

Complaint Description

Glen Morgan reported via the portal Mon, 12 August 2019 at 8:13AM

To whom it may concern,

It has come to my attention that The Seattle Aquarium has committed significant and serious violations of Washington State's Campaign Finance Laws (**RCW 42.17A**).

1) Failure to register as an "Incidental Committee" (Violation of RCW 42.17A.207)

With the passage of the Disclose Act by the Washington State legislature, non-profit organizations like this must formally register with the PDC and disclose their top 10 contributors if they donate more than \$25,000 in a year. However, nowhere can this information be discovered or found on the PDC's website. It appears this non-profit organization has failed to comply with the law. Please note, there are two different non-profit registrations with the Secretary of State's office (both are attached for reference). It is not certain which or whether it was both non-profits committed this violation, however, regardless, either organization would be required to comply with this law. This is a serious violation, and even if this information is provided late (after receiving complaints), it does not change the fact this information was entirely missing during the recent political campaign season.

In this case, the Seattle Aquarium violated the law by making over-limit contributions to multiple political campaigns. They donated \$25,500 (**See attached PDC Report # 100901695**) to the Cultural Access Washington PAC. Then they made two donations to the Yes on KC Prop 1 PAC, this first one for \$35,000 on June 7, 2019 (**See attached PDC Report # 100908589**) and the second one for \$25,000 on July 17, 2019 (**See attached PDC Report # 100918803**). At a minimum, this is \$85,500 in unreported "dark money" (according to the sponsors of the Disclose Act of 2018). Failure to register as an incidental committee, and failure to accurately report all the required information to the PDC for the public to view in those reports is a clear and unambiguous violation of the statute.

When Democrat Senator Andy Billig from Spokane sponsored the Disclose Act of 2018, along with the rest of the State Democrat Caucus, they were clearly concerned about the corrupt and dark money transfers from organizations just like this one which has willfully and unambiguously violated Washington State's campaign finance laws which are merely attempting to keep dark, secretive money like this out of politics. Fortunately, for the good of all humanity, this law was passed and now secretive, dark money organizations like this one can finally be exposed for their nefarious secretive funding efforts and they too can be exposed to the joys and wonder of Washington State's campaign finance laws.

Please feel free to contact me if you need additional information.

Best Regards,

Glen Morgan

100918803 - C3 - 25k don - Sea A to Yes on KC Prop 1.pdf
23.06 KB

100908589 - C3 - 35k don - Seatte Aquarium to Yes on KC Prop 1.pdf
23.11 KB

100901695 - C3 - 25.5k don - Seattle A to Cultural Access WA.pdf
23.11 KB

SOS - Sea Aquarium - NP - 2nd one.pdf
40.61 KB

SOS - Sea Aquarium - NP report.pdf
33.94 KB

Tabatha Blacksmith replied Thurs, 15 August 2019 at 10:02AM
to: glen@wethegoverned.com

Glen Morgan,

The PDC Compliance staff has reviewed your complaint concerning allegations that The Seattle Aquarium (the "Respondent") may have violated [RCW 42.17A.207](#) by failing to register and report as an incidental committee.

For your information, the registration requirements for an incidental committee contain two prongs, that include: (1) the Respondent/non-profit organization must have made at least \$25,000 in the aggregate in monetary contributions, in-kind contributions, or any payment made in the current calendar year in any election campaign, or to any political committee registered in Washington State; and (2) the Respondent/non-profit organization must disclose the payments/donations received from a single source in the current calendar year, which in the aggregate totals at least \$10,000 or more. Please review the [Incidental Committee Instructions: Who Must Register](#), and [Incidental Committee Instructions: What to Report](#).

In accordance with the PDC rules for processing a complaint ([WAC 390-37-040\(2\)\(b\)](#) and [\(2\)\(f\)](#)), and the statute for an incidental committee, please provide PDC staff with evidence supporting the allegations that the Respondent/non-profit organization received

payments/donations from a single source, which in the aggregate total at least \$10,000 or more from that source, in the current calendar year.

Please provide this evidence by **8/22/19** or staff will close this complaint without taking further action.

Thank you,

Tabatha Blacksmith
Compliance Coordinator
360.586.8929



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Washington State law established email as the PDC's official means of communication as of June 7th, 2018 (RCW 42.17A.055). Filers have a duty to amend their reports within 10 days of any material changes, such as new email addresses. Please ensure your email address is up to date.

To respond, please reply to this email.

Washington Public Disclosure Commission

<http://www.pdc.wa.gov>

1.360.753.1111

Glen Morgan replied Thurs, 15 2019 at 1:34PM

to: "PDC Support" pdc@pdc.wa.gov

Tabatha,

I've attached a variety of documents which support the certain fact that this non-profit has donors in excess of \$10,000.

First, I've attached a 2017 - Form 990 submitted by this organization by the Seattle Aquarium to the IRS. I was unable to find a more recent 990, but this is representative of the 990s this organization has filed over the past 5 years or so. Unless there has been a significant change, then the data provided here should be very similar to the donor profiles they currently have.

Secondly, I've attached the Charity Navigator report on this organization

Thirdly, I've attached, from the Seattle Aquarium's own website, their list of donor level memberships - one of these membership levels start at \$10,000, and the other starts at \$25,000

Approximately 56.6% of the revenue to this organization (see Charity Navigator report) comes from large donations - this includes about \$3 million in large donations. Some of these donations are larger than \$10,000, although it is hard to ascertain exactly how many.

According to the Seattle Aquarium's own website and donor level membership reports, there are at a minimum, two published donor level memberships above the reportable level according to the Disclose Act. The Aquarium has members in both these categories, and every member in either category would be obligated to be disclosed under Andy Billig's Disclose Act requirements.

It is statistically unlikely, if not impossible, with this simple set of publicly available information to know that there are a number of donors to this organization over \$10,000 in the \$3 million + of large dollar donations to this organization.

Keep in mind, according to the 990s submitted by this organization to the IRS, there are also reports of a \$500,000 loan to a staff member, which appears to have a re-payment schedule to the Aquarium which would also produce annual revenue in excess of the \$10,000 minimum reporting threshold.

Additionally, the question of the government grants, which this organization also receives would count, by definition, if they exceed \$10,000 as reportable donations which need to be disclosed on the Incidental Committee report filed with the PDC.

I am curious, in this case, if it is now the PDC policy to not ask or confirm with the organizations required to report under the Disclose Act whether they have any donors over \$10,000? This would be new policy for the PDC to refuse to even ask for a response from the organization, and it is unclear how this specific policy would be adopted by PDC staff without formal approval or review. If you could inform me of this PDC staff policy change, and the history of this change as it applies to those who receive PDC complaints, that would be great.

However, clearly the preponderance of the evidence presented here would indicate that this non-profit organization which reports 8-figure annual revenues including millions in large dollar donations has a sizeable number of \$10,000+ donors, which is clearly why they have established two different membership levels of \$10,000 and \$25,000 respectively. All members in those two member categories would have to be reported to the PDC.

Best Regards,

Glen Morgan

2017 Form 990 Public Disclosure Copy.pdf
498.77 KB

Charity Navigator.pdf

808.25 KB

Levels of Membership.pdf

312.65 KB

What impact does the alleged violation(s) have on the public?

The public has been greatly harmed by this non-profit's failure to properly follow the law and disclose the original sources of this "dark money" which is being injected into the political process. This organization has concealed information from the public, which the public must know, and these are substantial sums of political dark money.

List of attached evidence or contact information where evidence may be found

see attached

List of potential witnesses with contact information to reach them

The board of directors, treasurer, and any major donors who were trying to conceal their involvement.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that information provided with this complaint is true and correct to the best of my knowledge and belief.

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100918803
 07-22-2019

Candidate or Committee Name (Do not abbreviate. Use full name.)
Yes on KC Prop 1

Mailing Address
119 1ST AVE S STE 320

City **SEATTLE, WA** Zip + 4 **98104** Office Sought (candidates) Election Date **2019**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c).....		
	c. Loans, notes, security agreements. Attach Schedule L		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
	e. Small contributions \$25.00 or less not itemized and number of persons giving _____ (persons)		

2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
07/16/19	SEATTLE AQUARIUM 1483 Alaskan Way Pier 59 Seattle, WA 98101				\$25,000.00	\$40,000.00
	Occupation					
07/16/19	REI PO Box 1938 Sumner, WA 98390				\$5,000.00	\$5,000.00
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$30,000.00	*See reverse for details.
		Amount from attached pages			\$0.00	

3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT
 Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4.

