Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

OMB No. 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

ΑΙ	For the	2011 calendar year, or tax year beginning $$ OCT 1 , $$ 2011 $$ and ending	SEP 3	0, 2012	
	Check if applicable:		D Em	ployer identific	cation number
ć					
	Address change	CLEARWATER MARINE AQUARIUM, INC.			
	Name change	Doing Business As		59-2	086737
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Tele	ephone number	•
	Termin- ated	249 WINDWARD PASSAGE			441-1790
	Amende	d City or town, state or country, and ZIP + 4	G Gros	s receipts \$	20,538,839.
	Applica- tion	CLEARWATER, FL 33767-2244	H(a) Is	this a group re	eturn
	pending	F Name and address of principal officer:DAVID YATES		or affiliates?	Yes X No
		249 WINDWARD PASSAGE, CLEARWATER, FL 3376	7 H(b) Ar	re all affiliates inc	luded? Yes No
$\overline{\Gamma}$	Tax-exer	mpt status: X 501(c)(3) 501(c) () ((insert no.) 4947(a)(1) or	527 If	"No," attach a	list. (see instructions)
J	Website	WWW.SEEWINTER.COM	H(c) G	roup exemption	n number 🕨
K	orm of c	rganization: X Corporation Trust Association Other L			State of legal domicile: FL
Pa	art I	Summary		•	-
_	1 B	riefly describe the organization's mission or most significant activities: CLEARWAT	ER MAR	INE AQU	ARIUM'S
ŭ	("CMA") MISSION IS TO PRESERVE OUR MARINE LI	FE AND	ENVIRO	NMENT WHILE
rna	2 0	heck this box 🕨 🔲 if the organization discontinued its operations or disposed of r	more than 25	5% of its net as	sets.
ove		lumber of voting members of the governing body (Part VI, line 1a)			19
Ğ		lumber of independent voting members of the governing body (Part VI, line 1b)			19
Se		otal number of individuals employed in calendar year 2011 (Part V, line 2a)			133
Viţi.		otal number of volunteers (estimate if necessary)			1000
Activities & Governance		otal unrelated business revenue from Part VIII, column (C), line 12			621,413.
٩		let unrelated business taxable income from Form 990-T, line 34			9,051.
				r Year	Current Year
Ф	8 0	Contributions and grants (Part VIII, line 1h)	2,9	85,101.	897,279.
ğ		rogram service revenue (Part VIII, line 2g)	3,3	20,569.	12,673,458.
Revenue		ovestment income (Part VIII, column (A), lines 3, 4, and 7d)		89,463.	-217,638.
Œ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		56,388.	4,159,827.
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,1	51,521.	17,512,926.
		irants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	1	enefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	1	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,9	52,393.	3,743,944.
Expenses	16a ₽	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ф	ЬΤ	otal fundraising expenses (Part IX, column (D), line 25) 74,936.			
ω	17 C	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,5	37,576.	5,935,607.
	18 T	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		89,969.	9,679,551.
	19 F	levenue less expenses. Subtract line 18 from line 12	2,6	61,552.	7,833,375.
or				of Current Year	End of Year
sets	20 T	otal assets (Part X, line 16)	12,3	05,732.	17,984,838.
t As	21 T	otal liabilities (Part X, line 26)	3,7	87,505.	1,329,614.
Net Assets or Fund Balances	22 N	let assets or fund balances. Subtract line 21 from line 20	8,5	18,227.	16,655,224.
Pa	art II	Signature Block			
Und	ler penalt	ies of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, 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 prep	oarer has any l	knowledge.	
Sig	n	Signature of officer		Date	
Her	e	DAVID YATES, CEO			
		Type or print name and title			
	I .	Print/Type preparer's name Preparer's signature	Date	Check	PTIN
Pai		CARR, RIGGS & INGRAM, LLC		self-employe	
		Firm's name CARR, RIGGS, & INGRAM, LLC		Firm's EIN	72-1396621
Use	Only	Firm's address 2111 DREW STREET			
		CLEARWATER, FL 33765-3215		Phone no. 7	27-446-0504
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No

Other program services (Describe in Schedule O.)

including grants of \$) (Revenue \$

Total program service expenses

8,506,804.

