

Return of Organization Exempt From Income Tax

Form 990

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

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning 2015, and ending 20

Form header section containing organization name (MONTEREY BAY AQUARIUM FOUNDATION), EIN (94-2487469), address (886 CANNERY ROW, MONTEREY, CA 93940), and principal officer (JULIE PACKARD).

Part I Summary

Summary table with columns for Activities & Governance, Revenue, Expenses, and Net Assets or Fund Balances. Includes rows for mission statement, membership counts, revenue breakdown, and expenses.

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.

Signature block containing the signature of Cynthia Vernon, COO, dated 11/14/16.

Preparer information section for Rosemarie P. Brown, dated 2016.11.11, representing Grant Thornton LLP.

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2015)

**Part III** Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III  Yes  No

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 31,387,581. including grants of \$ 90,108. ) (Revenue \$ 45,283,466. )  
MARINE LIFE EXHIBITION AND CARE - SEE SCHEDULE O

4b (Code: ) (Expenses \$ 12,193,553. including grants of \$ 136,190. ) (Revenue \$ 0. )  
EDUCATION AND OUTREACH - SEE SCHEDULE O

4c (Code: ) (Expenses \$ 7,275,504. including grants of \$ 171,534. ) (Revenue \$ 287,550. )  
CONSERVATION AND RESEARCH - SEE SCHEDULE O

4d Other program services (Describe in Schedule O.) ATTACHMENT 1  
(Expenses \$ 17,536,991. including grants of \$ 81,230. ) (Revenue \$ 0. )

4e Total program service expenses ▶ 68,393,629.

**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. . . . .	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	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. . . . .		X
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? If "Yes," complete Schedule C, Part II. . . . .	X	
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. . . . .		X
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. . . . .		X
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. . . . .		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. . . . .		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. . . . .		X
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. . . . .	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. . . . .	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 assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. . . . .	X	
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. . . . .		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. . . . .		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. . . . .	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. . . . .	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII. . . . .		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional. . . . .	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. . . . .		X
14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. . . . .	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV. . . . .	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. . . . .		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions). . . . .	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. . . . .		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. . . . .		X

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i> . . . . .		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i> . . . . .	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i> . . . . .	X	
<b>23</b> 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? <i>If "Yes," complete Schedule J.</i> . . . . .	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i> . . . . .		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i> . . . . .		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III.</i> . . . . .		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i> . . . . .	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> . . . . .		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> . . . . .		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> . . . . .		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> . . . . .		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i> . . . . .	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	X	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .	X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i> . . . . .		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a through 14b regarding Form 1096, Form W-2G, Form W-3, and various tax compliance issues.

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.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official; b Other officers or key employees of the organization; 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?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA,
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) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [ ] Another's website [X] Upon request [ ] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: ANNA CAMPISI 886 CANNERY ROW MONTEREY, CA 93940 831-648-4800

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1)STEVE NEAL CHAIRMAN	1.00 0.	X		X				0.	0.	0.
(2)DR. PETER S. BING CHAIR EMERITUS	1.00 0.	X						0.	0.	0.
(3)JULIE PACKARD EXEC. DIRECTOR & VICE CHAIR	28.00 0.	X		X			297,472.	0.	37,431.	
(4)SUSAN BELL TRUSTEE	1.00 0.	X						0.	0.	0.
(5)MARGARET CALDWELL TRUSTEE	1.00 0.	X						0.	0.	0.
(6)SAMANTHA CAMPBELL TRUSTEE	1.00 0.	X						0.	0.	0.
(7)CAROLINE GETTY TRUSTEE	1.00 0.	X						0.	0.	0.
(8)JUAN GOVEA TRUSTEE	1.00 0.	X						0.	0.	0.
(9)M.R.C. GREENWOOD TRUSTEE	1.00 0.	X						0.	0.	0.
(10)WILLIAM LANDRETH TRUSTEE	1.00 0.	X						0.	0.	0.
(11)JOAN LANE TRUSTEE	1.00 0.	X						0.	0.	0.
(12)MICHAEL MANTELL TRUSTEE	1.00 0.	X						0.	0.	0.
(13)CONNIE MARTINEZ TRUSTEE	1.00 0.	X						0.	0.	0.
(14)SUSAN ORR TRUSTEE THROUGH JUNE 2015	1.00 0.	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
( 15) PIETRO PARRAVANO TRUSTEE	1.00 0.	X					0.	0.	0.	
( 16) CHRIS SCHOLIN TRUSTEE	1.00 0.	X					0.	0.	0.	
( 17) MARK WAN TRUSTEE	1.00 0.	X					0.	0.	0.	
( 18) GIDEON YU TRUSTEE EFFECTIVE DEC 2015	1.00 0.	X					0.	0.	0.	
( 19) BARBARA WRIGHT SECRETARY	1.00 0.			X			0.	0.	0.	
( 20) JAMES HEKKERS MANAGING DIRECTOR / CONSULTANT	40.00 1.00			X			274,838.	0.	35,434.	
( 21) CYNTHIA VERNON COO EFFECTIVE JUNE 2015	40.00 0.			X			220,488.	0.	44,285.	
( 22) ED PROHASKA CFO/VP ENTERPRISE DEVELOPMENT	40.00 1.00			X			279,034.	0.	38,767.	
( 23) CRISTINA FEKECI CHIEF DEVELOPMENT OFFICER	40.00 0.			X			284,593.	0.	46,877.	
( 24) MARGARET SPRING VP CONSERVATION & SCIENCE	40.00 0.			X			187,605.	0.	42,221.	
( 25) MARIAN HAHN VP OF MARKETING	40.00 0.			X			204,200.	0.	31,070.	
<b>1b Sub-total</b>							297,472.	0.	37,431.	
<b>c Total from continuation sheets to Part VII, Section A</b>							2,870,570.	0.	533,906.	
<b>d Total (add lines 1b and 1c)</b>							3,168,042.	0.	571,337.	

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 ▶ 46

	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		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 65



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
( 26) TERESA MERRY VP HUMAN RESOURCES	40.00 0.				X		176,731.	0.	51,051.	
( 27) RANDALL HAMILTON VP OF HUSBANDRY	40.00 0.				X		171,826.	0.	32,604.	
( 28) CHARLES ASLANIAN VP OF FACILITY OPERATIONS	40.00 0.				X		159,021.	0.	47,874.	
( 29) JUSTIN SKINNER VP OF INFORMATION TECHNOLOGY	40.00 0.					X	219,207.	0.	32,638.	
( 30) DON HUGHES VP OF EXHIBITIONS	40.00 0.					X	208,574.	0.	45,794.	
( 31) JIM WESTBROOK DIRECTOR OF FINANCE	40.00 1.00					X	170,417.	0.	27,461.	
( 32) JENNIFER DIANTO KEMMERLY GLOB FISHERIES/AQUACULTURE, DIR	40.00 0.					X	157,737.	0.	26,024.	
( 33) DIANE SENA DIR OF NON-AQ PROP MGMT/GM HH	40.00 0.					X	156,299.	0.	31,806.	
<b>1b Sub-total</b> .....										
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....										

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 ▶ 46

	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 .....		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual .....	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .....		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns					
	1b	Membership dues	12,155,716.				
	1c	Fundraising events					
	1d	Related organizations	249,546.				
	1e	Government grants (contributions)	178,167.				
	1f	All other contributions, gifts, grants, and similar amounts not included above	16,501,580.				
	g	Noncash contributions included in lines 1a-1f: \$	1,419,818.				
	h	<b>Total. Add lines 1a-1f</b>		29,085,009.			
Program Service Revenue			<b>Business Code</b>				
	2a	ADMISSION FEES	611600	43,130,683.	43,130,683.		
	b	OTHER PROGRAM REVENUE	900099	1,884,854.	1,884,854.		
	c						
	d						
	e						
	g	<b>Total. Add lines 2a-2f</b>		45,015,537.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		2,111,655.	-46,504.	2,158,159.	
	4	Income from investment of tax-exempt bond proceeds		0.			
	5	Royalties		0.			
	6a	Gross rents	(i) Real	4,417,070.	147,745.		
			(ii) Personal				
	b	Less: rental expenses		1,787,786.			
	c	Rental income or (loss)		2,629,284.	147,745.		
	d	Net rental income or (loss)		2,777,029.	133,275.	263,754.	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	45,962,766.			
			(ii) Other				
	b	Less: cost or other basis and sales expenses		43,676,293.	677,299.		
	c	Gain or (loss)		2,286,473.	-677,299.		
	d	Net gain or (loss)		1,609,174.		1,609,174.	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b	Less: direct expenses	b				
c	Net income or (loss) from fundraising events			0.			
9a	Gross income from gaming activities. See Part IV, line 19	a					
b	Less: direct expenses	b					
c	Net income or (loss) from gaming activities			0.			
10a	Gross sales of inventory, less returns and allowances	a					
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory			0.			
Miscellaneous Revenue			<b>Business Code</b>				
11a	LICENSING REVENUE		900099	287,550.	287,550.		
b	MEMBER EVENTS		900099	29,455.	29,455.		
c	ALL OTHER REVENUE		900099	238,474.	238,474.		
d	All other revenue						
e	<b>Total. Add lines 11a-11d</b>			555,479.			
12	<b>Total revenue. See instructions.</b>			81,153,883.	45,571,016.	86,771.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	403,836.	403,836.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	51,900.	51,900.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	23,326.	23,326.		
4 Benefits paid to or for members . . . . .	0.			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	2,663,422.	641,151.	1,690,801.	331,470.
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 . . . . .	27,155,134.	23,118,809.	2,985,541.	1,050,784.
8 Pension plan accruals and contributions (Include section 401(k) and 403(b) employer contributions)	2,235,315.	1,754,453.	379,040.	101,822.
9 Other employee benefits . . . . .	5,949,113.	4,688,930.	954,421.	305,762.
10 Payroll taxes . . . . .	2,169,850.	1,759,562.	317,928.	92,360.
11 Fees for services (non-employees):				
a Management . . . . .	0.			
b Legal . . . . .	347,028.	258,821.	83,672.	4,535.
c Accounting . . . . .	233,829.	223,367.	9,334.	1,128.
d Lobbying . . . . .	140,699.	140,699.		
e Professional fundraising services. See Part IV, line 17.	252,831.			252,831.
f Investment management fees . . . . .	250,142.			250,142.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) <b>ATCH 3</b>	8,543,062.	7,517,420.	832,920.	192,722.
12 Advertising and promotion . . . . .	7,262,499.	7,140,135.	122,325.	39.
13 Office expenses . . . . .	4,883,330.	3,948,225.	569,370.	365,735.
14 Information technology . . . . .	997,448.	943,148.	40,210.	14,090.
15 Royalties . . . . .	0.			
16 Occupancy . . . . .	847,260.	688,749.	158,079.	432.
17 Travel . . . . .	2,328,314.	1,874,812.	271,278.	182,224.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings . . . . .	178,368.	163,745.	5,265.	9,358.
20 Interest . . . . .	0.			
21 Payments to affiliates . . . . .	0.			
22 Depreciation, depletion, and amortization . . . . .	11,402,581.	10,895,054.	452,800.	54,727.
23 Insurance . . . . .	565,816.	461,952.	101,545.	2,319.
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 O.)				
a <u>MARINE LIFE CARE</u> . . . . .	1,352,821.	1,322,735.	30,045.	41.
b <u>DONATED GOODS</u> . . . . .	370,601.	366,061.		4,540.
c <u>MERCHANT FEES</u> . . . . .	880,709.	4,739.	875,970.	
d <u>REVERSAL OF BAD DEBT</u> . . . . .	-37,172.	2,000.	-39,172.	
e All other expenses . . . . .	84,133.		84,133.	
25 Total functional expenses. Add lines 1 through 24e	81,536,195.	68,393,629.	9,925,505.	3,217,061.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .	0.			