\$30,000.00

4. Date of Deposit **07/19/19**

Treasurer's Daytime Telephone No.: **(206) 682-7328**

I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature **JAY PETERSON** Date **07-22-2019**

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100908589
 06-10-2019

Candidate or Committee Name (Do not abbreviate. Use full name.)
Yes on KC Prop 1

Mailing Address
119 1ST AVE S STE 320

City **SEATTLE, WA** Zip + 4 **98104** Office Sought (candidates) **CITY COUNCIL MEMBER** Election Date **2019**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c).....		
	c. Loans, notes, security agreements. Attach Schedule L		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
	e. Small contributions \$25.00 or less not itemized and number of persons giving _____ (persons)		

2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
06/07/19	SEATTLE AQUARIUM 1483 Alaskan Way Pier 59 Seattle, WA 98101		X		\$35,000.00	\$35,000.00
	Occupation					
06/05/19	FORTERRA 901 5th Ave Ste 2200 Seattle, WA 98164				\$1,500.00	\$1,500.00
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$36,500.00	*See reverse for details.
		Amount from attached pages			\$0.00	

3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT
 Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4.

\$36,500.00

4. Date of Deposit **06/07/19**

Treasurer's Daytime Telephone No.: **(206) 682-7328**

I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature **JAY PETTERSON Petterson** Date **06-10-2019**

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100901695
 05-07-2019

Candidate or Committee Name (Do not abbreviate. Use full name.)
Cultural Access Washington

Mailing Address
PO Box 806

City: **Seattle, WA** Zip + 4: **98111** Office Sought (candidates): _____ Election Date: **2019**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c).....		
	c. Loans, notes, security agreements. Attach Schedule L		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
04/01/19	e. Small contributions \$25.00 or less not itemized and number of persons giving <u>1</u> (persons)	\$25.00	

2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
04/04/19	SEATTLE AQUARIUM 1483 ALASKAN WAY SEATTLE, WA 98101				\$25,500.00	\$25,500.00
	Occupation					
04/04/19	VASHON CENTER FOR THE ARTS PO BOX 576 VASHON, WA 98070				\$2,828.00	\$2,828.00
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$28,353.00	*See reverse for details.
		Amount from attached pages			\$0.00	

3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT
 Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4.

\$28,353.00

4. Date of Deposit: **04/04/19**

Treasurer's Daytime Telephone No.: **(206) 382-5552**

I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature: **Richard Beckerman** Date: **05-07-2019**

BUSINESS INFORMATION

Business Name:

THE SEATTLE AQUARIUM SOCIETY (SEAS)

UBI Number:

601 024 366

Business Type:

WA NONPROFIT CORPORATION

Business Status:

ACTIVE

Principal Office Street Address:

1483 ALASKAN WAY PIER 59, SEATTLE, WA, 98101-2015, UNITED STATES

Principal Office Mailing Address:

Expiration Date:

03/31/2020

Jurisdiction:

UNITED STATES, WASHINGTON

Formation/ Registration Date:

03/09/1982

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

SUPPORT THE AQUARIUM IN ITS MISSION, INSPIRING CONSERVATION OF MARINE ENVIRONMENT.

REGISTERED AGENT INFORMATION

Registered Agent Name:

CORPSERVE, INC.

Street Address:

1001 4TH AVE STE 4500, SEATTLE, WA, 98154, UNITED STATES

Mailing Address:

GOVERNORS

Title	Governors Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		BOB	DONEGAN
GOVERNOR	INDIVIDUAL		MELISSA	MAGER
GOVERNOR	INDIVIDUAL		KARISSA	MARKER
GOVERNOR	INDIVIDUAL		ERIN	LETEY
GOVERNOR	INDIVIDUAL		ROBERT	DAVIDSON
GOVERNOR	INDIVIDUAL		JESUS	AGUIRRE
GOVERNOR	INDIVIDUAL		KEVIN	BLAIR
GOVERNOR	INDIVIDUAL		ANDREW	BLEIMAN
GOVERNOR	INDIVIDUAL		JOHN	BRADEN
GOVERNOR	INDIVIDUAL		BILL	CHAPIN
GOVERNOR	INDIVIDUAL		CARY	CLARK
GOVERNOR	INDIVIDUAL		PATTI	DILL
GOVERNOR	INDIVIDUAL		TERREN	DRAKE

Title	Governors Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		WILLIAM	EINSTEIN
GOVERNOR	INDIVIDUAL		SUSAN	GATES
GOVERNOR	INDIVIDUAL		EFFIE	GLEASON
GOVERNOR	INDIVIDUAL		LISA	GRAUMLICH
GOVERNOR	INDIVIDUAL		PHILIP	GUESS
GOVERNOR	INDIVIDUAL		MICHAEL	GUIDON
GOVERNOR	INDIVIDUAL		JAMES	GURKE
GOVERNOR	INDIVIDUAL		DAN	GUY III
GOVERNOR	INDIVIDUAL		WENDY	JONES
GOVERNOR	INDIVIDUAL		STEPHANIE	KORNBLUM
GOVERNOR	INDIVIDUAL		MARK	KRAMER
GOVERNOR	INDIVIDUAL		KATHERINE	KROGSLUND
GOVERNOR	INDIVIDUAL		GARY	KUNIS
GOVERNOR	INDIVIDUAL		NATALYA	LEAHY
GOVERNOR	INDIVIDUAL		LISA	LUTHER
GOVERNOR	INDIVIDUAL		DAVE	MAGEE
GOVERNOR	INDIVIDUAL		J. TERRY	MCLAUGHLIN
GOVERNOR	INDIVIDUAL		TOMOKO	MORIGUCHI-MATSUNO
GOVERNOR	INDIVIDUAL		ROBERT	POWER
GOVERNOR	INDIVIDUAL		MICHAEL	PURPURA
GOVERNOR	INDIVIDUAL		NATHAN	RAUSCHENBERG
GOVERNOR	INDIVIDUAL		STUART	ROLFE
GOVERNOR	INDIVIDUAL		CASEY	SCHUCHART

Title	Governors Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		IVAN	SEDA
GOVERNOR	INDIVIDUAL		CHRISTIAN	SINDERMAN
GOVERNOR	INDIVIDUAL		GARY	SMITH
GOVERNOR	INDIVIDUAL		GARY	SMITH
GOVERNOR	INDIVIDUAL		MICHAEL	TRZUPEK
GOVERNOR	INDIVIDUAL		ALEX	WASHBURN
GOVERNOR	INDIVIDUAL		CARLA	WIGEN
GOVERNOR	INDIVIDUAL		CHRISTOPHER	WILLIAMS
GOVERNOR	INDIVIDUAL		GEORGE	WILLOUGHBY
GOVERNOR	INDIVIDUAL		CHARLES	WRIGHT
GOVERNOR	INDIVIDUAL		SUSIE	WYCKOFF

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BUSINESS INFORMATION

Business Name:

THE GREATER SEATTLE AQUARIUM SOCIETY

UBI Number:

602 390 013

Business Type:

WA NONPROFIT CORPORATION

Business Status:

ACTIVE

Principal Office Street Address:

3411 60TH AVE SW, SEATTLE, WA, 98116, UNITED STATES

Principal Office Mailing Address:

3411 60TH AVE SW, SEATTLE, WA, 98116-3010, UNITED STATES

Expiration Date:

04/30/2020

Jurisdiction:

UNITED STATES, WASHINGTON

Formation/ Registration Date:

04/26/2004

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

BENEVOLENT, THE SOCIETY PROMOTES INTEREST IN THE AQUARIUM HOBBY, AND PROVIDES A FORUM FOR THE EXCHANGE OF INFORMATION AMONG HOBBYISTS.

