   |   |
| Description of non-  | 0   |   |
| cash assistance      |   |   |
| Purpose of grant     | Graduate Fellowship - Saum                            |   |
| Name and address     | US Army RDC CRREL                                     | 40,000 0  |
|                      | 72 Lyme Rd  |   |
|                      | Hanover, NH 03775-1290                                |   |
| EIN                  | 60-3646410  |   |
| IRC code section     | 0   |   |
| Method of valuation  | 0   |   |
| Description of non-  | 0   |   |
| cash assistance      |   |   |
| Purpose of grant     | Test Instruments for Detection of Oil Spills          |   |
| <b>-</b>             | · · · · · · · · · · · · · · · · · · ·                 |   |

### SCHEDULE L (Form 990 or 990-EZ)

# **Transactions With Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Employer identification number

92-0129853

| Department of the Treasury<br>Internal Revenue Service |
|--|
| Name of the organization                               |

Part I

# **PRINCE WILLIAM SOUND SCIENCE & TECHNOLOGY INSTITUTE**

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

| 1   | (a) Name of disgualified person                          | (b) Description of transaction                      | (c) Corrected |    |
|-----|--|---|---------------|----|
| •   | (a) Name of disquamed person                             |   | Yes           | No |
| (1) |  |   |               |    |
| (2) |  |   |               |    |
| (3) |  |   |               |    |
| (4) |  |   |               |    |
| (5) |  |   |               |    |
| (6) |  |   |               |    |
| 2   | Enter the amount of tax imposed on the organization      | on managers or disqualified persons during the year |               |    |
|     | under section 4958                                       |   |               |    |
| 3   | Enter the amount of tax, if any, on line 2, above, reimb | oursed by the organization                          |               |    |

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

#### Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

| (a) Name of interested person and purpose | <b>(b)</b> Loan<br>the orga | (b) Loan to or from (c) Original<br>the organization? principal amount |  | <b>(d)</b> Balance due | (e) In default? |    | (f) Approved<br>by board or<br>committee? |    | (g) Written agreement? |    |
|---|-----------------------------|--|--|------------------------|-----------------|----|---|----|------------------------|----|
|   | То                          | From   |  |                        | Yes             | No | Yes                                       | No | Yes                    | No |
| (1)                                       |                             |  |  |                        |                 |    |   |    |                        |    |
| (2)                                       |                             |  |  |                        |                 |    |   |    |                        |    |
| (2)<br>(3)                                |                             |  |  |                        |                 |    |   |    |                        |    |
| (4)                                       |                             |  |  |                        |                 |    |   |    |                        |    |
| (5)                                       |                             |  |  |                        |                 |    |   |    |                        |    |
| (6)                                       |                             |  |  |                        |                 |    |   |    |                        |    |
| (7)                                       |                             |  |  |                        |                 |    |   |    |                        |    |
| (8)                                       |                             |  |  |                        |                 |    |   |    |                        |    |
| (9)                                       |                             |  |  |                        |                 |    |   |    |                        |    |
| 10)                                       |                             |  |  |                        |                 |    |   |    |                        |    |
| otal                                      |                             |  |  |                        |                 |    |   |    |                        |    |

Part III

# Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount and type of assistance |
|-------------------------------|---|-----------------------------------|
| (1)                           |   |                                   |
| (2)                           |   |                                   |
| (3)                           |   |                                   |
| (4)                           |   |                                   |
| (5)                           |   |                                   |
| (6)                           |   |                                   |
| (7)                           |   |                                   |
| (8)                           |   |                                   |
| (9)                           |   |                                   |
| (10)                          |   |                                   |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50056A Schedule L (Form 990 or 990-EZ) 2011