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	<u> </u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			~
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8		х
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? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		7.7	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	441.		Х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ч	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	110		
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	, 1 , , ,	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			Х
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
15	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2011) CLEARWATER MARINE Part IV Checklist of Required Schedules (continued)

			Yes	No
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	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		Х
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 with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	37
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		Х	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			37
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		_v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2011) CLEARWATER MARINE AQUARIUM, INC Part V Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 12 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	s No
1aEnter the number reported in Box 3 of Form 1096. Enter -0- if not applicable1a12bEnter the number of Forms W-2G included in line 1a. Enter -0- if not applicable1b0	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	
(gambling) winnings to prize winners?	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	
filed for the calendar year ending with or within the year covered by this return	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	
financial account in a foreign country (such as a bank account, securities account, or other financial account)?4a	X
b If "Yes," enter the name of the foreign country: ▶	
See instructions for filing requirements for 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	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b	X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	l
any contributions that were not tax deductible?	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	
were not tax deductible?	
7 Organizations that may receive deductible contributions under section 170(c).	
a 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	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	x
to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year 7c	+*
	Х
f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 76 f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 76	X
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 X	
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 organization, have excess business holdings at any time during the year?	
9 Sponsoring organizations maintaining donor advised funds.	
a Did the organization make any taxable distributions under section 4966?	
b Did the organization make a distribution to a donor, donor advisor, or related person? 9b	
10 Section 501(c)(7) organizations. Enter:	
a Initiation fees and capital contributions included on Part VIII, line 12	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	
11 Section 501(c)(12) organizations. Enter:	
a Gross income from members or shareholders	
b Gross income from other sources (Do not net amounts due or paid to other sources against	
amounts due or received from them.)	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	
a Is the organization licensed to issue qualified health plans in more than one state?	
Note. See the instructions for additional information the organization must report on Schedule O.	
b Enter the amount of reserves the organization is required to maintain by the states in which the	
organization is licensed to issue qualified health plans	
c Enter the amount of reserves on hand 13c 13c	X
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a Lt "Voe " has it filed a Form 700 to report these payments? If "No " provide an explanation in Schodulo O.	+^
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b Form 99) (2011)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	740 7	СОРОП	30
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year la 19			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	, , , , , , , , , , , , , , , , , , , ,	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		٦,
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401-		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	22	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х	
ıza b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
C	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $ ightharpoonup$			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 for a final fina	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
00	statements available to the public during the tax year.	.: .		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza $DAVID\ YATES - (727)441-1790$	tion:	_	

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WINDWARD PASSAGE,

Form **990** (2011)

33767-2244

FL

CLEARWATER,

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	(do	not c	Pos heck	itior more	than	one	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	stee or director	Institutional trustee				stee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JOHN DRAHEIM	1 00	.,		7.7						
CHAIRMAN (A) GARLEN DETERMINE	1.00	Х		Х				0.	0.	0.
(2) CARLEN PETERSEN VICE CHAIR	1.00	x		х				0.	0.	0.
(3) ROSEMARY LONGNECKER	1.00						\vdash		0.	
SECRETARY	1.00	X		Х				0.	0.	0.
(4) SUE CLARK	1:00	123						•	•	
DIRECTOR	1.00	x						0.	0.	0.
(5) STEPHEN FOWLER										
DIRECTOR	1.00	x						0.	0.	0.
(6) CALVIN HARRIS										
DIRECTOR	1.00	Х						0.	0.	0.
(7) NATHAN HIGHTOWER										
DIRECTOR	1.00	Х						0.	0.	0.
(8) JENNIFER HOLLOWAY										
DIRECTOR	1.00	Х						0.	0.	0.
(9) STEPHEN KISNER								_	_	_
DIRECTOR	1.00	Х						0.	0.	0.
(10) ROWLAND MILAM		l								
DIRECTOR	1.00	Х						0.	0.	0.
(11) MELISSA L. SEIXAS	1 00								_	0
DIRECTOR	1.00	Х						0.	0.	0.
(12) MICHAEL SOSSLAU DIRECTOR	1.00	x						0.	0.	0.
(13) SANDY STROYNE	1.00	^						0.	0.	0.
DIRECTOR	1.00	X						0.	0.	0.
(14) THOMAS R. ORR	1.00							0.	0.	
PASTCHAIR	1.00	x						0.	0.	0.
(15) FRANK CHIVAS	1100								•	
AT LARGE DIRECTOR	1.00	X						0.	0.	0.
(16) ANDY BURWELL		T				t				
TREASURER	1.00	Х		Х				0.	0.	0.
(17) BRIAN J AUNGST JR.										
DIRECTOR	1.00	Х						0.	0.	0.