REGISTERED AGENT INFORMATION

Registered Agent Name:

CHRISTIANE RANEGGER

Street Address:

3411 60TH AVE SW, SEATTLE, WA, 98116-0000, UNITED STATES

Mailing Address:

GOVERNORS

Title	Governors Type	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		MICHAEL	WARD
GOVERNOR	INDIVIDUAL		ROY	SLETTEVOLD
GOVERNOR	INDIVIDUAL		ERIK	OLSON
GOVERNOR	INDIVIDUAL		CHRISTIANE	RANEGGER
GOVERNOR	INDIVIDUAL		STEEV	WARD
GOVERNOR	INDIVIDUAL		JAY	GEILER

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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2017

Open to Public Inspection

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE SEATTLE AQUARIUM SOCIETY		D Employer identification number 91-1189249
	Doing business as SEATTLE AQUARIUM		E Telephone number 206-386-4300
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	1483 ALASKAN WAY		G Gross receipts \$ 20,044,780.
	City or town, state or province, country, and ZIP or foreign postal code SEATTLE, WA 98101-2015		
F Name and address of principal officer: ROBERT DAVIDSON SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number	

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: WWW.SEATTLEAQUARIUM.ORG

K Form of organization: Corporation Trust Association Other **L** Year of formation: 1982 **M** State of legal domicile: WA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: INSPIRE CONSERVATION OF OUR MARINE ENVIRONMENT.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	46
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	45
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	217
	6 Total number of volunteers (estimate if necessary)	6	1288
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	4,504,549.	5,321,730.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11,854,616.	12,904,827.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,874.	2,628.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	949,876.	1,109,304.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	17,310,915.	19,338,489.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	5,000.	66,411.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	10,469,439.	10,732,954.
	b Total fundraising expenses (Part IX, column (D), line 25)	33,750.	53,703.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,467,916.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,248,847.	6,008,704.
19 Revenue less expenses. Subtract line 18 from line 12	16,757,036.	16,861,772.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	553,879.	2,476,717.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	8,761,646.	12,323,764.
		1,668,505.	2,946,970.
		7,093,141.	9,376,794.

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	RICK JOHNSON, DIR. OF FINANCE & ADMIN. Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	SARA ELIZABETH J. HYRE	SARA ELIZABETH J. HYRE	11/05/18		P00235495
	Firm's name	Firm's EIN			
	CLARK NUBER, PS	91-1194016			
	Firm's address	Phone no.			
	10900 NE 4TH STREET, SUITE 1400 BELLEVUE, WA 98004	425-454-4919			

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE SOCIETY SUPPORTS THE SEATTLE AQUARIUM IN ITS MISSION TO INSPIRE CONSERVATION OF OUR MARINE ENVIRONMENT.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 13,019,580. including grants of \$ 66,411.) (Revenue \$ 12,904,827.) SINCE OPENING ON MAY 20, 1977, THE SEATTLE AQUARIUM HAS BEEN AN INTEGRAL PART OF THE CITY AND THE REGION, PROVIDING A PLATFORM FOR ENTERTAINMENT, EDUCATION AND CONSERVATION. VISITORS OF ALL AGES FROM NEAR AND FAR COME TO THE SEATTLE AQUARIUM TO SEE UP CLOSE OUR CHARISMATIC COLLECTION OF ANIMALS, INCLUDING SEA OTTERS AND OCTOPUSES, AND TO DISCOVER THE WONDERS OF OUR OCEANS. THE AQUARIUM HAS PLAYED HOST TO NEARLY 28 MILLION VISITORS, MORE THAN 850,000 VISITORS EACH YEAR SINCE 2015, AND CONTINUES TO INSPIRE CONSERVATION OF OUR MARINE ENVIRONMENT.

CONTINUED ON SCHEDULE O

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 13,019,580.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>	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? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	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	
22	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
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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
26	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	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30	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
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	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
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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>		
36	Section 501(c)(3) organizations. 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
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. 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

Input box for Schedule O check

Main table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical input fields. Includes questions about Form 1096, Form W-2G, Form W-3, foreign accounts, and charitable contributions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
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?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed NONE
- 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.
 Own website Another's website 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:
 APRIL HENDERSON - 206-693-6116
 1483 ALASKAN WAY, SEATTLE, WA 98101-2015

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 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) BOB C. DONEGAN CHAIRMAN	3.00	X		X				0.	0.	0.
(2) RANDY J. TINSETH IMMEDIATE PAST CHAIR	3.00	X		X				0.	0.	0.
(3) NEAL HOLLAND TREASURER	3.00	X		X				0.	0.	0.
(4) ERIN J. LETEY SECRETARY	3.00	X		X				0.	0.	0.
(5) TED ACKERLEY DIRECTOR THRU 02/17	3.00	X						0.	0.	0.
(6) JESUS AGUIRRE DIRECTOR	3.00	X						0.	0.	0.
(7) WILLIAM C. ARNTZ DIRECTOR	3.00	X						0.	0.	0.
(8) JOHN C. BLACKMAN DIRECTOR THRU 05/17	3.00	X						0.	0.	0.
(9) KEVIN L. BLAIR DIRECTOR	3.00	X						0.	0.	0.
(10) ANDREW BLEIMAN DIRECTOR	3.00	X						0.	0.	0.
(11) JOHN R. BRADEN DIRECTOR	3.00	X						0.	0.	0.
(12) CARY CLARK DIRECTOR	3.00	X						0.	0.	0.
(13) KEN COLLINS DIRECTOR THRU 04/17	3.00	X						0.	0.	0.
(14) CRAIG DAVISON DIRECTOR	3.00	X						0.	0.	0.
(15) PATTI DILL DIRECTOR	3.00	X						0.	0.	0.
(16) WILLIAM T. EINSTEIN DIRECTOR	3.00	X						0.	0.	0.
(17) GARY KUNIS DIRECTOR	3.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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			
(18) SUSAN L. GATES DIRECTOR	3.00	X						0.	0.	0.
(19) PHILIP M. GUESS DIRECTOR	3.00	X						0.	0.	0.
(20) JAMES C. GURKE DIRECTOR	3.00	X						0.	0.	0.
(21) DAN M. GUY, III DIRECTOR	3.00	X						0.	0.	0.
(22) BRIAN J. HILL DIRECTOR	3.00	X						0.	0.	0.
(23) WENDY JONES DIRECTOR	3.00	X						0.	0.	0.
(24) STEPHANIE KORNBLOM DIRECTOR	3.00	X						0.	0.	0.
(25) MARK E. KRAMER DIRECTOR	3.00	X						0.	0.	0.
(26) KATHERINE A. KROGSLUND DIRECTOR	3.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,295,865.	0.	81,539.
d Total (add lines 1b and 1c)								1,295,865.	0.	81,539.

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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
LMN ARCHITECTS 801 2ND AVE, SUITE 501, SEATTLE, WA 98104	ARCHITECTS	530,326.
1415 WESTERN LLC, 1450 114TH AVE SE, SUITE 205, BELLEVUE, WA 98004	RENTAL OFFICE	325,591.
POINT32 SERVICES LLC 1122 E PIKE ST #883, SEATTLE, WA 98122	PROJECT MANAGEMENT	157,667.
NOVO PAINTING & PROPERTY SERVICES 312 NW 40TH STREET, SEATTLE, WA 98107	PAINTING	117,807.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 4