# Part IVBusiness Transactions Involving Interested Persons.<br/>Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

|          | (a) Name of interested person                                | (b) Relationship between<br>interested person and the<br>organization | (c) Amount of transaction | (d) Description of transaction      |     | aring of<br>zation's<br>nues? |
|----------|--|---|---------------------------|-------------------------------------|-----|-------------------------------|
|          |  |   |                           |                                     | Yes | No                            |
| (1) Eric | Knudsen  | Board Director  | 10,325                    | Contract to monitor ADF&G Hatche    |     | ~                             |
| (2)      |  |   |                           |                                     |     |                               |
| (3)      |  |   |                           |                                     |     |                               |
| (4)      |  |   |                           |                                     |     |                               |
| (5)      |  |   |                           |                                     |     |                               |
| (6)      |  |   |                           |                                     |     |                               |
| (7)      |  |   |                           |                                     |     |                               |
| (8)      |  |   |                           |                                     |     |                               |
| (9)      |  |   |                           |                                     |     |                               |
| (10)     |  |   |                           |                                     |     |                               |
| Part V   | Supplemental Information<br>Complete this part to provide ad | ditional information for res  | sponses to questior       | ns on Schedule L (see instructions) | ).  | <u>.</u>                      |

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# SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047 2011

**Open To Public** 

Inspection

Complete if the organizations answered "Yes" on Form

990, Part IV, lines 29 or 30.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