132007 01-23-12

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Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	oyee	s, a	nd l	High	nest	Compensated Employ	ees (continued)				
(A) Name and title	(B) Average hours per week	(do box offi		Pos heck ss pe	c) ition more erson) than is bot	one th an	(D) Reportable compensation from	(E) Reportable compensatio from related			(F) stimate nount other	
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		fr org an	pensa om th anizat d relat anizati	e ion ed
(18) JIM R. SIMONS		T					T						
DIRECTOR	1.00	X						0.		0.			0 .
(19) MILIAM ROWLAND													
AT LARGE DIRECTOR	1.00	X						0.		0.			0 .
(20) FRANK V. HIBBARD													
AT LARGE DIRECTOR	1.00	X						0.		0.			0 .
(21) DAVID YATES													
CEO	40.00			Х				158,210.		0.	1	0,5	55
(22) FRANK DAME													
EVP/COO	40.00			Х				116,200.		0.		5,4	23
(23) BRUCE VEGHTE													
CFO	40.00			Х				11,738.		0.			0 .
1b Sub-total	1	_			_	┢		286,148.		0.	1	5,9	78
c Total from continuation sheets to Part V								0.		0.		- , -	0.
d Total (add lines 1b and 1c)								286,148.		0.	1	5,9	78
2 Total number of individuals (including but i							ho re		0.000 of reportabl				
compensation from the organization												Yes	No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			•	•	•	•	•	highest compensated e	. ,		3		X
4 For any individual listed on line 1a, is the s	um of reportab												
and related organizations greater than \$15	0,000? If "Yes,	," co	mple	ete S	Sche	edul	e J f	for such individual			4	Х	
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion f	rom	any	/ uni	relat	ed organization or indiv	idual for services				
rendered to the organization? If "Yes," con	nplete Schedul	le J t	for su	uch	pers	son				<u></u>	5		Х
Section B. Independent Contractors													
Complete this table for your five highest complete the organization. Report compensation for										pens	ation	from	
(A) Name and business	address	N	ONE	3				(B) Description of s	services	C)) Ompe		n
							\exists						
2 Total number of independent contractors (\$100,000 of compensation from the organ		not li	mite	d to		se li	stec	d above) who received n	nore than				
+										_			

Pa	rt V	/III Statement of Revenue						-
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1	 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ 	1c 1d 1e 1	05,024. 90,000. 02,255.				
Con		h Total. Add lines 1a-1f		>	897,279.			
Program Service Revenue	2	a GUEST ADMISSIONS b MARINE LIFE INCOME c EDUCATION INCOME d PROGRAM REVENUE FROME	B	usiness Code 713110 711300 611600 713110	9825777. 2437981. 273,979. 135,721.	9825777. 2437981. 273,979. 135,721.		
Δ.		f All other program service revenue		_				
	3	g Total. Add lines 2a-2f	s, interest	, and ►	12,673,458.			106,591.
	4 5	Royalties			56,208.			56,208.
	6	a Gross rents b Less: rental expenses c Rental income or (loss)		(ii) Personal				
		d Net rental income or (loss)	·····					
		a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses		(ii) Other 19,745.				
		c Gain or (loss)		-324,229.	-324 229	-324,229.		
Other Revenue	8	d Net gain or (loss) a Gross income from fundraising events including \$ or contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses	(not f a		324,223.	324,223.		
ō		c Net income or (loss) from fundraising e						
	9	 a Gross income from gaming activities. S Part IV, line 19 b Less: direct expenses 	See a b					
	10	 c Net income or (loss) from gaming active a Gross sales of inventory, less returns and allowances b Less: cost of goods sold 	a	6,042,507. 2,681,939.				
		c Net income or (loss) from sales of inve			3360568.			3,360,568.
		Miscellaneous Revenue a GIFT SHOP INCOME b MISCELLANEOUS c ADVERTISING INCOME		usiness Code 713990 900099 511120	613,813. 121,638. 7,600.	121,638.	613,813. 7,600.	
		d All other revenue		J T T T T O	7,000•		7,000.	
		e Total. Add lines 11a-11d			743,051.			
	12	Total revenue. See instructions.			17,512,926.	12,470,867.	621,413.	3,523,367.