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(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			
(27) LISA GRAUMLICH, PH.D DIRECTOR	3.00	X						0.	0.	0.
(28) LISA SCHAFFER DIRECTOR	3.00	X						0.	0.	0.
(29) LISA C. LUTHER DIRECTOR	3.00	X						0.	0.	0.
(30) DAVE MAGEE DIRECTOR	3.00	X						0.	0.	0.
(31) MELISSA MAGER DIRECTOR	3.00	X						0.	0.	0.
(32) KARISSA A. MARKER DIRECTOR	3.00	X						0.	0.	0.
(33) LISA MCCABE DIRECTOR	3.00	X						0.	0.	0.
(34) TERRY J. MCLAUGHLIN DIRECTOR	3.00	X						0.	0.	0.
(35) NATALYA LEAHY DIRECTOR	3.00	X						0.	0.	0.
(36) ROBERT W. POWER DIRECTOR	3.00	X						0.	0.	0.
(37) MICHAEL PURPURA DIRECTOR	3.00	X						0.	0.	0.
(38) NATHAN RAUSCHENBERG DIRECTOR	3.00	X						0.	0.	0.
(39) STUART T. ROLFE DIRECTOR	3.00	X						0.	0.	0.
(40) CASEY J. SCHUCHART DIRECTOR	3.00	X						0.	0.	0.
(41) CHRISTIAN SINDERMAN DIRECTOR	3.00	X						0.	0.	0.
(42) GARY S. SMITH DIRECTOR	3.00	X						0.	0.	0.
(43) GARY T. SMITH DIRECTOR	3.00	X						0.	0.	0.
(44) AMY SPRANGERS DIRECTOR THRU 05/17	3.00	X						0.	0.	0.
(45) ERIC STEINWINDER DIRECTOR	3.00	X						0.	0.	0.
(46) MICHAEL TRZUPEK DIRECTOR	3.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	1,474,980.				
	c Fundraising events	1c	821,361.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	10,948.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,014,441.				
	g Noncash contributions included in lines 1a-1f: \$		383,718.				
	h Total. Add lines 1a-1f		5,321,730.				
Program Service Revenue	2 a <u>ADMISSION FEES</u>	Business Code 712130	12,748,720.	12,748,720.			
	b <u>CAMPS & EDUC EVENTS</u>	713990	156,107.	156,107.			
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		12,904,827.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,118.			1,118.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		2,336.			2,336.	
	6 a Gross rents	(i) Real	1,419,074.				
		(ii) Personal					
		b Less: rental expenses	170,500.				
		c Rental income or (loss)	1,248,574.				
	d Net rental income or (loss)		1,248,574.			1,248,574.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other		1,600.			
		b Less: cost or other basis and sales expenses	90.	0.			
		c Gain or (loss)	-90.	1,600.			
	d Net gain or (loss)		1,510.			1,510.	
	8 a Gross income from fundraising events (not including \$ 821,361. of contributions reported on line 1c). See Part IV, line 18	a	354,236.				
		b Less: direct expenses	532,502.				
c Net income or (loss) from fundraising events			-178,266.			-178,266.	
9 a Gross income from gaming activities. See Part IV, line 19	a	6,275.					
	b Less: direct expenses	3,199.					
	c Net income or (loss) from gaming activities		3,076.			3,076.	
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a REIMBURSEMENT	900099	17,624.			17,624.		
b GIFT SHOP	900099	5,008.			5,008.		
c ATM COMMISSIONS	900099	1,743.			1,743.		
d All other revenue	900099	9,209.			9,209.		
e Total. Add lines 11a-11d		33,584.					
12 Total revenue. See instructions.		19,338,489.	12,904,827.	0.	1,111,932.		

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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	66,411.	66,411.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	658,631.	358,856.	242,791.	56,984.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	7,305,377.	5,806,002.	815,604.	683,771.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	278,007.	219,344.	32,889.	25,774.
9 Other employee benefits	1,803,751.	1,395,439.	240,305.	168,007.
10 Payroll taxes	687,188.	530,639.	92,621.	63,928.
11 Fees for services (non-employees):				
a Management				
b Legal	10,843.	8,125.	2,718.	
c Accounting	63,083.	47,269.	15,814.	
d Lobbying	3,000.	1,500.	1,500.	
e Professional fundraising services. See Part IV, line 17	53,703.			53,703.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,061,944.	650,024.	216,469.	195,451.
12 Advertising and promotion	588,782.	559,032.	29,750.	
13 Office expenses	1,850,663.	1,298,450.	437,886.	114,327.
14 Information technology	153,031.	94,867.	45,594.	12,570.
15 Royalties				
16 Occupancy	80,752.	74,292.	6,460.	
17 Travel	139,598.	114,690.	19,359.	5,549.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	312,538.	251,012.	61,526.	
23 Insurance				
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 ANIMAL/OPERATING COSTS	663,928.	645,949.	16,371.	1,608.
b BANK FEES	426,361.	386,120.	40,241.	
c EQUIPMENT	279,256.	233,338.	39,975.	5,943.
d B&O TAXES	220,313.	220,313.		
e All other expenses	154,612.	57,908.	16,403.	80,301.
25 Total functional expenses. Add lines 1 through 24e	16,861,772.	13,019,580.	2,374,276.	1,467,916.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	2,968,390.	1	3,797,340.
	2 Savings and temporary cash investments	763,541.	2	763,009.
	3 Pledges and grants receivable, net	440,077.	3	1,643,172.
	4 Accounts receivable, net	429,969.	4	668,813.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	387,173.	9	355,132.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 7,585,054.		
	b Less: accumulated depreciation	10b 2,488,756.		
		3,772,496.	10c	5,096,298.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,761,646.	16	12,323,764.	
Liabilities	17 Accounts payable and accrued expenses	1,668,505.	17	2,446,970.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	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	500,000.
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26 Total liabilities. Add lines 17 through 25	1,668,505.	26	2,946,970.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,150,132.	27	5,309,294.
	28 Temporarily restricted net assets	2,943,009.	28	4,067,500.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	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 Total net assets or fund balances	7,093,141.	33	9,376,794.	
34 Total liabilities and net assets/fund balances	8,761,646.	34	12,323,764.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	19,338,489.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,861,772.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,476,717.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,093,141.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	-193,064.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,376,794.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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.	X	
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? _____		X
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 _____		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,647,525.	3,919,560.	3,230,503.	3,424,549.	5,321,730.	20,543,867.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			300,000.	1,080,000.		1,380,000.
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	4,647,525.	3,919,560.	3,530,503.	4,504,549.	5,321,730.	21,923,867.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						501,493.
6 Public support. Subtract line 5 from line 4.						21,422,374.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	4,647,525.	3,919,560.	3,530,503.	4,504,549.	5,321,730.	21,923,867.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	1,058,170.	1,142,908.	1,299,119.	1,278,961.	1,422,528.	6,201,686.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	3,562.	5,064.	8,433.	47,095.	33,584.	97,738.
11 Total support. Add lines 7 through 10						28,223,291.
12 Gross receipts from related activities, etc. (see instructions)					12	54,685,716.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	75.90 %
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	77.44 %
16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. 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 - 2016. 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 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
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)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. 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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	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?		
b A family member of a person described in (a) above?		
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.		
11a		
11b		
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.		
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.		
1		
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?		
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).		
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.		
1		
2		
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.		
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.		
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.		
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.		
2a		
2b		
3a		
3b		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount 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	Minimum Asset Amount (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	Distributable Amount. 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).		

Schedule A (Form 990 or 990-EZ) 2017

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 Total annual distributions. 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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

ATM COMMISSIONS

2013 AMOUNT: \$ 3,516.

2014 AMOUNT: \$ 2,186.

2015 AMOUNT: \$ 1,982.

2016 AMOUNT: \$ 2,009.

2017 AMOUNT: \$ 1,743.

VENDING MACHINE

2013 AMOUNT: \$ 46.

BOOK SALES/GIFT SHOP

2014 AMOUNT: \$ 1,760.

2015 AMOUNT: \$ 213.

2016 AMOUNT: \$ 3,762.

2017 AMOUNT: \$ 5,008.

MISCELLANEOUS

2014 AMOUNT: \$ 1,118.

2015 AMOUNT: \$ 4,386.

2016 AMOUNT: \$ 2,382.

2017 AMOUNT: \$ 9,209.

TRADE A/R WRITE-OFF

2015 AMOUNT: \$ 1,852.

REIMBURSEMENT

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

2016 AMOUNT: \$ 38,942.

2017 AMOUNT: \$ 17,624.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

THE SEATTLE AQUARIUM SOCIETY

Employer identification number

91-1189249

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization THE SEATTLE AQUARIUM SOCIETY	Employer identification number 91-1189249
---	---

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/> <hr/>	\$ 160,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/> <hr/>	\$ 1,018,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE SEATTLE AQUARIUM SOCIETY	Employer identification number 91-1189249
--	--

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization THE SEATTLE AQUARIUM SOCIETY	Employer identification number 91-1189249
--	--

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

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

- Section 501(c)(3) organizations: Complete Parts I-A and 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 <p style="text-align: center;">THE SEATTLE AQUARIUM SOCIETY</p>	Employer identification number <p style="text-align: center;">91-1189249</p>
---	---

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

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

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

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

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

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

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)	60,000.													
c	Total lobbying expenditures (add lines 1a and 1b)	60,000.													
d	Other exempt purpose expenditures	17,507,973.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	17,567,973.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">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.													
i	Subtract line 1f from line 1c. If zero or less, enter -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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total	
2a	Lobbying nontaxable amount	832,665.	922,836.	1,000,000.	1,000,000.	3,755,501.
b	Lobbying ceiling amount (150% of line 2a, column(e))					5,633,252.
c	Total lobbying expenditures	35,600.	12,000.	25,411.	60,000.	133,011.
d	Grassroots nontaxable amount	208,166.	230,709.	250,000.	250,000.	938,875.
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,408,313.
f	Grassroots lobbying expenditures			25,411.		25,411.