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing . . . . .	1,203,737.	1	3,201,387.
	2	Savings and temporary cash investments . . . . .	22,500,185.	2	21,605,602.
	3	Pledges and grants receivable, net . . . . .	37,069,664.	3	29,914,057.
	4	Accounts receivable, net . . . . .	1,811,958.	4	1,872,653.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .	0.	5	0.
	6	Loans and other 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 employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .	0.	6	0.
	7	Notes and loans receivable, net . . . . .	0.	7	0.
	8	Inventories for sale or use . . . . .	0.	8	0.
	9	Prepaid expenses and deferred charges . . . . .	1,782,557.	9	1,329,663.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a 279,292,658.		
	b	Less: accumulated depreciation. . . . .	10b 140,118,958.		
	11	Investments - publicly traded securities . . . . .	0.	11	0.
	12	Investments - other securities. See Part IV, line 11 . . . . .	183,087,633.	12	189,725,217.
	13	Investments - program-related. See Part IV, line 11 . . . . .	0.	13	0.
	14	Intangible assets . . . . .	0.	14	0.
	15	Other assets. See Part IV, line 11 . . . . .	794,603.	15	817,165.
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	391,700,610.	16	387,639,444.	
Liabilities	17	Accounts payable and accrued expenses . . . . .	7,241,181.	17	8,207,463.
	18	Grants payable . . . . .	0.	18	0.
	19	Deferred revenue . . . . .	8,189,252.	19	8,377,583.
	20	Tax-exempt bond liabilities . . . . .	0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .	0.	21	0.
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .	0.	22	0.
	23	Secured mortgages and notes payable to unrelated third parties . . . . .	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties . . . . .	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .	161,823.	25	153,987.
	26	<b>Total liabilities.</b> Add lines 17 through 25. . . . .	15,592,256.	26	16,739,033.
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>				
	27	Unrestricted net assets . . . . .	316,461,894.	27	314,053,500.
	28	Temporarily restricted net assets . . . . .	42,692,381.	28	40,139,614.
	29	Permanently restricted net assets . . . . .	16,954,079.	29	16,707,297.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
	30	Capital stock or trust principal, or current funds . . . . .		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .		32	
33	<b>Total net assets or fund balances</b> . . . . .	376,108,354.	33	370,900,411.	
34	<b>Total liabilities and net assets/fund balances</b> . . . . .	391,700,610.	34	387,639,444.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	81,153,883.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	81,536,195.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-382,312.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	376,108,354.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-4,796,729.
<b>6</b>	Donated services and use of facilities	<b>6</b>	0.
<b>7</b>	Investment expenses	<b>7</b>	0.
<b>8</b>	Prior period adjustments	<b>8</b>	0.
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-28,902.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	370,900,411.

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .  
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? . . . . .  
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

**SCHEDULE A**  
**(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.

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization MONTEREY BAY AQUARIUM FOUNDATION	Employer identification number 94-2487469
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**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)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 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.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . .
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 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; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc.; 13 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) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 14 Public support percentage for 2015; 15 Public support percentage from 2014 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2015; b 33 1/3% support test - 2014; 17a 10%-facts-and-circumstances test - 2015; b 10%-facts-and-circumstances test - 2014; 18 Private foundation.

Schedule A (Form 990 or 990-EZ) 2015

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	25,494,301.	22,938,932.	44,782,063.	47,916,874.	29,085,009.	170,217,179.
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	35,412,176.	38,309,941.	39,487,351.	43,451,445.	45,015,537.	201,676,450.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						0.
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						0.
<b>6 Total.</b> Add lines 1 through 5	60,906,477.	61,248,873.	84,269,414.	91,368,319.	74,100,546.	371,893,629.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons	1,252,164.	1,187,684.	26,611,091.	743,264.	524,000.	30,318,203.
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
<b>c</b> Add lines 7a and 7b	1,252,164.	1,187,684.	26,611,091.	743,264.	524,000.	30,318,203.
<b>8 Public support.</b> (Subtract line 7c from line 6.)						341,575,426.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>9</b> Amounts from line 6	60,906,477.	61,248,873.	84,269,414.	91,368,319.	74,100,546.	371,893,629.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,330,416.	5,127,121.	5,420,675.	6,399,701.	6,676,470.	27,954,383.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
<b>c</b> Add lines 10a and 10b	4,330,416.	5,127,121.	5,420,675.	6,399,701.	6,676,470.	27,954,383.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0.	0.	0.	0.	0.	0.
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	766,657.	389,050.	267,710.	708,527.	555,479.	2,687,423.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	66,003,550.	66,765,044.	89,957,799.	98,476,547.	81,332,495.	402,535,435.

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

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

<b>15</b> Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	84.86%
<b>16</b> Public support percentage from 2014 Schedule A, Part III, line 15	<b>16</b>	84.76%

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

<b>17</b> Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	6.94%
<b>18</b> Investment income percentage from 2014 Schedule A, Part III, line 17	<b>18</b>	6.60%

**19a 33 1/3% support tests - 2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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



**Part IV Supporting Organizations**

(Complete only if you checked a box in line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

**Part IV Supporting Organizations (continued)**

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
	11a		
b	A family member of a person described in (a) above?		
	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
	11c		

**Section B. Type I Supporting Organizations**

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
	2		

**Section C. Type II Supporting Organizations**

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
	1		

**Section D. All Type III Supporting Organizations**

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
	3		

**Section E. Type III Functionally-Integrated Supporting Organizations**

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
	3b		

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

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013 . . . . .			
e From 2014 . . . . .			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 <b>Excess distributions carryover to 2016.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013 . . . . .			
d Excess from 2014 . . . . .			
e Excess from 2015 . . . . .			

**Part VI** **Supplemental Information.** 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).

ATTACHMENT 1

SCHEDULE A, PART III - OTHER INCOME

DESCRIPTION	2011	2012	2013	2014	2015	TOTAL
OTHER INCOME	766,657.	389,050.	267,710.	708,527.	555,479.	2,687,423.
<b>TOTALS</b>	<u>766,657.</u>	<u>389,050.</u>	<u>267,710.</u>	<u>708,527.</u>	<u>555,479.</u>	<u>2,687,423.</u>

**SCHEDULE C**  
(Form 990 or 990-EZ)

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

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

Department of the Treasury  
Internal Revenue Service

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

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

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

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

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

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

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

Name of organization MONTEREY BAY AQUARIUM FOUNDATION	Employer identification number 94-2487469
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political 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 4955 . . . ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a Was a correction made? . . . . .  Yes  No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file Form 1120-POL for this year? . . . . .  Yes  No
- 5 Enter the names, addresses and 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.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(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) 2015

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

A Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check  if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .														
b	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	141,513.													
c	Total lobbying expenditures (add lines 1a and 1b) . . . . .	141,513.													
d	Other exempt purpose expenditures . . . . .	80,891,709.													
e	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .	81,033,222.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	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 25% of line 1f) . . . . .	250,000.													
h	Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .	0.	0.												
i	Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .	0.	0.												
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No													

**4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total	
2a	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c	Total lobbying expenditures	124,902.	175,477.	113,655.	141,513.	555,547.
d	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f	Grassroots lobbying expenditures		1,104.	407.		1,511.

Schedule C (Form 990 or 990-EZ) 2015

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)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; a Volunteers?; b Paid staff or management...; c Media advertisements?; d Mailings to members...; e Publications...; f Grants to other organizations...; g Direct contact with legislators...; h Rallies, demonstrations...; 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; c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

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

Table with 4 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?