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).

	olete columns (B), (C), and (D).				
	Check if Schedule O contains a respon-				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	502,690.		502,690.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,794,219.	2,499,975.	294,244.	
8	Pension plan accruals and contributions (include			,	
	section 401(k) and section 403(b) employer contributions)	32,444.	27,681.	4,612.	151
9	Other employee benefits	122,079.	116,193.	4,637.	1,249
10	Payroll taxes	292,512.	222,931.	67,184.	2,397
11	Fees for services (non-employees):				
а	Management				
b	Legal	28,218.		28,218.	
С	Accounting	42,145.		42,145.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	13,498.		13,498.	
g	Other	926,635.	906,355.	20,219.	61
12	Advertising and promotion	769,962.	744,805.	25,157.	
13	Office expenses	206,921.	195,841.	7,683.	3,397
14	Information technology	138,328.	137,614.		714
15	Royalties	327,248.	327,248.		
16	Occupancy	427,484.	420,195.	7,289.	
17	Travel	44,585.	44,585.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,219.	3,219.		
20	Interest	15,733.	15,733.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	426,178.	420,016.	6,162.	
23	Insurance	191,369.	154,254.	36,243.	872
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	WDTA VARIOUS	1,611,469.	1,611,469.		
b	ANIMAL CARE EXPENSES	397,188.	397,188.		
С	EDUCATION EXPENSES	282,018.	261,502.	20,516.	
d	FUNDRAISING EXPENSE	66,095.			66,095
е	All other expenses	17,314.		17,314.	
25	Total functional expenses. Add lines 1 through 24e	9,679,551.	8,506,804.	1,097,811.	74,936
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 1 128, 250. 3 146, 5 4 Accounts receivable, net 1 19, 022. 4 85, 0 8 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958()(1)), persons described in section 4958()(3)(8), and contributing employees and sponsoring organizations of section 501(e)(9) voluntary employees beneficiary organizations (see instructions) 6 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 1 b. Less: accumulated depreciation 10b 2,139,399. 8,954,658. 10c 13,418,8 11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intrangible assets 15 Other assets. See Part IV, line 11 16 Other assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 21 Escrow or custodial account liabilities not included on lines 17-24). Complete Part X of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 25 Total liabilities, Add lines 17 through 25 26 The fliabilities (including federal income tax, pay	1	Pai	πX	Balance Sheet				
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### Page 1	employees, and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958((f)1), persons described in section 4958((f)3(B), and contributing employees and sponsoring organizations of section 501(c)(8) voluntary employees' beneficiary organizations (see instructions) Notes and loans receivable, net Investments for sale or use Prepaid expenses and deferred charges Less: accumulated depreciation Investments - publicly traded securities Investments - publicly traded securities Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Insulated a seets. Add lines 11 through 15 (must equal line 34) Tax-exempt bond liabilities Tax-exempt bond liabilities Tax-exempt bond liabilities Tax-exempt bond liabilities Total lasses and other payable to unrelated third parties Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D Secured mortagaes and notes payable to unrelated third parties Complete Part IV of Schedule D Secured mortagaes and notes payable to unrelated third parties Complete Part IV of Schedule D Tax-exempt bond liabilities included on lines 17-24). Complete Part X of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part X of Schedule D Tax-exempt bond liabilities included on lines 17-24). Complete Part X of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part X of Schedule D Tax-exempt bond liabilities included on lines 17-24). Complete Part X of Schedule D Payables to current and former officers of the parties of the parties of the parties of the payable to unrelated thir							
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27 Unrestricted net assets 6,241,690. 27 14,085,7 28 Temporarily restricted net assets 343,879. 28 636.8	27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 34 3 , 879 . 28	Ś						
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30 Capital stock or trust principal, or current funds	Paid-in or capital surplus, or land, building, or equipment fund	its	30	•			30	
31 Paid-in or capital surplus, or land, building, or equipment fund	32 Retained earnings, endowment, accumulated income, or other funds 32	SSE						
32 Retained earnings, endowment, accumulated income, or other funds		ř.						
Z 33 Total net assets or fund balances 8 518 227 33 16 655 2	33 Total net assets or fund balances 8,518,227, 33 16,655,22	ž	l	Total net assets or fund balances		8,518,227.	33	16,655,224.
	10 205 720 177 004 02		34	Total liabilities and net assets/fund balances		12,305,732.	34	17,984,838.
10 205 520 15 004 0	I DA Tatal Calcillian and not assate/found belonger		34	i otal liadilities and net assets/fund dalances		14,303,134.	ა4	11,304,030