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
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).

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

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

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

Part IV Supplemental Information

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.

SCHEDULE C, PART II-A, LINE 1C;

OF THE \$60,000 LOBBYING EXPENDITURES, \$57,000 WAS CAPITALIZED.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization THE SEATTLE AQUARIUM SOCIETY **Employer identification number** 91-1189249

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

▶ \$ _____ 0.

(ii) Assets included in Form 990, Part X

▶ \$ _____ 28,000.

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

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? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
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 _____ %
- b Permanent endowment _____ %
- c Temporarily restricted endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,857,633.	781,466.	2,076,167.
d Equipment		1,859,894.	1,575,308.	284,586.
e Other		2,867,527.	131,982.	2,735,545.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				5,096,298.

Part VII Investments - Other Securities.

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

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

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. (Col. (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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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 XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements	1	19,476,300.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-32,689.
e	Add lines 2a through 2d	2e	-32,689.
3	Subtract line 2e from line 1	3	19,508,989.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-170,500.
c	Add lines 4a and 4b	4c	-170,500.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	19,338,489.

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

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

1	Total expenses and losses per audited financial statements	1	17,192,647.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	193,064.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	170,500.
e	Add lines 2a through 2d	2e	363,564.
3	Subtract line 2e from line 1	3	16,829,083.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	32,689.
c	Add lines 4a and 4b	4c	32,689.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	16,861,772.

Part XIII Supplemental Information.

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

PART III, LINE 4:

A DONOR GAVE US SEVERAL STATUES OF SEA LIFE. WE REFER TO THEM AS

"SENTINELS OF THE SEA." THEY ENHANCE THE EXHIBITS AT PIER 60, AND WERE

INSTALLED AS PART OF THE RENOVATION TO THE HARBOR SEAL AND NORTHERN FUR

SEAL AREAS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES -32,689.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RENT EXPENSE REPORTED ON FORM 990, PART VIII, LINE 6B -170,500.

Part XIII Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENT EXPENSE REPORTED ON FORM 990, PART VIII, LINE 6B 170,500.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 32,689.

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))
		SPLASH! (event type)	SEACHANGE (event type)	NONE 0 (total number)	
Revenue	1 Gross receipts	1,037,275.	138,322.		1,175,597.
	2 Less: Contributions	701,244.	120,117.		821,361.
	3 Gross income (line 1 minus line 2)	336,031.	18,205.		354,236.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	145,939.	18,205.		164,144.
	8 Entertainment				
	9 Other direct expenses	336,330.	32,028.		368,358.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				532,502.
11 Net income summary. Subtract line 10 from line 3, column (d)				-178,266.	

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
b If "Yes," explain: _____

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

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 ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

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

(I) NAME OF FUNDRAISER: CAMPBELL & COMPANY

(I) ADDRESS OF FUNDRAISER:

ONE EAST WACKER DRIVE, SUITE 2100, CHICAGO, IL 60601

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization THE SEATTLE AQUARIUM SOCIETY Employer identification number 91-1189249

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
KENT SCHOOL DISTRICT 12033 SE 256TH ST. A-600 KENT, WA 98030	46-1866001	GOVERNMENT	5,671.	0.			BUS STIPEND

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

3 Enter total number of other organizations listed in the line 1 table 0.

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

Schedule I (Form 990) (2017)

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2017

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

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

▶ Attach to Form 990.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

THE SEATTLE AQUARIUM SOCIETY

Employer identification number

91-1189249

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 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 (such as, 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 on 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" on 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 nonfixed 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" on 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		

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

Schedule J (Form 990) 2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ROBERT W. DAVIDSON PRESIDENT & CEO	(i)	231,248.	38,280.	0.	11,092.	4,300.	284,920.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BRADLEY RUTHERFORD CHIEF OPERATIONS OFFICER	(i)	161,310.	18,560.	0.	8,169.	4,056.	192,095.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RACHAEL WEAKLAND VP OF PHILANTHROPY	(i)	139,530.	16,240.	0.	7,167.	5,156.	168,093.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARSHA SAVERY DIR. MKTG, MEMBERHSIP, GUEST IMPRES	(i)	129,816.	14,848.	0.	6,554.	3,300.	154,518.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

ROBERT DAVIDSON - HEALTH/SOCIAL CLUB DUES INCLUDED IN WAGES FOR 2017.

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2017

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**

▶ **Attach to Form 990 or Form 990-EZ.**

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

Name of the organization **THE SEATTLE AQUARIUM SOCIETY** Employer identification number **91-1189249**

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

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

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
STUART ROLFE	DIRECTOR	FACILITY	X		500,000.	500,000.		X	X		X	
Total						\$ 500,000.						

Part III Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

SEE PART V FOR CONTINUATIONS

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2017

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization **THE SEATTLE AQUARIUM SOCIETY** Employer identification number **91-1189249**

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	18	189,796.	MARKET QUOTATIONS
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				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (AUCTION / RAFFLE)	X	261	169,507.	COST/SELLING PRICE
26 Other (WINE)	X	72	13,282.	COST/SELLING PRICE
27 Other (FOOD/BEVERAGE)	X	1	10,000.	COST/SELLING PRICE
28 Other (ANIMAL SUPPLIES)	X	3	1,133.	COST/SELLING PRICE

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** 0

	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 isn't 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 nonstandard 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 didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2017

Part II **Supplemental Information.** 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 NUMBER OF CONTRIBUTIONS RECEIVED IN

COLUMN B.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

THE SEATTLE AQUARIUM SOCIETY

Employer identification number

91-1189249

PART I, LINE 6: TOTAL NUMBER OF VOLUNTEERS

VOLUNTEERS ASSISTED STAFF MEMBERS WITH ANIMAL HUSBANDRY AND EXHIBIT

MAINTENANCE TASKS, PUBLIC EDUCATION THROUGH INTERPRETATION IN EXHIBITS,

EVENT SET-UP AND TAKE-DOWN, CLERICAL TASKS AND PUBLIC OUTREACH

PROGRAMS. THE ORGANIZATION KEEPS TRACK OF THE NUMBER OF VOLUNTEERS,

HOURS SERVED AND OTHER STATISTICAL INFORMATION BY USING A VOLUNTEER

PROGRAM MANAGEMENT DATABASE.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

THE SEATTLE AQUARIUM IS THE EIGHTH-LARGEST AQUARIUM IN THE US BASED ON

ATTENDANCE. DURING 2017 WE PLAYED HOST TO 859,368 VISITORS TO OUR

FACILITY. MORE THAN 69,000 FREE TICKETS WERE DISTRIBUTED THROUGH OUR

CONNECTIONS PROGRAM. THESE TICKETS GO TO MORE THAN 300 PARTNER

AGENCIES SERVING LOW-INCOME FAMILIES, COMMUNITIES OF COLOR, IMMIGRANT

AND REFUGEE COMMUNITIES, PEOPLE WITH DISABILITIES, FAMILIES AND

INDIVIDUALS EXPERIENCING HOMELESSNESS. IN ADDITION, 39,360 STUDENTS

VISITED THE AQUARIUM DURING 2017 THROUGH OUR SCHOOL PROGRAMS, WITH

23,306 OF THEM RECEIVING FREE ADMISSION.