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

Table with 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 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); a Current year; b Carryover from last year; c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 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?; 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

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

Blank lines for providing supplemental information as required by the instructions.



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

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SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

Employer identification number

94-2487469

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, aggregate value of grants, and questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include purpose(s) of conservation easements, total number of easements, acreage, and number of easements on historic structures.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include questions about reporting works of art, historical treasures, and other similar assets.

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

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 83.4000 %
b Permanent endowment 13.1000 %
c Temporarily restricted endowment 3.5000 %
The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

Table with 2 columns: Yes, No. Rows: (i) unrelated organizations, (ii) related organizations, 3b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Table with 4 columns: (a) Cost or other basis (Investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other.

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

**Part VII Investments - Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other . . . . .		
(A) EQUITY FUND	107,970,445.	FMV
(B) BOND FUNDS	11,413,119.	FMV
(C) COMMODITIES FUND	927,637.	FMV
(D) HEDGE FUNDS	36,970,931.	FMV
(E) US GOVERNMENT MONEY MARKET	4,790,153.	FMV
(F) PRIVATE CAPITAL FUNDS	23,614,950.	FMV
(G) BROKERAGE ACCOUNT BALANCES	1,608,077.	FMV
(H) OFFSHORE FUND	2,429,905.	FMV
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	189,725,217.	

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . . . ▶	

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GIFT ANNUITY PAYMENT LIABILITY	153,987.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	153,987.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII



**Part XIII** Supplemental Information (continued)

REVISION OF PRIOR YEAR CHANGE IN ENDOWMENT FUNDS

SCHEDULE D, PART V:

THE CHANGE IN ENDOWMENT FUNDS FOR SOME PRIOR YEARS HAVE BEEN UPDATED FROM THE PREVIOUSLY FILED FORM 990 TO MORE ACCURATELY REFLECT THE TRUE APPRECIATION OR USE OF THE ENDOWMENT FUNDS. THERE HAS BEEN NO CHANGE TO THE BEGINNING OR END OF YEAR BALANCES.

INTENDED USE OF ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4:

THE EARNINGS OF THE AQUARIUM'S ENDOWMENT FUNDS SUPPORT EDUCATION AND CONSERVATION PROGRAMS AND THE MISSION OF THE AQUARIUM.

FIN 48 (ASC 740) FOOTNOTE

SCHEDULE D, PART X, LINE 2:

THE FOLLOWING FOOTNOTE APPEARED IN THE CONSOLIDATED FINANCIAL STATEMENTS FOR BOTH MONTEREY BAY AQUARIUM FOUNDATION AND MONTEREY BAY AQUARIUM SUPPORT SERVICES ("MBASS"), A RELATED ORGANIZATION:

IN ACCORDANCE WITH THE FASB GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, MANAGEMENT REGULARLY EVALUATES ITS TAX POSITIONS AND DOES NOT BELIEVE EITHER MONTEREY BAY AQUARIUM FOUNDATION OR MBASS HAVE ANY UNCERTAIN TAX POSITIONS THAT REQUIRE DISCLOSURE OR ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS. ACCORDING TO THE STATUTE OF LIMITATIONS, BOTH THE MONTEREY BAY AQUARIUM FOUNDATION AND MBASS ARE NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR FISCAL YEARS PRIOR TO DECEMBER 31, 2011 FOR CALIFORNIA TAX PURPOSES AND FOR FISCAL YEARS PRIOR TO DECEMBER 31, 2012 FOR FEDERAL TAX PURPOSES.

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
MONTEREY BAY AQUARIUM FOUNDATION

Employer identification number  
94-2487469

**Part I** General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	SYMPOSIUMS	157,573.
(2) MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	SYMPOSIUMS	6,109.
(3) SUB-SAHARAN AFRICA			PROGRAM SERVICES	SYMPOSIUMS	11,025.
(4) NORTH AMERICA			PROGRAM SERVICES	SYMPOSIUMS	52,615.
(5) EUROPE			PROGRAM SERVICES	SYMPOSIUMS	116,733.
(6) CENTRAL AMERICA/CARIBBEAN			PROGRAM SERVICES	SYMPOSIUMS	5,980.
(7) SOUTH AMERICA			PROGRAM SERVICES	SYMPOSIUMS	8,745.
(8) NORTH AMERICA			GRANTMAKING		23,325.
(9) CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		3,000,000.
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total, . . . . .					3,382,106.
b Total from continuation sheets to Part I . . . . .					
c Totals (add lines 3a and 3b)					3,382,106.

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

Schedule F (Form 990) 2015

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			NORTH AMERICA	RESEARCH PROJECT	23,326.	WIRE			
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. . . . . 1.

3 Enter total number of other organizations or entities. . . . .



**Part III** Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  
 Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2015

**Part IV Foreign Forms**

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

Schedule F (Form 990) 2015

**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).

PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE THE UNITED STATES

SCHEDULE F, PART I, LINE 2:

THE AQUARIUM REQUIRES POTENTIAL GRANT RECIPIENTS TO SUBMIT FORMAL APPLICATIONS WHICH ARE REVIEWED BY THE PROGRAM MANAGER AND DIRECTOR OF FINANCE FOR CONSISTENCY WITH THE AQUARIUM'S MISSION AND COMPLIANCE WITH THE ANNUAL BUDGET. FURTHERMORE, THE AQUARIUM REQUIRES A WRITTEN REPORT FROM THE GRANTEE PROVIDING DETAIL ABOUT HOW FUNDS WERE USED TO ACCOMPLISH THE GRANT OBJECTIVES. REPORTS ARE REVIEWED BY THE PROGRAM MANAGER AS WELL AS THE DIRECTOR OF FINANCE FOR COMPLIANCE WITH GRANT CONDITIONS.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Name of the organization  
MONTEREY BAY AQUARIUM FOUNDATION

Employer identification number  
94-2487469

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- |  |   |
|--|---|
| a <input checked="" type="checkbox"/> Mail solicitations               | e <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input checked="" type="checkbox"/> Solicitation of government grants     |
| c <input checked="" type="checkbox"/> Phone solicitations              | g <input checked="" type="checkbox"/> Special fundraising events            |
| d <input checked="" type="checkbox"/> In-person solicitations          |   |
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 ATTACHMENT 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
<b>Total</b>				252,663.	234,109.	18,554.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

CA,

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through 9 in column (d)				▶
	11	Net income summary. Subtract line 10 from line 3, column (d)				▶

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

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

- 9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_
- a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No
- b If "No," explain: \_\_\_\_\_
- 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes  No
- b If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

		%
a The organization's facility	13a	
b An outside facility	13b	
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ -----

Address ▶ -----

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

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ -----

Description of services provided ▶ -----

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

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

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

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MONTEREY BAY AQUARIUM FOUNDATION

94-2487469

ATTACHMENT 1

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS?		GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION
		YES	NO			
CHARLES FEINSTEIN & CO. 400 MICHIGAN AVE #1650 CHICAGO IL 60611	CONSULTING		X	252,663.	153,600.	-153,600.
SD&A TELESERVICES 5757 WEST CENTURY BLVD LOS ANGELES CA 90045	TELE- MARKETING		X	80,509.	172,154.	

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

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047  
**2015**  
**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**MONTREY BAY AQUARIUM FOUNDATION**

Employer identification number  
**94-2487469**

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

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

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

(1) (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CALIFORNIA STATE UNIVERSITY LONG BEACH 6300 E STATE UNIV DR #332 STANFORD UNIVERSITY	65-6106694	115	22,000.				WRITE SHARK RESEARCH SHARK TAGGING RESEARCH PROGRAM
(2) STANFORD UNIVERSITY 450 SIERRA MALL, STANFORD, CA 94305	94-1153656	501 (C) (3)	149,533.				RESEARCH PROJECT - CEPHALOPODS
(3) MONTREY BAY AQUARIUM RESEARCH INSTITUTE 7700 SANDHOLDT ROAD MOSS LANDING, CA 95039	77-0150580	501 (C) (3)	66,182.				SPONSORSHIP-SHUTTLE TO AQUARIUM
(4) PACIFIC GROVE CHAMBER OF COMMERCE PO BOX 167 PACIFIC GROVE, CA 93950	94-1558089	501 (C) (3)	5,760.				GENERAL SUPPORT
(5) SUSTAINABLE FISHERIES PARTNERSHIP FDN 4348 WALDLAE AVE #692 HONOLULU, HI 96816	27-3091938	501 (C) (3)	15,000.				SUPPORT OF THE OCEAN PROJECT
(6) THE OCEAN FOUNDATION 1320 19TH ST NW 5TH FL WASHINGTON, DC 20036	71-0863908	501 (C) (3)	10,000.				TITANS OF MAVERICKS SPONSORSHIP
(7) CARTEL MANAGEMENT INC 665 LILLIAN WAY LOS ANGELES, CA 90004	20-8921214		51,950.				RESEARCH OF NOBULTO RAYS
(8) UNIVERSITY OF CALIFORNIA, SANTA CRUZ 1156 HIGH STREET SANTA CRUZ, CA 95064	94-1539563	115	15,000.				RESEARCH OF ELASMOBRANCH FISH
(9) UNIVERSITY OF HAWAII, RESEARCH OFFICE 2240 CAMPUS RD PO BOX 368	99-600354	115	38,000.				
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **8**

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (2015)**



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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 STUDENT RESEARCH FELLOWSHIP	1	20,000.			
2 INDIVIDUAL SCHOLARSHIPS	34	31,900.			
3					
4					
5					
6					
7					

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE UNITED STATES  
 SCHEDULE I, PART I, LINE 2:

THE AQUARIUM REQUIRES POTENTIAL GRANT RECIPIENTS TO SUBMIT FORMAL APPLICATIONS WHICH ARE REVIEWED BY THE PROGRAM MANAGER AND DIRECTOR OF FINANCE FOR CONSISTENCY WITH THE AQUARIUM'S MISSION AND COMPLIANCE WITH THE ANNUAL BUDGET. FURTHERMORE, THE AQUARIUM REQUIRES A WRITTEN REPORT FROM THE GRANTEE PROVIDING DETAIL ABOUT HOW FUNDS WERE USED TO ACCOMPLISH THE GRANT OBJECTIVES. REPORTS ARE REVIEWED BY THE PROGRAM MANAGER AS WELL AS THE DIRECTOR OF FINANCE FOR COMPLIANCE WITH GRANT CONDITIONS.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

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

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

Employer identification number

94-2487469

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |   |   |
|---|---|
| <input type="checkbox"/> First-class or charter travel                        | <input type="checkbox"/> Housing allowance or residence for personal use          |
| <input type="checkbox"/> Travel for companions                                | <input type="checkbox"/> Payments for business use of personal residence          |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account                       | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)          |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? . . . . .