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI		<u></u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1				26.
2	Total expenses (must equal Part IX, column (A), line 25)	2				51.
3	Revenue less expenses. Subtract line 2 from line 1	3				75.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8			27.
5	Other changes in net assets or fund balances (explain in Schedule O)	5				23.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	16	,65	5,2	25.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII		<u></u>			Ш
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	Were the organization's financial statements audited by an independent accountant?			2 b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		I			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Auc	lit			
	Act and OMB Circular A-133?	-		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired aud	it			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3h		

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CLEARWATER MARINE AQUARIUM, INC. **Employer identification number** 59-2086737

Par	t I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this par	t.) See ins	tructions.				
The o	rgan	ization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	oox.)					
1		A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).				
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3	_	A hospital or	a cooperative hospi	tal service organization	described	in section	170(b)(1)	(A)(iii).					
4 L		A medical res	search organization	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter th	ne hospital	's nam	e,
_		city, and stat	te:										
5		An organizat	ion operated for the	benefit of a college or u	niversity o	wned or op	perated by	a governi	mental uni	t describe	d in		
_		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6 <u> </u>	_	A federal, sta	ate, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).					
7 L		An organizat	ion that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desc	ribed iı	n
_		section 170((b)(1)(A)(vi). (Comple	te Part II.)									
8	_	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 L	X	An organizat	ion that normally rec	eives: (1) more than 33	1/3% of its	support f	rom contri	butions, n	nembershi	p fees, and	d gross red	ceipts 1	from
		activities rela	ited to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2	2) no more	e than 33 1	1/3% of its	support f	rom gross	invest	ment
		income and t	unrelated business t	axable income (less sec	tion 511 ta	ıx) from bu	sinesses a	acquired b	y the orga	nization a	fter June 3	0, 197	5.
_		See section	509(a)(2). (Complete	e Part III.)									
10	_	An organizat	ion organized and or	perated exclusively to te	st for publ	ic safety. S	See sectio	on 509(a)(4	4).				
11 L		An organizat	ion organized and op	perated exclusively for the	ne benefit	of, to perfo	orm the fu	nctions of	, or to carr	y out the p	ourposes c	of one o	or
		more publicly	y supported organiza	ations described in secti	on 509(a)(1) or section	on 509(a)(2	2). See se o	ction 509(a	a)(3). Ched	ck the box	that	
		describes the	e type of supporti <u>ng</u>	organization and compl	ete lines 1	1e through	11h.						
_		a L Type	l b ∟	ا Type II و	р 📖 Тур	e III - Func	tionally in	tegrated		d 📖	Type III - C	Other	
e L		By checking	this box, I certify that	t the organization is not	controlled	d directly o	r indirectly	/ by one o	r more disc	qualified p	ersons oth	er tha	n
		foundation m	nanagers and other t	han one or more publicly	y supporte	ed organiza	tions des	cribed in s	ection 509	9(a)(1) or s	ection 509	(a)(2).	
f		If the organiz	ation received a writ	ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		supporting o	rganization, check th	nis box									Ш
g		-		organization accepted ar			•						
			•	irectly controls, either a	•		•					Yes	No
				upported organization?									<u> </u>
				n described in (i) above?									
		(iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s).								11g(iii)			
h		Provide the f	following information	about the supported or	ganization	(s).							
			İ	(iii) Type of	(; ,) ; , , , , , , , , , , , , , , , ,		(-) Dist.		(vi) ls	tho			
(i) N		of supported	(ii) EIN	organization		organization sted in your		ion in col.	Lorganizátic	on in col.	(vii) Am		f
	orga	anization		(described on lines 1-9		document?		r support?	(i) organiz	ed in the	sup	port	
				above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No			
				(oco mondonono))	163	140	163	140	163	140			
						 		 	 				