#### PRINCE WILLIAM SOUND SCIENCE & TECHNOLOGY INSTITUTE and a set

Employer identification number

92-0129853

| Check if<br>applicable         Number of contributions or<br>items contributed         Noncease contribution<br>amounts reported<br>from 990, Part VIII, line 1g         Method of detern<br>noncesh contribution           1         Art - Historical treasures   | Part | Types of Property                    |              |                              |                             |             |               |    |
|--|------|--------------------------------------|--------------|------------------------------|-----------------------------|-------------|---------------|----|
| 2       Art-Historical treasures   |      |                                      | Check if     | Number of contributions or   | amounts reported on         |             | of determinir |    |
| 3       Art-Fractional interests   | 1    | Art—Works of art                     |              |                              |                             |             |               |    |
| 4       Books and publications   | 2    | Art-Historical treasures             |              |                              |                             |             |               |    |
| 5       Clothing and household<br>goods  | 3    | Art-Fractional interests             |              |                              |                             |             |               |    |
| goods  | 4    | Books and publications               |              |                              |                             |             |               |    |
| 7 Boats and planes   8 Intellectual property   9 Securities – Closely held stock   10 Securities – Closely held stock   11 Securities – Pathnership, LLO,<br>or trust interests   12 Securities – Miscellaneous   13 Qualified conservation<br>contribution – Historic<br>structures   14 Qualified conservation<br>contribution – Historic<br>structures   15 Real estate – Commercial   16 Real estate – Commercial   17 Real estate – Commercial   18 Collectibles   19 Food inventory   20 Drugs and medical supplies   21 Taxidermy   22 Historical artifacts   23 Scientific specimens   24 Archeological artifacts   25 Other ► (   26 Other ► (   27 Other ► (   28 Number of Forms 8283 received by the organization during the tax year for contributions for<br>which the organization completed Form 8283, Part IV, Donee Acknowledgement   21 Taxiderny   23 During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that<br>it must hold for at least three years from the date of the initial contribution, and which is not required to be<br>used for axempt purposes for the entire holding period?   30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that<br>it must hold for at least three years from the date of the initial contribution, and which is not required to be<br>used | 5    |                                      |              |                              |                             |             |               |    |
| 8       Intellectual property          9       Securities – Publicly traded          10       Securities – Parhership, LLC, or trust interests          11       Securities – Miscellaneous          12       Securities – Miscellaneous          13       Qualified conservation contribution – Historic structures          14       Qualified conservation contribution – Other          15       Real estate – Commercial          16       Real estate – Commercial          17       Real estate – Commercial          18       Collectibles          19       Food inventory          20       Drugs and medical supplies          21       Taxidermy          22       Historical artifacts          23       Scientific specimens          24       Archeological artifacts          25       Other ▶ ()           26       Other ▶ ()           29       Number of Forms 8283 received by the organization during the tax year for contributions for which the organization comp   | 6    | Cars and other vehicles              |              |                              |                             |             |               |    |
| 9       Securities – Publicly traded   | 7    | Boats and planes                     |              |                              |                             |             |               |    |
| 10       Securities – Closely held stock .         11       Securities – Partnership, LLC, or trust interests  | 8    | Intellectual property                |              |                              |                             |             |               |    |
| 11       Securities – Partnership, LLC, or trust interests   | 9    | Securities-Publicly traded           |              |                              |                             |             |               |    |
| or trust interests   | 10   | Securities-Closely held stock .      |              |                              |                             |             |               |    |
| 13       Qualified conservation<br>contribution - Historic<br>structures   | 11   | • • • •                              |              |                              |                             |             |               |    |
| contribution - Historic<br>structures  | 12   | Securities-Miscellaneous             |              |                              |                             |             |               |    |
| contribution—Other          15       Real estate—Residential          16       Real estate—Commercial          17       Real estate—Other          18       Collectibles          19       Food inventory          20       Drugs and medical supplies          21       Taxidermy          23       Scientific specimens          24       Archeological artifacts          25       Other ▶ (          26       Other ▶ (          27       Other ▶ (          28       Other ▶ (          29           30a       During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?          30a       During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?          30a       During   | 13   | contribution-Historic                |              |                              |                             |             |               |    |
| 16       Real estate - Commercial       ✓       1       30,250       FMV         17       Real estate - Other              18       Collectibles               19       Food inventory               20       Drugs and medical supplies              21       Taxidermy               22       Historical artifacts               23       Scientific specimens               24       Archeological artifacts  | 14   |                                      |              |                              |                             |             |               |    |
| 17 Real estate – Other   18 Collectibles   | 15   | Real estate-Residential              |              |                              |                             |             |               |    |
| 18       Collectibles  | 16   |                                      | ~            | 1                            | 30,250                      | FMV         |               |    |