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? . . . . .
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .
- c** Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III. . . . .

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2015

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual (row (i)). Do not list any individuals that are not listed on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). The sum of columns (B)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
JULIE PACKARD EXEC. DIRECTOR & VICE CHAIR	(i) 295,146. (ii) 0. (iii) 0.	401.	1,925.	26,500.	10,931.	334,903.	0.
JAMES HEKKERS MANAGING DIRECTOR / CONSULTANT	(i) 219,940. (ii) 0. (iii) 0.	0.	54,898.	21,752.	13,682.	310,272.	0.
CYNTHIA VERNON COO EFFECTIVE JUNE 2015	(i) 218,315. (ii) 0. (iii) 0.	801.	1,372.	22,517.	21,768.	264,773.	0.
ED PROHASKA CEO/VP ENTERPRISE DEVELOPMENT	(i) 276,821. (ii) 0. (iii) 0.	801.	1,412.	26,500.	12,267.	317,801.	0.
CRISTINA FEKECI CHIEF DEVELOPMENT OFFICER	(i) 281,448. (ii) 0. (iii) 0.	801.	2,344.	26,500.	20,377.	331,470.	0.
MARGARET SPRING VP CONSERVATION & SCIENCE	(i) 185,922. (ii) 0. (iii) 0.	790.	893.	19,444.	22,777.	229,826.	0.
MARIAN HAHN VP OF MARKETING	(i) 202,991. (ii) 0. (iii) 0.	790.	419.	20,385.	10,685.	235,270.	0.
TERESA MERRY VP HUMAN RESOURCES	(i) 174,776. (ii) 0. (iii) 0.	790.	1,165.	18,568.	32,483.	227,782.	0.
RANDALL HAMILTON VP OF HUSBANDRY	(i) 166,649. (ii) 0. (iii) 0.	790.	4,387.	17,145.	15,459.	204,430.	0.
JUSTIN SKINNER VP OF INFORMATION TECHNOLOGY	(i) 218,242. (ii) 0. (iii) 0.	801.	164.	13,401.	19,237.	251,845.	0.
DON HUGHES VP OF EXHIBITIONS	(i) 206,669. (ii) 0. (iii) 0.	790.	1,115.	21,701.	24,093.	254,368.	0.
JIM WESTBROOK DIRECTOR OF FINANCE	(i) 169,298. (ii) 0. (iii) 0.	790.	329.	17,091.	10,370.	197,878.	0.
JENNIFER DIANTO KEMMERT GLOBAL FISHERIES/AQUACULTURE DIR	(i) 156,031. (ii) 0. (iii) 0.	1,579.	127.	15,764.	10,260.	183,761.	0.
DIANE SENA DIR. OF NON-AQ PROP MGMT/GM HR	(i) 154,057. (ii) 0. (iii) 0.	790.	1,452.	15,956.	15,850.	188,105.	0.
CHARLES ASLANIAN VP OF FACILITY OPERATIONS	(i) 157,318. (ii) 0. (iii) 0.	790.	913.	16,778.	31,096.	206,895.	0.
16	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.	0.	0.	0.

**Part III Supplemental Information**

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

SCHEDULE J, PART I, LINE 1A

GROSS-UP PAYMENTS AND HEALTH CLUB DUES: AS PART OF THE AQUARIUM'S WELLNESS PROGRAM, ALL EMPLOYEES (INCLUDING THE LISTED EMPLOYEES IN PART VII, SECTION A) ARE ELIGIBLE TO RECEIVE A MONTHLY SUBSIDY OF \$25 FOR FITNESS CENTER DUES IF THE EMPLOYEE MEETS CERTAIN WELLNESS PROGRAM REQUIREMENTS. SINCE THIS TYPE OF SUBSIDY IS CONSIDERED A TAXABLE FRINGE BENEFIT, THE AQUARIUM GROSSES-UP THESE SUBSIDIES TO COVER THE EMPLOYEE'S TAXES. ADDITIONALLY, CERTAIN EMPLOYEES RECEIVED TAX GROSS-UP PAYMENTS FOR SMALL APPRECIATION GIFTS RECEIVED DURING THE COURSE OF THE 2015 CALENDAR YEAR. ALL PAYMENTS WERE TREATED AS TAXABLE INCOME ON THE EMPLOYEE'S FORM W-2 AND REPORTED AS COMPENSATION ON SCHEDULE J, PART II, COLUMN B(III).

SCHEDULE J, PART II:

COMPENSATION PAYMENTS REPORTED ON SCHEDULE J, PART II, COLUMN (B) (I) FOR JAMES HEKKERS INCLUDES AMOUNTS PAID TO HIM AS AN EMPLOYEE OF THE ORGANIZATION IN HIS CAPACITY AS MANAGING DIRECTOR (WHICH HE SERVED AS UNTIL JULY 2015), AS WELL AS PAYMENTS MADE THEREAFTER AS COMPENSATION FOR SERVICES AS A NON-EMPLOYEE CONSULTANT OF THE ORGANIZATION.

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047



Name of the organization  
**MONTEREY BAY AQUARIUM FOUNDATION**

Employer identification number  
**94-2487469**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art . . . . .				
2 Art - Historical treasures . . . . .				
3 Art - Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities - Publicly traded . . . . .	X	66.	1,392,215.	COST/SELLING PRICE
10 Securities - Closely held stock . . . . .				
11 Securities - Partnership, LLC, or trust interests . . . . .				
12 Securities - Miscellaneous . . . . .				
13 Qualified conservation contribution - Historic structures . . . . .				
14 Qualified conservation contribution - Other . . . . .				
15 Real estate - Residential . . . . .				
16 Real estate - Commercial . . . . .				
17 Real estate - Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .	X	31.	27,603.	OPINION OF EXPERTS
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( )				
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .				29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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? . . . . .		X
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? . . . . .	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		X
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, describe in Part II.		

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

Schedule M (Form 990) (2015)

JSA

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**Part II** **Supplemental Information.** 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 M, PART I, COLUMN (B) :

THE ORGANIZATION IS REPORTING THE TOTAL NUMBER OF ITEMS CONTRIBUTED ON

SCHEDULE M, PART I, COLUMN (B) .

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

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

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

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Employer identification number

94-2487469

ORGANIZATION'S MISSION

FORM 990, PART I, LINE 1 AND FORM 990, PART III, LINE 1:

THE MISSION OF THE MONTEREY BAY AQUARIUM IS TO INSPIRE CONSERVATION OF THE OCEAN. CREATED WITH AN INITIAL GIFT FROM DAVID AND LUCILLE PACKARD, THE AQUARIUM FACILITIES OPENED TO THE PUBLIC IN 1984. MAJOR PROGRAMS INCLUDE A PUBLIC AQUARIUM WHOSE EXHIBITS FOCUS PRIMARILY, BUT NOT EXCLUSIVELY, ON MARINE LIFE OF MONTEREY BAY AND CALIFORNIA'S CENTRAL COAST; EDUCATION PROGRAMS SERVING STUDENTS FROM PRESCHOOL THROUGH COLLEGE AS WELL AS PRIMARY AND SECONDARY SCHOOL EDUCATORS; AND RESEARCH AND CONSERVATION INITIATIVES WHICH INCLUDE (A) THE LONG-TERM SURVIVAL OF THE SOUTHERN SEA OTTER, (B) UNDERSTANDING AND CONSERVING TUNA AND OTHER HIGHLY MIGRATORY ANIMALS, (C) PROMOTING SEAFOOD SUSTAINABILITY, AND (D) CONDUCTING AND COMMUNICATION SCIENTIFIC RESEARCH THAT PROMOTES MARINE CONSERVATION AND INFORMS OCEAN POLICY.

IN 2015, WE SERVED 2.1 MILLION VISITORS (THE SECOND TIME WE'VE HAD BACK-TO-BACK YEARS WITH OVER 2 MILLION GUESTS); THE SILICON VALLEY BUSINESS JOURNAL RECOGNIZED OUR EDUCATION PROGRAMS WITH ITS COMMUNITY IMPACT AWARD; THE WHITE HOUSE HONORED EMPLOYEE SARAH-MAE NELSON FOR HER WORK INTERPRETING TO VISITORS THE EFFECTS OF CLIMATE CHANGE ON OCEAN HEALTH; WE PLAYED A LEADING ROLE IN THE FIGHT FOR A PLASTIC-FREE OCEAN BY BACKING STATE AND FEDERAL ACTIONS TO PHASE OUT PLASTIC MICROBEADS; AND WE HOSTED AN UNPRECEDENTED TELEVISION PROGRAM - BIG BLUE LIVE - THAT CELEBRATED THE HEALTH OF MONTEREY BAY'S WILDLIFE AND ECOSYSTEMS ON

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

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PRIME-TIME TELEVISION IN THE UNITED KINGDOM AND UNITED STATES,  
SPOTLIGHTING ITS RECOVERY AS A CONSERVATION SUCCESS STORY OF GLOBAL  
SIGNIFICANCE.