THE SEATTLE AQUARIUM IS THE HEART OF THE SEATTLE WATERFRONT AND A

DESTINATION FOR RESIDENTS, SCHOOL GROUPS, COMMUNITY GROUPS AND TOURING

VISITORS ALIKE. WE SERVE OUR COMMUNITY THROUGH A VARIETY OF CHANNELS,

INCLUDING EDUCATION PROGRAMS, VISITOR ENGAGEMENT, CONSERVATION PROJECTS

AND RESEARCH INITIATIVES. AS AN INFORMAL SCIENCE EDUCATION CENTER, WE

ARE ON THE LEADING EDGE OF CREATING SCIENTIFICALLY-LITERATE AND

INFORMED CITIZENS. WE BELIEVE CONSERVATION OF THE MARINE ENVIRONMENT

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization THE SEATTLE AQUARIUM SOCIETY	Employer identification number 91-1189249
--	--

RELIES UPON OUR VISITORS LEAVING US WITH A GREATER RESPECT AND

KNOWLEDGE FOR THE OCEAN AND MARINE ANIMALS THAN THEY DID WHEN THEY

FIRST ENTERED OUR DOORS.

ASSOCIATION OF ZOOS AND AQUARIUMS (AZA) ACCREDITATION: THE SEATTLE

AQUARIUM HAS BEEN ACCREDITED BY THE AZA SINCE 1979, WHICH MEANS THAT WE

MEET THE HIGHEST STANDARDS FOR ANIMAL CARE AND WELFARE. IN 2017, THE

SEATTLE AQUARIUM SUCCESSFULLY SUBMITTED ITS AZA ACCREDITATION RENEWAL,

A PROCESS DONE EVERY FIVE YEARS THAT REAFFIRMS THAT THE ORGANIZATION

CONTINUES TO USE BEST PRACTICES THROUGH AN INDEPENDENT EVALUATION AND

INSPECTION. THE AQUARIUM, ALONG WITH THE WOODLAND PARK ZOO, WILL PLAY

HOST TO THE ANNUAL AZA CONFERENCE IN 2018 AND SPENT MUCH OF 2017

PLANNING FOR THE EVENT AND PREPARING MARKETING MATERIALS FOR

PRESENTATION AT THE SEPTEMBER 2017 CONFERENCE IN INDIANAPOLIS.

CONSERVATION PROGRAMS & PARTNERSHIPS: IN 2017, WE ADOPTED A TRAJECTORY

THAT INCLUDES RENEWED FOCUS ON THE SALISH SEA AND EXPANSION OF OUR

CONSERVATION NARRATIVE TO INCLUDE THE CORAL TRIANGLE, THE MARINE

BIODIVERSITY HOTSPOT LOCATED BETWEEN THE PHILIPPINES, INDONESIA AND THE

SOLOMON ISLANDS. HAVING THESE ANCHORS ON EITHER SIDE OF THE PACIFIC

PROVIDES US WITH AN OPPORTUNITY TO UNDERSTAND AND TELL THE STORY OF

PUGET SOUND IN A CRITICAL GLOBAL CONTEXT.

WE HIRED ERIN MEYER PH.D. AS OUR NEW DIRECTOR OF CONSERVATION PROGRAMS

AND PARTNERSHIPS IN DECEMBER 2017. SHE WILL WORK ALONGSIDE OUR

DIRECTORS OF CONSERVATION ENGAGEMENT AND LIFE SCIENCES TO FOCUS OUR

PRESENCE IN ON-THE-GROUND CONSERVATION RESEARCH AND PROGRAMS, ELEVATING

OUR VOICE IN OCEAN POLICY, AND SHAPING THE EMERGING OCEAN ETHIC IN THE

Name of the organization THE SEATTLE AQUARIUM SOCIETY	Employer identification number 91-1189249
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PACIFIC NORTHWEST.

ADVANCE CAMPUS EXPANSION: THE AQUARIUM HAS COMPLETED SCHEMATIC DESIGN

FOR A NEW BUILDING, THE OCEAN PAVILION, FOCUSED ON THE MARINE

ENVIRONMENT OF THE INDO-PACIFIC AND THE CORAL TRIANGLE. PROGRAMMING

WILL HIGHLIGHT CONNECTIONS BETWEEN THE SALISH SEA AND THE INDO-PACIFIC

SHARING A NARRATIVE OF BOTH GLOBAL AND LOCAL TOPICS IN OCEAN HEALTH.

WE ARE IN THE FIRST PHASE OF A CAPITAL CAMPAIGN THAT WILL BRING THE

STORY OF THE HUMAN-OCEAN CONNECTION ACROSS THE PACIFIC BASIN TO LIFE.

OUR \$113 MILLION CAMPAIGN WILL PROVIDE FOR CONSTRUCTION OF THE OCEAN

PAVILION AND AN ANIMAL CARE CENTER.

ANIMAL CARE AND RESEARCH: ANIMAL CARE AND STUDY OF THE SPECIES IN OUR

CARE IS A FUNDAMENTAL COMPONENT OF THE SEATTLE AQUARIUM AND SUPPORTS

THE VERY CORE OF OUR MISSION. OVER THE YEARS, OUR STAFF HAVE ENGAGED

IN A VARIETY OF PROJECTS BOTH INDEPENDENTLY AND THROUGH COLLABORATION

WITH OTHER PEER ORGANIZATIONS, UNIVERSITIES OR RESEARCH ENTITIES. AS

PART OF THAT WORK, WE HAVE UNDERTAKEN MANY LONG-TERM AND CONCURRENT

PROJECTS DESIGNED TO EXPAND THE BODY OF KNOWLEDGE IN THE FIELDS OF

MARINE BIOLOGY AND MARINE ECOLOGY, FOR WILD AND AQUARIUM ANIMALS. YOUR

GENERAL OPERATING GIFT ALLOWS US TO DEDICATE STAFF AND THEIR EXPERTISE

TO THESE PROJECTS THAT ADVANCE THE KNOWLEDGE BASE FOR OUR FACILITY,

INDUSTRY AND SCIENCE COMMUNITY.

OTTER POPULATION STUDIES: OUR STAFF CONTINUED TO WORK WITH STATE AND

FEDERAL AGENCY PARTNERS TO GATHER DATA FOR THE ANNUAL SURVEY OF SEA

OTTERS ON THE WASHINGTON COAST. OUR STAFF ALSO WORKS ON A FEDERAL

PROJECT MONITORING THE OTTER POPULATION GROWTH RATES BY PROVIDING

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GENETIC AND ENDOCRINE DATA FOR A STATISTICAL MODEL ANALYZING MANY VARIABLES LIKE DIET, WATERSHED INPUTS AND MARINE PRODUCTIVITY. DATA WILL PROVIDE CONTENT FOR IMPORTANT LONGITUDINAL STUDIES REGARDING SEA OTTER ECOLOGY. FOR MORE THAN 16 YEARS WE'VE PARTICIPATED IN THE ANNUAL SURVEY AND RECORDED OVER 1,800 WASHINGTON SEA OTTERS FROM GROUND SURVEYS IN BOTH 2016 AND 2017.

MONITORING OUR ANIMALS' HORMONE LEVELS: OUR SCIENTISTS ARE CONCERNED WITH MONITORING HORMONE LEVELS OF ANIMALS IN OUR COLLECTION WITH A FOCUS ON FUR SEALS, SEA OTTERS AND SEABIRDS. HORMONE STUDIES ALLOW US TO MEASURE BIOLOGICAL RESPONSES TO NORMAL SITUATIONS WHILE IN OUR CARE, LIKE REPRODUCTION AND OTHER CHANGES IN LIFE STAGES. THIS RESEARCH WILL HELP BIOLOGISTS TO BETTER UNDERSTAND PHYSIOLOGY AND BIOLOGY.