Total													
	or F	Paperwork Re	duction Act Notice	, see the Instructions f	or				Schedul	e A (Form	990 or 99	0-EZ)	2011

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

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									
Cale	ndar 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	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3								
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)								
6	Public support. Subtract line 5 from line 4.								
Se	ction B. Total Support			_					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
7	Amounts from line 4								
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources								
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part IV.)								
11	Total support. Add lines 7 through 10								
12	Gross receipts from related activities,	etc. (see instructi	ons)			12			
13	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3)			
_	organization, check this box and stop						<u></u>		
	ction C. Computation of Publ					1 1			
	Public support percentage for 2011 (I					14	%		
	Public support percentage from 2010					15	%		
16a	33 1/3% support test - 2011. If the o	•		•		•			
	stop here. The organization qualifies								
k	33 1/3% support test - 2010. If the c	-							
	and stop here. The organization qual								
17a	10% -facts-and-circumstances test	_							
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization								
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
b	b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or								
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the								
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
18	18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								

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.)

Sec	ction A. Public Support	ciow, picase comp	note i art ii.j						
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
1	Gifts, grants, contributions, and	, ,	Ì	• ,	, ,	, ,			
	membership fees received. (Do not								
	include any "unusual grants.")	1,278,708.	1,122,835.	1,327,676.	3,020,888.	851,929.	7,602,036.		
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	2,113,209.	2,702,752.	2,767,700.	4,291,648.	15,951,795.	27,827,104.		
3	Gross receipts from activities that	, ,	, ,	, ,	, ,	, ,			
	are not an unrelated trade or business under section 513								
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities								
	furnished by a governmental unit to the organization without charge								
6	Total. Add lines 1 through 5	3,391,917.	3,825,587.	4,095,376.	7,312,536.	16,803,724.	35,429,140.		
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.		
t	nother than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.		
	Add lines 7a and 7b						0.		
	Public support (Subtract line 7c from line 6.)						35,429,140.		
	ction B. Total Support								
Cale	endar year (or fiscal year beginning in) 🖊	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
9	Amounts from line 6	3,391,917.	3,825,587.	4,095,376.	7,312,536.	16,803,724.	35,429,140.		
10a	dross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	85,414.	210,979.	477,521.	469,486.	306,120.	1,549,520.		
k	Unrelated business taxable income								
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975								
	Add lines 10a and 10b	85,414.	210,979.	477,521.	469,486.	306,120.	1,549,520.		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	26,075.	32,386.	51,059.	53,219.	38,127.	200,866.		
13	Total support (Add lines 9, 10c, 11, and 12.)	3,503,406.	4,068,952.	4,623,956.	7,835,241.	17,147,971.	37,179,526.		
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,		
	check this box and stop here						<u></u>		
	ction C. Computation of Publi						<u> </u>		
	Public support percentage for 2011 (li					15	95.29 %		
	Public support percentage from 2010					16	92.50 %		
	ction D. Computation of Inves			10 1 (0)		1	4.17 %		
	Investment income percentage for 20			 					
	, ,	g							
198	19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
t	b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and								
	line 18 is not more than 33 1/3%, che			•		•			
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	structions	<u></u> ▶∟∟		