## PROGRAM SERVICE ACCOMPLISHMENT DESCRIPTION

FORM 990, PART III, LINE 4A - MARINE LIFE EXHIBITION AND CARE:

MARINE LIFE EXHIBITION AND CARE COSTS OF \$31,387,581 INCLUDE THE COST OF  
OPERATING AND MAINTAINING THE AQUARIUM'S LIVING EXHIBIT GALLERIES.

THE SPECIAL EXHIBITION TENTACLES: THE ASTOUNDING LIVES OF OCTOPUSES,  
SQUID AND CUTTLEFISHES INTRODUCED VISITORS TO SEVERAL SPECIES OF DEEP-SEA  
CEPHALOPODS. WE WERE THE FIRST IN THE WORLD TO DEBUT THE MYSTERIOUS  
VAMPIRE SQUID, AND AMONG THE FIRST TO SHOW THE COCK-EYED SQUID AND THE  
JAPETELLA OCTOPUS. ANOTHER UNCOMMON ANIMAL BECAME AN INTERNATIONAL MEDIA  
SENSATION AFTER A RESEARCH COLLEAGUE AT THE MONTEREY BAY AQUARIUM  
RESEARCH INSTITUTE DUBBED THE AS-YET-UNNAMED OPISTHOTEUTHIS SPECIES  
"ADORABILIS" - THE "ADORABLE" OCTOPUS. ELSEWHERE IN TENTACLES, SEVERAL  
NAUTILUSES LAID OVER 10 EGGS ON EXHIBIT AND BEHIND THE SCENES, IMPLYING  
THE COLLECTION IS HEALTHY AND THRIVING ON EXHIBIT, ACCORDING TO OUR  
BIOLOGISTS.

DURING 2015, WORK WAS UNDERWAY WITH RESEARCH ON AND DEVELOPMENT OF A  
COMMUNITY OF REPTILES IN PREPARATION FOR THE 2016 DEBUT OF ;VIVA BAJA!  
LIFE ON THE EDGE. THE \$3.8 MILLION DOLLAR EXHIBIT INCLUDES COLORFUL  
TROPICAL FISHES AND INVERTEBRATES, PLUS OUR MOST DIVERSE TERRESTRIAL  
EXHIBIT, WHERE - FOR THE FIRST TIME AT THE AQUARIUM - VISITORS ENCOUNTER



Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

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SNAKES, SCORPIONS, TORTOISES, TARANTULAS, AND LIZARDS.

WE PARTICIPATED IN THE "TRAVELING TURTLE" PROGRAM FOR THE THIRD YEAR IN A ROW, JOINING NINE OTHER U.S. AQUARIUMS THAT FOSTER BABY LOGGERHEAD SEA TURTLES RESCUED OFF NORTH CAROLINA, SO THAT VISITORS CAN LEARN THE STORY OF THE ENDANGERED SPECIES. AFTER A YEAR OR TWO, THE TURTLES GROW LARGE ENOUGH TO JOIN OTHER RESCUED JUVENILE SEA TURTLES THAT ARE FITTED WITH SATELLITE TAGS AND RELEASED INTO THE ATLANTIC OCEAN.

OUR COLLECTION OF GIANT SEA BASS, A CRITICALLY ENDANGERED SPECIES, COMPRISES SEVERAL FISH OF VARIOUS AGES, FROM BABIES TO ADULTS 30 YEARS OLD. WE BEGAN WORKING WITH BABY GIANT SEA BASS AS PART OF A RESEARCH PROJECT TO DOCUMENT GROWTH RATE AND COLORIZATION/PATTERN CHANGES THROUGHOUT LIFE. BY STUDYING INDIVIDUALS AT DIFFERENT LIFE STAGES, WE HELP STRENGTHEN LAWS PROTECTING THESE GENTLE GIANTS THAT - WITH THEIR HEFTY WEIGHT AND WIDE, WIDE, LIPS - HOLD A SPECIAL PLACE IN THE HEARTS OF OUR VISITORS, AND ESPECIALLY OUR MEMBERS AND DONORS.

WE ALSO WELCOMED A PENGUIN CHICK AND A COMMON MURRE CHICK INTO OUR AVIAN COLLECTION; BOTH HATCHED FROM EGGS LAID BY EXHIBIT BIRDS. THESE FUZZY ADDITIONS WERE AMONG SEVERAL PENGUIN AND MURRE CHICKS THAT HAVE HATCHED HERE OVER THE PAST FEW YEARS. SOME BIRDS WE KEEP; SOME WE SEND TO OTHER ACCREDITED INSTITUTIONS AS PART OF SPECIES SURVIVAL PLANS GOVERNED BY THE ASSOCIATION OF ZOOS AND AQUARIUMS.

PROGRAM SERVICE ACCOMPLISHMENT DESCRIPTION

FORM 990, PART III, LINE 4B - EDUCATION AND OUTREACH:

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

Employer identification number

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EDUCATION AND OUTREACH COSTS OF \$12,193,553 INCLUDE THE COST OF EDUCATION PROGRAMS FOR BOTH TEACHERS AND STUDENTS, AQUARIUM ADVENTURES PROGRAMS TO DEEPEN GUEST EXPERIENCES, AND CULINARY EVENTS THAT PROMOTE SUSTAINABLE SEAFOOD PRACTICES.

WE CONTINUED TO RAISE FUNDS FOR A NEW LEED-CERTIFIED CENTER FOR OCEAN EDUCATION AND LEADERSHIP. THE CENTER WILL ENABLE US TO DOUBLE THE NUMBER OF VISITING SCHOOLCHILDREN WHO TAKE PART IN PROGRAMS LED BY AQUARIUM EDUCATORS, DOUBLE THE NUMBER OF SCIENCE TEACHERS WE REACH THROUGH INSTITUTES AND WORKSHOPS DESIGNED TO BUILD THEIR SKILLS AND DOUBLE THE NUMBER OF TEENS IN LEADERSHIP PROGRAMS. ALL OF THESE EDUCATION PROGRAMS FOR SCHOOLCHILDREN, TEACHERS AND TEENS ARE AVAILABLE FREE, AND INCLUDE COMPLIMENTARY ADMISSION TO THE AQUARIUM.

DURING 2015, WE WORKED WITH 284 TEENS WHO PARTICIPATED IN THE SUMMER WATCH (WATSONVILLE AREA TEENS CONSERVING HABITATS), YOUNG WOMEN IN SCIENCE AND TEEN CONSERVATION LEADER (TCL) PROGRAMS; AN ADDITIONAL 12 TCL ALUMS SUPPORTED THE PROGRAM THIS SUMMER AS PAID ASSISTANTS.

A TOTAL OF 1,546 TEACHERS PARTICIPATED IN FALL WORKSHOPS, CONFERENCES, PRESENTATIONS AND EVENTS IN 2015. IN OCTOBER, MORE THAN 100 HEAD START TEACHERS, STAFF AND ADMINISTRATORS JOINED AQUARIUM STAFF TO ENGAGE IN PROFESSIONAL DEVELOPMENT AND CELEBRATE THE 15TH ANNIVERSARY OF OUR SPLASH ZONE PARTNERSHIP WITH MONTEREY AND SANTA CRUZ COUNTY HEAD START CENTERS.

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

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THROUGHOUT 2015 WE REACHED THOUSANDS OF VISITORS THROUGH CUSTOMIZED FEE-BASED AQUARIUM ADVENTURES PROGRAMS, RANGING FROM BEHIND-THE-SCENES TOURS AND OVERNIGHT SLEEPOVERS TO EDUCATIONAL SCUBA ADVENTURES. IN 2015 WE ADDED A NEW "INSIDER'S TOUR" WHEREIN VISITORS EXPLORE EXHIBITS WITH OUR MOST SEASONED GUIDES. THROUGH THEIR PERSONAL STORIES AND INSIGHT, VISITORS UNCOVER NEW ANIMALS AND FISHES, STEP BEHIND THE SCENES TO DISCOVER THE SECRET LIVES OF JELLIES, AND HEAR ABOUT THE AQUARIUM'S GROUNDBREAKING RESEARCH EFFORTS WITH MARINE WILDLIFE.

IN 2015 WE REFOCUSED OUR COOKING FOR SOLUTIONS ANNUAL EVENTS INTO A YEAR-ROUND CELEBRATION WITH SEVERAL SMALLER, MORE INTIMATE EVENTS WITH A STRONGER FOCUS ON MAKING CHOICES FOR A HEALTHY OCEAN, PARTICULARLY FOOD. HIGHLIGHTS OF THE REVAMPED COOKING FOR SOLUTIONS INCLUDED TWO CELEBRATION WEEKENDS WITH TICKETED EVENTS AND FREE PUBLIC EVENTS FOR AQUARIUM VISITORS; SUSTAINABLE TASTING EVENTS DURING OUR EXTENDED PUBLIC HOURS EVENINGS BY THE BAY WEEKENDS; AND "ON THE ROAD" EVENTS WITH PARTNERS INCLUDING THE HESS COLLECTION AND HOG ISLAND OYSTER COMPANY.