ANNUAL SURVEYS: AQUARIUM STAFF COORDINATE ANNUAL SURVEYS OF ROCKFISH AND GIANT PACIFIC OCTOPUSES IN PUGET SOUND AND OF CORAL REEF SYSTEMS OF THE NORTHWEST COAST OF THE ISLAND OF HAWAII. WORKING WITH STATE RESOURCES DEPARTMENTS AND UNIVERSITIES IN HAWAII, WE COLLECT DATA ON SPECIES PRESENCE AND ABUNDANCE PLUS CAPTURE IMAGES OF THE CORAL REEF FROM YEAR TO YEAR. THE COLLECTED DATA PROVIDES A BASELINE THAT ALLOWS SCIENTISTS TO ASSESS TRENDS AND SPECIES STABILITY OR LOOK FOR DATA GAPS TO ADDRESS IN THE FUTURE.

EDUCATION & ENGAGEMENT: THE SEATTLE AQUARIUM OFFERS INFORMAL SCIENCE EDUCATION FOR KIDS AND ADULTS OF ALL AGES. OUR ONGOING PROGRAMS CONTINUE TO DRAW CROWDS AND GARNER ENTHUSIASM FOR OCEAN CONSERVATION FROM PARTICIPANTS. ALL OF OUR PROGRAMS, WHETHER INSIDE OR OUTSIDE THE AQUARIUM, ARE DESIGNED TO ENGAGE CHILDREN AND TEENS, AND ADULTS, IN

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ACTIONS THAT PROMOTE OCEAN HEALTH.

TODDLER TIME COMPLETED ITS 12TH SEASON OFFERING FAMILIES 36 PROGRAM

DATES ON SELECT SUNDAYS, MONDAYS AND TUESDAYS ATTENDED BY 2,225

CHILDREN AND 2,325 ADULTS, UP 11% FROM 2016. TODDLER TIME PROMOTES

EARLY DEVELOPMENT OF COGNITIVE, LANGUAGE AND SOCIAL SKILLS THROUGH

AGE-APPROPRIATE ACTIVITIES CENTERED ON MARINE SCIENCE. THESE SKILLS

SETS ARE DOCUMENTED AS A KEY INDICATORS FOR FUTURE SUCCESS INCLUDING

ACADEMIC PROGRESS AND MENTAL HEALTH IN A GROWING BODY OF SCIENTIFIC

LITERATURE.

THE CITIZEN SCIENCE PROGRAM COMPLETED ITS 11TH YEAR OF THE 15-YEAR

MONITORING PROGRAM WITH 10 TEACHERS AND APPROXIMATELY 360 STUDENTS

MONITORING 11 BEACHES IN 2017. CITIZEN SCIENCE PROVIDES A UNIQUE

OPPORTUNITY FOR STUDENTS TO DEVELOP A STRONG CONNECTION TO THEIR LOCAL

BEACHES, TO BECOME ENGAGED IN SCIENCE INVESTIGATIONS THAT YIELD

MEANINGFUL RESULTS FOR THE COMMUNITY, AND TO SEE SCIENCE AS A POSSIBLE

CAREER PATH. CITIZEN SCIENCE SUPPORTS WASHINGTON STATE'S COMMITMENT TO

PROVIDE A HIGH-QUALITY SCIENCE EDUCATION THAT ENCOURAGES STUDENTS TO

PURSUE STEM-BASED CAREERS. CITIZEN SCIENCE OFFERS BOTH TEACHER AND

STUDENT COMPETENCIES IN UNDERSTANDING, DESIGNING AND IMPLEMENTING

SCIENTIFICALLY RELEVANT FIELD INVESTIGATIONS.

OUR ONSITE CLASSROOM PROGRAMS AND SELF-GUIDED VISITS SERVED 27,903

STUDENTS AND 11,396 CHAPERONES AND TEACHERS. SCHOLARSHIPS FUNDED 65% OF

THE STUDENTS PARTICIPATING IN CLASSROOM PROGRAMS (6,180 STUDENTS FROM

129 GROUPS). 13,796 STUDENTS, OR 35%, IN ONSITE PROGRAMS WERE FROM

TITLE 1 SCHOOLS, MEANING THEY ARE ELIGIBLE FOR FEDERAL FUNDING BASED ON

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STUDENT DEMOGRAPHIC DATA. (STUDENTS IN FREE- AND REDUCED- LUNCH PROGRAMS WERE 40% OF THE ONSITE PROGRAMS). 502 STUDENTS, OR 2%, WERE STUDENTS WITH SPECIAL NEEDS. OUR ONSITE PROGRAMS FOR SCHOOL STUDENTS AND CHAPERONES PROVIDE AN OPPORTUNITY FOR INFORMAL SCIENCE EDUCATION THAT SUPPLEMENTS STUDENTS' IN-SCHOOL SCIENCE CURRICULUM AND CREATES MEMORABLE EXPERIENCES SEEING ANIMALS UP CLOSE ALONGSIDE OUR MARINE SCIENCE TEACHERS OR WITH DETAILED SELF-GUIDED MATERIALS AND ENGAGEMENT WITH OUR HIGHLY KNOWLEDGEABLE AND SCIENCE-TRAINED VOLUNTEERS.

MARINE SUMMER CAMP RAN FOR THE 17TH YEAR OVER 10 CONSECUTIVE WEEKS AND CLOSED OUT THE SEASON WITH 90.6% CAPACITY. CAMP SCHOLARSHIPS WERE 113% FULL COMPARED TO 31% THE PREVIOUS YEAR. WE HAD 298 HAPPY CAMPERS THAT COULD SELECT FORM A VARIETY OF THEMES INCLUDING PARTNERSHIP CAMPS WITH SEATTLE CHILDREN'S THEATER. SUMMER CAMPS NOT ONLY PROVIDE SCIENCE ENGAGEMENT DURING SUMMER MONTHS, BUT ARE ALSO A BRIDGE BETWEEN TODDLER TIME AND OTHER AQUARIUM PROGRAMS FOR SCHOOL STUDENTS. IN FUTURE YEARS, OUR STAFF WILL EXPLORE PARTNERSHIP OPPORTUNITIES WITH ORGANIZATIONS SERVING AT-RISK YOUTH TO ASSESS HOW CAMPS MAY BECOME A TOOL FOR COMMUNITY SERVICE GROUPS.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

SEATTLE AQUARIUM CONNECTIONS CONTINUES TO SERVE THE GREATER COMMUNITY THROUGH THE DISTRIBUTION OF MORE THAN 69,000 TICKETS TO MORE THAN 300 PARTNER ORGANIZATIONS IN 2017. SEATTLE AQUARIUM CONNECTIONS IS OUR REFOCUSSED COMMUNITY TICKETS PROGRAM. THE PROGRAM DISTRIBUTES TICKETS TO PARTNERS WHO SHARE THESE TICKETS WITH THEIR CONSTITUENTS, WHO ARE OFTEN INDIVIDUALS WHO WOULD NOT SEEK OUT THE AQUARIUM OR EXPERIENCE BARRIERS TO ENTRY. THE PROGRAM HAS ALSO DEVELOPED A \$25 ANNUAL MEMBERSHIP OPTION

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AVAILABLE FOR FAMILIES CONNECTED TO OUR PARTNERS. CONNECTIONS PROGRAM

ALSO MANAGES MEMBERSHIPS THAT ARE AVAILABLE AT LOCAL LIBRARIES.

CONNECTIONS IS A PILLAR OF OUR COMMUNITY OUTREACH AND ENGAGEMENT

PROGRAMS, REACHING MORE SEATTLE-AREA COMMUNITY MEMBERS WITH MULTIPLE

CHANNELS FOR FREE OR REDUCED -PRICE ENTRY INTO THE AQUARIUM.

DREAMNIGHT IN 2017 RECEIVED 789 GUESTS OVER TWO NIGHTS ON MARCH 25 AND

APRIL 25, WITH THE SUPPORT OF 16 OF OUR AQUARIUM CONNECTIONS PARTNERS.