| 19       Food inventory          20       Drugs and medical supplies          21       Taxidermy          22       Historical artifacts          23       Scientific specimens          24       Archeological artifacts          25       Other ▶ (          26       Other ▶ (          27       Other ▶ (          28       Other ▶ (          29       Vinter ▶ (          29       Vinter ▶ (          30a       During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?          30a       If "Yes," describe the arrangement in Part II.          31       Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?          31a       Joes the organization have a gift acceptance policy that requires the review of any non-standard contributions?          31       Joes the organization have a gift acceptance policy that requires the review of any non-standard contributions? <td< th=""><td>17</td><td>Real estate-Other</td><td></td><td></td><td></td><td></td><td></td><td></td></td<>  | 17   | Real estate-Other                    |              |                              |                             |             |               |    |
| 20       Drugs and medical supplies  | 18   | Collectibles                         |              |                              |                             |             |               |    |
| 21       Taxidermy   | 19   | Food inventory                       |              |                              |                             |             |               |    |
| <ul> <li>Historical artifacts</li></ul>  | 20   | Drugs and medical supplies           |              |                              |                             |             |               |    |
| 23       Scientific specimens          24       Archeological artifacts          25       Other ▶ ()          26       Other ▶ ()          27       Other ▶ ()          28       Other ▶ ()          29       Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement          29       Number of Forms 4283 received by the organization any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?          30a       b If "Yes," describe the arrangement in Part II.          31       Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?          32a       Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?          31       32a         Joes the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?          31       32a         Joes the organization hire or use third parties or related organizations to solicit, process, or sell n  | 21   | •                                    |              |                              |                             |             |               |    |
| 24       Archeological artifacts          25       Other ▶ ()          26       Other ▶ ()          27       Other ▶ ()          28       Other ▶ ()          29       Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement          29       30a       During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?          b       If "Yes," describe the arrangement in Part II.       30a         31       Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?          32a       Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?          b       If "Yes," describe in Part II.       32a         33a       If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,  | 22   |                                      |              |                              |                             |             |               |    |
| 25       Other ▶ ()  | 23   |                                      |              |                              |                             |             |               |    |
| <ul> <li>26 Other ▶ ()</li> <li>27 Other ▶ ()</li> <li>28 Other ▶ ()</li> <li>29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement</li></ul>  | 24   |                                      |              |                              |                             |             |               |    |
| <ul> <li>27 Other ▶ ()</li> <li>28 Other ▶ ()</li> <li>29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement</li></ul>   | 25   | Other ► ()                           |              |                              |                             |             |               |    |
| <ul> <li>28 Other ► ( )</li> <li>29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement</li></ul>   |      | ·,                                   |              |                              |                             |             |               |    |
| <ul> <li>29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement</li></ul>   |      | ·,                                   |              |                              |                             |             |               |    |
| <ul> <li>which the organization completed Form 8283, Part IV, Donee Acknowledgement</li></ul>  |      |                                      | L            |                              |                             |             |               |    |
| <ul> <li>30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?</li></ul>   | 29   |                                      |              |                              |                             | 29          |               | 0  |
| <ul> <li>it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?</li> <li>b If "Yes," describe the arrangement in Part II.</li> <li>31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?</li> <li>32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?</li> <li>b If "Yes," describe in Part II.</li> <li>33 If "Yes," describe in Part II.</li> <li>34 If "Yes," describe in Part II.</li> <li>35 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,</li> </ul>  |      |                                      |              |                              |                             |             | Yes           | No |
| <ul> <li>b If "Yes," describe the arrangement in Part II.</li> <li>31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?</li> <li>32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?</li> <li>b If "Yes," describe in Part II.</li> <li>33 If "Yes," describe in Part II.</li> <li>33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,</li> </ul>   | 30a  | it must hold for at least three year | ars from the | date of the initial contribu | ution, and which is not req | uired to be | 00-           |    |
| <ul> <li>31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?</li> <li>32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?</li> <li>b If "Yes," describe in Part II.</li> <li>33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,</li> </ul>  | L    |                                      |              |                              |                             |             | 30a           | ~  |
| contributions?       32a         b       If "Yes," describe in Part II.         33       If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,  |      | Does the organization have a         | gift accep   |                              | es the review of any no     | n-standard  | 31            | ~  |
| <ul> <li>b If "Yes," describe in Part II.</li> <li>33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,</li> </ul>  | 32a  | · · · · · ·                          | -            | -                            |                             | ell noncash | 32a           | ~  |
|  |      | If the organization did not report a | n amount in  | column (c) for a type of pro | operty for which column (a) | is checked, |               |    |