## PROGRAM SERVICE ACCOMPLISHMENT DESCRIPTION

FORM 990, PART III, LINE 4C - CONSERVATION AND SCIENCE:

CONSERVATION AND SCIENCE COSTS OF \$7,275,504 REPRESENT EXPENSES FOR MARINE CONSERVATION POLICY AND ADVOCACY EFFORTS, THE SEAFOOD WATCH SUSTAINABILITY PROGRAM AND FIELD RESEARCH SUPPORTING SPECIES SURVIVAL.

OUR CONSERVATION AND SCIENCE PROGRAMS CONTINUED TO BE AN INFLUENCE

Name of the organization MONTEREY BAY AQUARIUM FOUNDATION	Employer identification number 94-2487469
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LOCALLY AND NATIONALLY, AND WE FURTHER EXPANDED THEM GLOBALLY IN 2015. WE SUPPORTED THE ENACTMENT OF SEVERAL STATE AND FEDERAL LAWS BY PROVIDING TESTIMONY, WRITING LETTERS, ACTIVATING OUR AUDIENCES, AND WORKING WITH LEGISLATIVE STAFF ON BILL LANGUAGE.

ONE WAS A.B. 888, THE STRONGEST LAW OF ITS TYPE IN THE NATION, WHICH BANNED THE SALE OF PERSONAL CARE PRODUCTS THAT CONTAIN PLASTIC MICROBEADS BY JANUARY 2020 IN CALIFORNIA. AT THE FEDERAL LEVEL, WE WORKED TO STRENGTHEN THE LANGUAGE IN A SIMILAR BILL, AND URGED CONGRESS TO PASS THE BILL AND ASKED PRESIDENT OBAMA TO SIGN IT INTO LAW - WHICH HE DID. ANOTHER WAS A.B. 96, WHICH IMPROVED RESTRICTIONS ON THE SALE OF ILLEGAL IVORY, INCLUDING FROM CERTAIN MARINE WILDLIFE.

IN OCTOBER, AFTER YEARS OF NEGOTIATION, THE U.S. SENATE PASSED H.R. 774, THE ILLEGAL, UNREPORTED AND UNREGULATED (IUU) FISHING ENFORCEMENT ACT OF 2015. WE EXPECT THE BILL TO SIGNIFICANTLY IMPROVE THE FEDERAL GOVERNMENT'S RESPONSE TO IUU FISHING, KEEPING BLACK-MARKET SEAFOOD OUT OF U.S. MARKETS AND ENCOURAGING ENFORCEMENT BY OTHER NATIONS.

LOCALLY, WE SUPPORTED MONTEREY BAY FISHERIES TRUST'S ACQUISITION OF MORE THAN \$1 MILLION IN COMMERCIAL GROUND FISH FISHING QUOTAS FROM THE NATURE CONSERVANCY. THE AQUARIUM WORKED WITH THE CITY OF MONTEREY AND OTHER COMMUNITY MEMBERS TO ESTABLISH A NEW, NON-PROFIT TRUST TO OWN AND LEASE GROUND FISH QUOTAS TO LOCAL FISHERMEN, WITH THE ADVICE AND SUPPORT OF THE NATURE CONSERVANCY, THE CALIFORNIA FISHERIES FUND OF ENVIRONMENTAL

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

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DEFENSE FUND AND THE DAVID AND LUCILLE PACKARD FOUNDATION.

OUR SEAFOOD WATCH PROGRAM CONTINUES TO SET THE STANDARD FOR SUSTAINABLE SEAFOOD, AND IN 2015 WE ADVANCED INITIATIVES TO SUPPORT SUSTAINABLE SEAFOOD PRODUCTION AROUND THE WORLD - BRINGING OUR RESPECTED PROGRAM TO A GLOBAL AUDIENCE. WE BROUGHT BUSINESS AND GOVERNMENT LEADERS TOGETHER IN SOUTHEAST ASIA TO SHAPE NEW STANDARDS FOR SUSTAINABLE AQUACULTURE, AND WELCOMED INDONESIA'S PROGRESSIVE FISHERIES MINISTER TO THE AQUARIUM IN MONTEREY. WE HELPED COLLEAGUES IN BRAZIL, JAPAN, AND EUROPE ADVANCE THEIR SUSTAINABLE SEAFOOD INITIATIVES, AND WORKED WITH PARTNERS IN MEXICO TO MOVE TOWARD SUSTAINABLE FISHING AND AQUACULTURE IN THE GULF OF CALIFORNIA.

WE WERE PLEASED WHEN LOUISIANA REPEALED ITS TURTLE EXCLUDER DEVICE (TED) EXEMPTION RULE, MAKING THEIR USE NOW REQUIRED IN FISHERIES. OCEANA.COM SITED SEAFOOD WATCH'S "AVOID" RATING AS HAVING A DIRECT EFFECT ON THE CHOICE TO ANNUL THE LAW.

WE WELCOMED NEW SEAFOOD WATCH BUSINESS PARTNERS IN 2015, INCLUDING DISNEY PARKS AND RESORTS, AND CELEBRATED THE ACCOMPLISHMENTS OF PARTNERS LIKE ARAMARK, WHICH NOW SOURCES 100 PERCENT OF ITS TUNA FROM SUSTAINABLE SOURCES.

WE ALSO JOINED 15 MAJOR U.S. AQUARIUMS TO SUPPORT A NEW AQUARIUM CONSERVATION PARTNERSHIP PILOT PROJECT TO HARNESS THE POWER OF AQUARIUMS

Name of the organization MONTEREY BAY AQUARIUM FOUNDATION	Employer identification number 94-2487469
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FOR COLLECTIVE ACTION TO IMPROVE OCEAN HEALTH. WE LED THE DEVELOPMENT OF THE ACP WITH PARTNERS AT SHEDD AQUARIUM AND NATIONAL AQUARIUM, PRODUCING A 2016-17 CONSERVATION ACTION AGENDA AND ACP CHARTER THAT WILL GUIDE THE WORK OF THE ACP OVER A TWO-YEAR PILOT PHASE.

WE WELCOMED NEW DIRECTOR OF SCIENCE KYLE VAN HOUTAN TO OVERSEE THE AQUARIUM'S SCIENCE AND CONSERVATION RESEARCH PROGRAMS, INCLUDING THOSE DEVOTED TO BLUEFIN TUNA, WHITE SHARKS, SEA OTTERS AND OTHER SPECIES. DR. VAN HOUTAN'S RESEARCH AND TEACHING HAVE FOCUSED ON MULTI-FACETED APPROACHES TO MARINE BIODIVERSITY CONSERVATION, AND HIS WORK SPANS A RANGE OF TOPICS - FROM ANIMAL BEHAVIOR, FORAGING ECOLOGY AND PHYSIOLOGY, TO FISHERIES STOCK ASSESSMENTS, CLIMATE CHANGE AND ECOSYSTEM-BASED MANAGEMENT. HIS RESEARCH ALSO EXPLORES GLOBAL CHANGE, BIODIVERSITY CONSERVATION, PROCESSES ARISING FROM CLIMATE, LONG-TERM ECOLOGICAL MONITORING, AND ETHICS.

OUR SEA OTTER PROGRAM TEAM COLLABORATED WITH OTHER SEA OTTER BIOLOGISTS TO SEQUENCE THE SEA OTTER GENOME FOR THE FIRST TIME. NATIONAL AND INTERNATIONAL MEDIA SHARED DETAILS OF OUR WORK WITH SEA OTTERS IN STORIES COVERING A WILD SEA OTTER MOM GIVING BIRTH IN OUR GREAT TIDE POOL.

OUR WHITE SHARK RESEARCH TEAM CONCLUDED A RECORD FIELD SEASON, TAGGING AND TRACKING ADULT AND JUVENILE WHITE SHARKS OFF THE COASTS OF CALIFORNIA AND MEXICO. OUR RESEARCHERS HAVE IDENTIFIED 117 INDIVIDUAL WHITE SHARKS, 43 NEW ANIMALS IN 2015, AND ONE SHARK THAT RETURNED TO THE FARALLON

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

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ISLANDS FOR A RECORD 27TH YEAR.

PARTNERING WITH THE MONTEREY BAY AQUARIUM RESEARCH INSTITUTE AND OTHERS, WE BEGAN DEVELOPING A CAMERA TAG THAT WILL REVEAL WHAT ADULT SHARKS ARE DOING IN A GATHERING AREA FAR OFFSHORE NEAR HAWAII, DUBBED THE "WHITE SHARK CAFE." WE ALSO RELEASED A STUDY IN NOVEMBER DOCUMENTING HOW RESEARCH DR. SAL JORGENSEN AND COLLEAGUES FED "FITBIT"-STYLE TAGS TO WHITE SHARKS TO TRACK THEIR ACTIVITY LEVEL AND MONITOR THEIR FEEDING SUCCESS.

WORKING WITH RESEARCH COLLEAGUES, WE EXPANDED PACIFIC BLUEFIN TUNA TAGGING EFFORTS WITH JAPAN'S FISHERIES RESEARCH AGENCY. OUR STAFF JOINED JAPANESE SCIENTISTS IN TAGGING BOTH 2-3 MONTH OLD AND 4-6 YEAR OLD (SPAWNING AGE) PACIFIC BLUEFIN TUNA. INFORMATION FROM TAG RETURNS SHOULD PROVIDE INSIGHT INTO HOW THE FISH USE AND INTERACT WITH THEIR HABITAT.

FOR THE THIRD SUMMER IN A ROW, WE AGAIN COLLABORATED WITH JAPANESE FISHERIES SCIENTISTS TO TAG HUNDREDS OF 3-MONTH OLD PACIFIC BLUEFIN TUNA OFF THE COAST OF SHIKOKU, JAPAN. DATA RECOVERED TO DATE HAVE SHOWN THAT THESE TUNA BEGIN THEIR TRANS-PACIFIC MIGRATION AT JUST OVER A YEAR OLD, EARLIER THAN PREVIOUSLY THOUGHT.

PROGRAM SERVICE ACCOMPLISHMENT DESCRIPTION

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

OTHER PROGRAM SERVICES OF \$17,536,991 REPRESENT THE COSTS OF ACTIVITIES TO PROVIDE A HIGH-QUALITY EXPERIENCE FOR THE 2.1 MILLION PEOPLE WHO

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

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94-2487469

VISITED THE AQUARIUM IN 2015. INCLUDED IN THIS CATEGORY ARE COSTS FOR MARKETING, GUEST SERVICES AND MEMBERSHIP SERVICES, AS WELL AS COSTS ASSOCIATED WITH FOOD SERVICES AND RETAIL.

MARKETING INCLUDES COSTS ASSOCIATED WITH THE CREATION, PRODUCTION AND PLACEMENT OF ADVERTISING IN VARIOUS MEDIA FOR THE PURPOSE OF BUILDING AWARENESS ABOUT THE OPPORTUNITY TO CONNECT WITH MARINE LIFE AND OCEAN CONSERVATION THROUGH AN AQUARIUM VISIT. AN ALLOCATION OF MARKETING COSTS IS INCLUDED IN MANAGEMENT AND GENERAL EXPENSES TO REPRESENT THE COSTS ASSOCIATED WITH SOLICITING ADMISSION REVENUE.

CALENDAR YEAR 2015'S ATTENDANCE WAS OUR THIRD HIGHEST EVER, AND THE SECOND TIME IN OUR HISTORY THAT WE'VE HAD BACK-TO-BACK YEARS WITH OVER 2 MILLION GUESTS. OUR DIGITAL, SEARCH-BASED ADVERTISING CAMPAIGN ONCE AGAIN HELPED TO ATTRACT MORE HIGH-PROPENSITY VISITORS FROM SOUTHERN CALIFORNIA AND OTHER CITIES ACROSS THE U.S. TO THE AQUARIUM AND THE MONTEREY AREA.

ABOUT ONE-THIRD (32%) OF THE TOTAL NUMBER OF PAID AQUARIUM VISITORS FROM CALIFORNIA WERE HISPANIC. MOST OF OUR HISPANIC ATTENDANCE IS FROM CALIFORNIA, WITH THE MAJORITY OF VISITORS ARRIVING FROM THE SAN FRANCISCO, SACRAMENTO, FRESNO AND LOCAL TRI-COUNTY AREA (MONTEREY, SANTA CRUZ AND SAN BENITO COUNTIES) MARKETS IN WHICH WE ADVERTISE DIRECTLY IN SPANISH-LANGUAGE MEDIA.



Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

Employer identification number

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WE'VE BEEN SUCCESSFUL IN DRIVING MILLENNIAL VISITATION. MORE THAN ONE-HALF (54%) OF 2015 AQUARIUM VISITORS WERE BETWEEN THE AGES OF 18 AND 34, WHILE ONLY ONE-THIRD (33%) OF CALIFORNIA RESIDENTS ARE IN THAT AGE GROUP. WE WILL CONTINUE TO FOCUS ON THIS AUDIENCE, WITH ADDITIONAL EMPHASIS ON ENGAGING THEM WITH THE AQUARIUM AND OUR MISSION LARGELY THROUGH OUR SOCIAL CHANNELS.

OUR ACTIVE AND RESPONSIVE PRESENCE ON SOCIAL MEDIA PLATFORMS ALLOWS VISITORS TO REMAIN CONNECTED WITH US, AND US WITH THEM, ONCE THEY LEAVE THE AQUARIUM. WE ENDED 2015 WITH 2.7 MILLION FOLLOWERS (AN INCREASE OF APPROXIMATELY 300,000 OVER 2014) ACROSS ALL SOCIAL MEDIA PLATFORMS AND PROPERTIES, INCLUDING FACEBOOK, TWITTER, TUMBLR, GOOGLE+, YOUTUBE, PINTEREST, INSTAGRAM AND A SPANISH-LANGUAGE FACEBOOK PAGE CALLED TU MONTEREY BAY AQUARIUM. IN 2015 THE TEAM VENTURED INTO PERISCOPE, A LIVE VIDEO PLATFORM, WITH GOOD SUCCESS AND ENGAGEMENT.

WE'RE CONSIDERED ONE OF THE SOCIAL MEDIA LEADERS AMONG ZOOS AND AQUARIUMS ACROSS THE COUNTRY, NOT ONLY IN THE NUMBER AND ENGAGEMENT WITH OUR FOLLOWERS, BUT ALSO IN OUR INNOVATIVE APPROACHES TO CONTENT.

IN 2015, THE AQUARIUM ADMITTED MORE THAN 95,000 PEOPLE IN OUR COMMUNITY FREE OF CHARGE. THESE GUESTS INCLUDED UNDERSERVED AUDIENCES VISITING THROUGH OUR FREE TO LEARN, SHELF TO SHORE, STUDENT OCEAN STEWARDS, AND ANNUAL COMMUNITY OPEN HOUSE PROGRAMS.

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MEMBERSHIP HOUSEHOLDS TOTALED 78,000. IN ADDITION TO THE ESSENTIAL PROCESSING AND CUSTOMER SERVICE FUNCTIONS, MEMBERSHIP SERVICES HOSTS SEVERAL MEMBER EVENTS EACH YEAR INCLUDING SLEEPOVERS, A HALLOWEEN DANCE PARTY, AND HOLIDAY WINE TASTING EVENT. AQUARIUM MEMBERS ALSO RECEIVE SHORELINES, THE AQUARIUM'S MEMBER MAGAZINE AND TARGETED MONTHLY E-NEWSLETTERS. MEMBERSHIP SERVICES INCLUDE OTHER EFFORTS TO SERVE, RETAIN AND COMMUNICATE WITH MEMBERS ABOUT OUR CONSERVATION MISSION.

THE AQUARIUM'S OVERALL OUTREACH WOULDN'T HAVE THE IMPACT IT DOES WITHOUT THE DEDICATION OF OUR MANY VOLUNTEERS, WHO DO MORE THAN MAKE THE AQUARIUM BETTER - THEY MAKE OUR WORK POSSIBLE. FOR EACH STAFF MEMBER, WE HAVE TWO VOLUNTEERS SHARING THEIR ENERGY AND ENTHUSIASM FOR THE OCEAN. IN 2015, OVER 1,300 INDIVIDUALS VOLUNTEERED OVER 163,000 HOURS OF SERVICE IN 79 DIFFERENT WORK AREAS, NOTABLY IN EDUCATION AND ANIMAL CARE. OUR VOLUNTEER COMMUNITY HAILS FROM ALL OVER CENTRAL AND NORTHERN CALIFORNIA - 86 CITIES IN ALL - AND VOLUNTEERS RANGE IN AGE FROM TEENAGERS TO FOLKS IN THEIR 90S.

FAMILY OR BUSINESS RELATIONSHIPS

FORM 990, PART VI, SECTION A, LINE 2:

TRUSTEES JULIE PACKARD AND SUSAN ORR ARE SISTERS. CHRIS SCHOLIN, A TRUSTEE, IS THE CEO OF MONTEREY BAY AQUARIUM RESEARCH INSTITUTE ("MBARI"), OF WHICH JULIE PACKARD AND BARBARA WRIGHT ARE BOARD MEMBERS.

FORM 990 REVIEW PROCESS

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

Name of the organization MONTEREY BAY AQUARIUM FOUNDATION	Employer identification number 94-2487469
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THE FORM 990 IS PREPARED BY GRANT THORNTON LLP BASED ON AUDITED FINANCIAL STATEMENTS AND WITH THE ASSISTANCE OF THE AQUARIUM'S FINANCE AND ACCOUNTING STAFF. THE FINAL DRAFT OF THE FORM 990 IS REVIEWED BY THE CFO AND THE EXECUTIVE DIRECTOR. UPON ACCEPTANCE OF THE DRAFT BY THE CFO AND EXECUTIVE DIRECTOR, THE DRAFT FORM 990 IS DELIVERED TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES, WHICH REVIEWS THE DRAFT AND DIRECTS COMMENTS AND QUESTIONS TO THE CFO AND EXECUTIVE DIRECTOR. FINALLY, THE BOARD RECEIVES A COPY OF THE FINAL VERSION OF THE FORM 990 PRIOR TO FILING.

MONITORING AND ENFORCEMENT OF CONFLICT OF INTEREST POLICY

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

THE AQUARIUM REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICIES.

TRUSTEES AND OFFICERS CONFLICT OF INTEREST POLICY -- THE EXECUTIVE DIRECTOR'S OFFICE ASSURES THAT ALL DISCLOSURES FORMS (AND MITIGATION PLANS, IF APPLICABLE) HAVE BEEN RECEIVED BY JANUARY 31 OF EACH YEAR FROM ALL TRUSTEES AND OFFICERS, PREPARES A SUMMARY OF DISCLOSURES, AND FORWARDS THE COMPLETED FORMS AND THE SUMMARY TO THE AQUARIUM'S CONFLICTS REVIEW PANEL, CONSISTING OF THE EXECUTIVE DIRECTOR, LEGAL COUNSEL, VP OF HUMAN RESOURCES, AND CHIEF FINANCIAL OFFICER ("CFO"). TRUSTEES AND OFFICERS ALSO ACKNOWLEDGE RECEIPT AND UNDERSTANDING OF THE AQUARIUM'S COI POLICY IN CONJUNCTION WITH PROVIDING THE ANNUAL DISCLOSURES. FOLLOWING REVIEW BY THE PANEL, THE PANEL'S FINDINGS AND THE DISCLOSURES ARE PROVIDED TO THE BOARD'S AUDIT COMMITTEE, WHICH REVIEWS THE DISCLOSURES

Name of the organization

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AND MAKES A REPORT TO THE BOARD AT ITS MARCH BOARD MEETING. BOTH THE PANEL AND THE AUDIT COMMITTEE ANNUALLY EVALUATE THE EFFECTIVENESS OF THE PROCESS. THE CFO ASSURES APPROPRIATE REPORTING TO THE EXTERNAL AUDITORS AND TAX FILINGS PREPARER. TRUSTEES AND OFFICERS HAVE A CONTINUING DUTY TO MAKE ADDITIONAL DISCLOSURES THROUGHOUT THE YEAR IF WARRANTED.