| Part II    | <b>Supplemental Information.</b> Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. |
|------------|--|
| Schedule I | M, Part I, Line 16 - Posted the FMV of In-kind donations for use of current facility. Facility was improved by leaseholder and   |
|            | over a 20 year period. Facility is still in use and no longer amortized so much be recorded for FMV of the contribution.   |
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Schedule M (Form 990) (2011)

| SCHEDULE 0  | Supplemental Information to Form 000 or 0  | 00 57                | OMB No. 1545-0047                     |  |  |  |
|---|--|----------------------|---------------------------------------|--|--|--|
| (Form 990 or 990-EZ)  | Supplemental Information to Form 990 or 990-EZ   |                      | ୭ଲ4 4                                 |  |  |  |
|   | Complete to provide information for responses to specific questior<br>Form 990 or 990-EZ or to provide any additional information. | is on                |                                       |  |  |  |
| Department of the Treasury<br>Internal Revenue Service  | ► Attach to Form 990 or 990-EZ.  |                      | Open to Public<br>Inspection          |  |  |  |
| Name of the organization  | Employer identific   |                      |                                       |  |  |  |
| PRINCE WILLIAM SOUR   | 2-0129853  |                      |                                       |  |  |  |
| Form 990, Part VI, Secti  | on B, Line 11b - Form 990, Part VI, Section B, Line 11b - The 990 is prepared by   | the Finance Dire     | ctor and then                         |  |  |  |
| reviewed and signed by  | the President. The 990 is sent electronically to all members of the Board of Di  | rectors prior to it  | s submittal to the                    |  |  |  |
| IRS. It is also presented   | to the Board at the next regular meeting following submittal. The 990 is also p  | osted on the PW      | SSC web site,                         |  |  |  |
| www.pwssc.org along v   | vith the organizations audited Financial Statements.   |                      |                                       |  |  |  |
|   |  |                      |                                       |  |  |  |
| Form 990, Part VI, Section B, Line 12c - Form 990, Part VI, Section B, Line 12c - PWSSC does have a conflict of interest policy. A Conflict |  |                      |                                       |  |  |  |
|   | Form is given to the Board of Directors annually and addresses the questions i   |                      |                                       |  |  |  |
| then signed and returned  | ed for our files.  |                      |                                       |  |  |  |
|   |  |                      |                                       |  |  |  |
|   |  |                      |                                       |  |  |  |
| Form 990, Part VI, Secti  | on B, Line 15 - Form 990, Part VI, Section B, Line 15 - The PWSSC President do   | bes an annual self   | evaluation which                      |  |  |  |
| is then submitted to the  | Board of Directors. The Board meets with the President in open and closed so   | essions and then     | completes their                       |  |  |  |
| evaluation of the Presid  | ent. The evaluation is discussed and any comments or compensation change   | are then finalized   | with a letter signed                  |  |  |  |
| by the President and th   | e Chairman of the Board. Key Employee/Staff are requested to do a self evalua  | tion annually with   | n a list of goals for                 |  |  |  |
| the coming year, this is  | submitted to their Supervisor/or President. The Supervisor/or President then   | completes an emp     | oloyee evaluation                     |  |  |  |
| and meets with the emp  | loyee to discuss the evaluation. The Employee and the Supervisor/or Presider   | nt then sign the ev  | aluation. A letter                    |  |  |  |
|   | nges is then given to the employee and the Finance Dept. Because of his profe  |                      | · · · · · · · · · · · · · · · · · · · |  |  |  |
| entered into a Professio  | onal Contract with one of our Board Directors to Monitor and Manage the ADF8   | G Hatchery-Wild      | project.                              |  |  |  |
|   |  |                      |                                       |  |  |  |
| Form 990, Part VI, Secti  | on C, Line 19 - Form 990, Part VI, Section C, Line 19 - The documents describe   | d in this line are a | vailable upon                         |  |  |  |
| request at the PWSS&T   | I (PWSSC) offices at P.O. Box 705, 300 Breakwater Ave, Cordova, Alaska 99574   | I. These documer     | its can also be                       |  |  |  |
| found on our web site a<br>Statistics at the Urban I  | t www.pwssc.org. Also a website search will show our 990 through this web s<br>nstitute.   | ite the National Co  | enter for Charitable                  |  |  |  |
|   |  |                      |                                       |  |  |  |

| Form 990, Part XI, Line 5 - Gaming Expenses not included in Part X - 3,080 |  |  |  |  |
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# **Reasonable Cause Explanations**

### Explanation

Due to Family issues and not managing my work load appropriately I failed to complete the Form 990 by the 1st automatic extension deadline of May 15 2013. I applied for a 2nde extension through August 15 2013 with the reason stated above. I continue to monitor and adjust my audited Financial Statements to be able to identify and separate the information needed for the timely completion of the Form 990.

# **Activity Or Mission Description**

### Description

productivity and the sustainable use of renewable resources; and, we want to educate and inform youth and the public about the critical interdependence of the biology and regional economies of Alaska.

# **Other Program Services Accomplishments**

| Activity<br>Code | Description  | Expense | Grants | Revenue |
|------------------|--|---------|--------|---------|
|                  | PWSSC Community Education Program - This is a multifaceted program that includes<br>The Discovery Room, a hands-on science based curriculum offered during the school<br>year to the local elementary school for grades pre-K to 6th grade. Community Education<br>- year-round series of lectures by resident and visiting researchers doing work within<br>Cordova, PWS and the Gulf of Alaska. This program has been expanded to Valdez and<br>other areas of Alaska in conjunction with the Prince William Sound Community College.<br>Summer Science Camp - a series of day and week long camps focusing on from the<br>Forest to the Sea and oceanography. National Ocean Science Bowl - Assisting local<br>High School students to participate in the state and nationwide annual science<br>competition. | 68,544  | 0      | 68,544  |
|                  | Remaining Program Service Projects include government funded projects through the ADF&G, EPA, NFWF, NMFS, NPS, and NOAA pass through funds from the North Pacific Research Board (NPRB) and The Alaska Ocean Observing System (AOOS). Remaining funds also include funds from private entities, The Murdock Fdn, the Paul Allen Fdn and the Pacific Ocean Shelf Tracking (POST) system.  | 445,195 | 0      | 734,994 |
| Total:           |  | 513,739 | 0      | 803,538 |