EMPLOYEES CODE OF ETHICAL CONDUCT POLICY -- THE VP OF HUMAN RESOURCES FORWARDS THE CODE, WHICH INCLUDES A SECTION ON CONFLICTS OF INTEREST, TO ALL MANAGERS IN EARLY JANUARY EACH YEAR, AND ASSURES THAT EACH MANAGER RESPONDS THAT THEY HAVE READ IT AND ARE IN COMPLIANCE BY JANUARY 31. MANAGERS ARE ALSO REQUIRED TO DISCLOSE ANY INTERESTS WHICH COULD GIVE RISE TO CONFLICT, AND TO ASSURE THAT ANY STAFF IN THEIR AREAS WITH INTERESTS WHICH COULD GIVE RISE TO CONFLICT HAS DONE THE SAME. DISCLOSURES (AND MITIGATION PLANS, IF APPLICABLE) ARE REVIEWED BY THE EXECUTIVE DIRECTOR, VP OF HUMAN RESOURCES AND CFO BY MARCH. THIS TEAM ALSO EVALUATES THE EFFECTIVENESS OF THE PROCESS. THE CFO ASSURES APPROPRIATE REPORTING TO THE EXTERNAL AUDITORS AND TAX FILINGS PREPARER. EMPLOYEES HAVE A CONTINUING DUTY TO MAKE ADDITIONAL DISCLOSURES THROUGHOUT THE YEAR IF WARRANTED.

PROCESS FOR DETERMINING COMPENSATION

FORM 990, PART VI, SECTION B, LINES 15A AND 15B:

THE BOARD OF TRUSTEES MAINTAINS A PERFORMANCE EVALUATION PROCESS FOR THE CHIEF EXECUTIVE OFFICER, REFERRED TO AS THE EXECUTIVE DIRECTOR, WHO IS A MEMBER OF THE BOARD. THE BOARD'S EXECUTIVE COMPENSATION COMMITTEE, COMPRISED OF INDEPENDENT DIRECTORS, REVIEWS THE CEO'S PERFORMANCE WITH

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INPUT FROM THE OTHER BOARD MEMBERS, AND RECOMMENDS THE COMPENSATION OF THE CEO TO THE BOARD. THE COMMITTEE OBTAINS AND REVIEWS MARKET SURVEY DATA FROM SEVERAL INDEPENDENT ORGANIZATIONS CONTAINING DATA FOR COMPARABLE POSITIONS AT COMPARABLE ORGANIZATIONS. THE COMMITTEE PROVIDES THE PERFORMANCE REVIEW AND COMPARABLE SALARY INFORMATION TO THE BOARD AND RECOMMENDS THE CEO'S COMPENSATION. BASED UPON THE PERFORMANCE REVIEW AND COMPARABLE SALARY INFORMATION, THE INDEPENDENT MEMBERS OF THE BOARD DETERMINE THAT THE COMPENSATION IS FAIR, JUST AND REASONABLE AND THEN APPROVES TOTAL COMPENSATION FOR THE CEO.

THE BOARD DELEGATES TO THE EXECUTIVE COMPENSATION COMMITTEE THE PERFORMANCE REVIEW AND COMPENSATION APPROVAL OF THE CFO, WHO IS NOT A MEMBER OF THE BOARD, AND ANY OTHER OFFICERS OR SENIOR STAFF WHO ARE HIGHLY COMPENSATED. BASED UPON THE PERFORMANCE REVIEW AND COMPARABLE SALARY INFORMATION, THE COMMITTEE DETERMINES THAT THE COMPENSATION IS FAIR, JUST AND REASONABLE AND APPROVES TOTAL COMPENSATION FOR THE CFO AND ALL OTHER KEY EMPLOYEES.

IN EACH CASE, THE REVIEW AND APPROVAL IS CONTEMPORANEOUSLY DOCUMENTED IN THE MINUTES OF THE COMMITTEE AND THE BOARD, RESPECTIVELY.

DOCUMENTS MADE AVAILABLE TO THE PUBLIC  
FORM 990, PART VI, SECTION C, LINE 19:

THE AQUARIUM MAKES ITS AUDITED FINANCIAL STATEMENTS AND FORM 990 FOR THE MOST RECENT THREE YEARS AVAILABLE TO THE PUBLIC BY POSTING ON ITS WEBSITE. THE CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE

Name of the organization

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PROVIDED UPON REQUEST WITHIN TWO BUSINESS DAYS.

## OTHER CHANGES IN NET ASSETS

FORM 990, PART XI, LINE 9:

UNREALIZED LOSS ON INTEREST IN CHARITABLE REMAINDER TRUSTS: \$(28,902)

ATTACHMENT 1FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
GUEST SERVICES - SEE SCHEDULE O	81,230.	17,536,991.	0.
TOTALS	<u>81,230.</u>	<u>17,536,991.</u>	<u>0.</u>

ATTACHMENT 2990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
IMPACTS RESEARCH AND DEVELOPMENT 3720 FALCON RIDGE DRIVE MEDINA, OH 44256	ADVERTISING	3,273,093.
CHEMISTRY CLUB 451 PACIFIC AVENUE SAN FRANCISCO, CA 94133	ADVERTISING	2,793,912.
STOCKER & ALLAIRE 21 MANDEVILLE CT MONTEREY, CA 93940	CONSTRUCTION	715,359.
SAN JOSE CONSTRUCTION COMPANY 1000 MUNRAS AVE, STE 100 MONTEREY, CA 93940	CONSTRUCTION	766,601.
MARK CAVAGNERO ASSOCIATES 1045 SANSOME ST, STE 200 SAN FRANCISCO, CA 94111	ARCHITECT	756,610.

ATTACHMENT 3

Name of the organization

MONTEREY BAY AQUARIUM FOUNDATION

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ATTACHMENT 3 (CONT'D)FORM 990, PART IX - OTHER FEES

<u>DESCRIPTION</u>	(A) <u>TOTAL FEES</u>	(B) <u>PROGRAM SERVICE EXP.</u>	(C) <u>MANAGEMENT AND GENERAL</u>	(D) <u>FUNDRAISING EXPENSES</u>
OUTSIDE SERVICES	7,723,201.	7,179,024.	414,098.	130,079.
OTHER FEES	819,861.	338,396.	418,822.	62,643.
TOTALS	<u>8,543,062.</u>	<u>7,517,420.</u>	<u>832,920.</u>	<u>192,722.</u>

**SCHEDULER (Form 990)**

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

Name of the organization  
MONTEREY BAY AQUARIUM FOUNDATION

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**Part I Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(1)	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section (if section 501(c)(3))	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	MONTEREY BAY AQUARIUM SUPPORT SERVICES 99 PACIFIC STREET MONTEREY, CA 93940 77-0569564	PROPERTY MGMT	CA	501(C)(3)	11-I	MBAF	X	
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

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

Schedule R (Form 990) 2015

USA

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**Part III** Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

**Part IV** Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
  - a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity. . . . .  1a  1b  1c  1d  1e
  - b Gift, grant, or capital contribution to related organization(s) . . . . .  1a  1b  1c  1d  1e
  - c Gift, grant, or capital contribution from related organization(s) . . . . .  1a  1b  1c  1d  1e
  - d Loans or loan guarantees to or for related organization(s) . . . . .  1a  1b  1c  1d  1e
  - e Loans or loan guarantees by related organization(s) . . . . .  1a  1b  1c  1d  1e

- f Dividends from related organization(s) . . . . .  1f  1g  1h  1i  1j
- g Sale of assets to related organization(s) . . . . .  1f  1g  1h  1i  1j
- h Purchase of assets from related organization(s) . . . . .  1f  1g  1h  1i  1j
- i Exchange of assets with related organization(s) . . . . .  1f  1g  1h  1i  1j
- j Lease of facilities, equipment, or other assets to related organization(s) . . . . .  1k  1l  1m  1n  1o

- k Lease of facilities, equipment, or other assets from related organization(s) . . . . .  1k  1l  1m  1n  1o
- l Performance of services or membership or fundraising solicitations for related organization(s) . . . . .  1p  1q  1r  1s
- m Performance of services or membership or fundraising solicitations by related organization(s) . . . . .  1p  1q  1r  1s
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .  1p  1q  1r  1s
- o Sharing of paid employees with related organization(s) . . . . .  1p  1q  1r  1s

- p Reimbursement paid to related organization(s) for expenses. . . . .  1p  1q  1r  1s
- q Reimbursement paid by related organization(s) for expenses . . . . .  1p  1q  1r  1s
- r Other transfer of cash or property to related organization(s) . . . . .  1p  1q  1r  1s
- s Other transfer of cash or property from related organization(s) . . . . .  1p  1q  1r  1s

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	Yes No	
					Yes	No
(1)	MONTEREY BAY AQUARIUM SUPPORT SERVICES	C	249,546.	RECORDED VALUE		
(2)						
(3)						
(4)						
(5)						
(6)						

**Part VI** **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
					Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

**Part VII Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).