OVER THE YEARS WE HAVE HAD AS MANY AS 870 GUESTS; HOWEVER, WE'VE FOUND

THAT ATTENDANCE CLOSE TO 400 PER EVENT GIVES FAMILIES THE SPACE THEY

NEED TO COMFORTABLY EXPERIENCE AND ENJOY THE EVENT. THESE FREE,

FUN-FILLED EVENTS OFFER CHILDREN AND ADULTS WITH DISABILITIES OR

SPECIAL HEALTH CARE NEEDS A CHANCE TO RELAX WHILE EXPLORING OUR

EXHIBITS AND ENJOYING AN ASSORTMENT OF TALKS, ACTIVITIES AND

DEMONSTRATIONS. AS NEEDED, ACTIVITIES ARE MODIFIED FOR ACCESSIBILITY

NEEDS, AND ACCOMMODATIONS ARE MADE FOR SENSORY NEEDS THROUGHOUT OUR

EXHIBITS.

BEACH NATURALISTS HAVE BECOME AN ATTRACTION ON LOCAL BEACHES. EVERY

SUMMER SCHOOL AND COMMUNITY GROUPS SEEK OUT THIS FREE PROGRAM TO

SUPPLEMENT THEIR FIELD TRIPS TO THE BEACH. THERE WERE 66,592

CONVERSATIONS WITH THE PUBLIC OVER 23 BEACH DAYS IN 2017. THIS YEAR

BEACH NATURALISTS PILOTED AN EFFORT TO MEASURE BEACH VISITORS' EMPATHY

TOWARD BEACH LIFE DURING OUR INTERACTIONS WITH VISITORS. THE SEATTLE

AQUARIUM IS PARTICIPATING IN A COLLABORATIVE PROJECT TO FOSTER EMPATHY

FOR WILDLIFE AS A PATHWAY TO CONSERVATION BEHAVIOR. THE BEACH

NATURALIST PROGRAM SUPPORTS THIS WORK BY HELPING PEOPLE TO CONNECT WITH

TIDE POOL ANIMALS IN NEW WAYS. BY COLLECTING DATA ON EMPATHIC BEHAVIORS

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TAKEN BY OUR BEACH VISITORS, WE CAN UNDERSTAND HOW THIS WORK SHAPES

INTERACTIONS BETWEEN PEOPLE AND WILDLIFE.

CEDAR RIVER SALMON JOURNEY VOLUNTEERS, A TOTAL OF 117 IN 2017, SPOKE WITH 16,306 VISITORS ABOUT SALMON AND THE CEDAR RIVER WATERSHED. THIS IS THE HIGHEST NUMBER OF VISITORS IN THE 20 YEAR HISTORY OF THE PROGRAM, INCLUDING THE YEARS PRIOR TO IT BEING HOSTED BY THE SEATTLE AQUARIUM. IT WAS A 35% INCREASE IN VISITORS OVER 2016. THE CEDAR RIVER SALMON JOURNEY PROGRAM HAS BEEN EDUCATING WATERSHED RESIDENTS ABOUT SALMON AND WATERSHED HEALTH SINCE 1998. THE SEATTLE AQUARIUM PROGRAM TRAINS COMMUNITY VOLUNTEERS TO ENGAGE THE PUBLIC AT SALMON SPAWNING SITES ALONG IN THE CEDAR RIVER IN THE FALL, AND AT THE HIRAM CHITTENDEN LOCKS IN THE SUMMER. NATURALISTS ALSO PROVIDE INTERPRETATIVE PROGRAMS AT OTHER COMMUNITY EVENTS IN THE BASIN THROUGHOUT THE YEAR, REACHING ADDITIONAL AUDIENCES WITH INFORMATION ABOUT THE CONNECTION BETWEEN PERSONAL BEHAVIORS, HEALTHY WATERSHEDS AND SALMON. OVER THE LIFETIME OF THE PROGRAM OVER 138,623 VISITORS HAVE COME OUT TO SEE SALMON AND TO LEARN ABOUT WAYS THEY CAN HELP SUPPORT AND PROMOTE SALMON RECOVERY IN OUR WATERSHED.

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

A DRAFT VERSION OF THE FORM 990 WILL BE SHARED WITH THE FINANCE COMMITTEE INITIALLY. THE REST OF THE BOARD MEMBERS WILL HAVE THE OPPORTUNITY TO BE PROVIDED A COPY OF THE FORM 990 PRIOR TO FILING.

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

THE POLICIES CONTAINED IN THE CONFLICT OF INTEREST AGREEMENT WERE FIRST

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APPROVED BY THE EXECUTIVE COMMITTEE IN ITS DECEMBER 2007 MEETING. THE
CONFLICT OF INTEREST STATEMENT IS REVIEWED BY THE AQUARIUM'S ATTORNEY
BEFORE IT IS SENT OUT EACH YEAR. AN ANNUAL FORM IS SENT TO THE BOARD OF
DIRECTORS AND EMPLOYEES ASKING FOR DISCLOSURE OF ANY CONFLICTS OF INTEREST.
IF THE BOARD IS MAKING A DECISION REGARDING A PRODUCT OR SERVICE IN WHICH A
CONFLICT EXISTS, CONFLICTED BOARD MEMBERS WOULD BE RECUSED FROM VOTING ON
THE DECISION.

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

AN INDEPENDENT COMPENSATION COMMITTEE OF THE BOARD COMMISSIONED A MARKET
BASED WAGE SURVEY IN 2015 AND HAS USED THIS AS A BASELINE TO ESTABLISH
COMPENSATION LEVELS. THE COMPENSATION COMMITTEE PRIMARILY CONCERNS ITSELF
WITH THE DETAILS RELATED TO THE EXECUTIVE TEAM POSITIONS. THEY DO,
HOWEVER, PROVIDE OVERALL WAGE POOL GUIDANCE WHICH IMPACTS ALL EMPLOYEES OF
THE AQUARIUM. THE ORGANIZATION USES COMPARABLE DATA FROM BOTH FOR-PROFIT
AND NONPROFIT WAGE SURVEYS, AS WELL AS THE ASSOCIATION OF ZOOS AND
AQUARIUMS WAGE SURVEY TO UPDATE THE 2015 SURVEY TO HELP DETERMINE
COMPENSATION. WRITTEN RECORDS ARE MAINTAINED REPORTING THE DECISIONS AND
MEETINGS REGARDING THE COMPENSATION PACKAGES. THE DATE OF THE LAST
COMPENSATION REVIEW WAS 4/1/2016.

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

THE ANNUAL REPORT, MOST RECENTLY COMPLETED AUDIT AND MOST RECENTLY
COMPLETED 990 ARE ALL AVAILABLE ON OUR WEBSITE. OTHER INFORMATION IS
AVAILABLE UPON REQUEST.

FORM 990, PART VII;

DURING THE EARLY PART OF 2017, THE CONTROLLER ACTED AS THE INTERIM



Animals : Zoos and Aquariums

Seattle Aquarium

Inspiring Conservation of Our Marine Environment

Add to My Charities

Donate to this Charity

Print

SHARE

- Rating Profile
- Programs
- Historical Ratings
- IRS (Forms 990)

	Score (out of 100)	Rating
Overall Score & Rating	89.00	★★★★☆
Financial	84.98	★★★☆☆
Accountability & Transparency	96.00	★★★★★

This rating was published 06/01/2019 and includes data from FY2017, the most recent 990 received at that time.

Why isn't this based on more recent data?

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Mission

The mission of the Seattle Aquarium is Inspiring Conservation of Our Marine Environment. To do so we must help citizens learn about the interconnectedness of human behavior, the ocean, and climate change. As our local population grows, we must all work to restore and preserve the spectacular beauty and health of Puget Sound. The Seattle Aquarium is uniquely positioned to help over 850,000 annual visitors, including over 40,000 students, each year understand and become aware of the impact they have on our marine environment.

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Impact Information

LOOKING FOR IMPACT INFORMATION?

Charity Navigator is collaborating with GuideStar, GlobalGiving, Classy, and ImpactMatters to display impact-related information for rated nonprofits. However, not all rated nonprofits have provided impact information yet. Each of these partners has supplied Charity Navigator with the impact information they receive directly from nonprofits. Submissions must be made on our partner's websites and we plan to update the display of this information regularly.

If you are interested in seeing this charity provide its impact information, please click below. Note, this is simply an indication of your interest.

REQUEST IMPACT INFORMATION



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Learn more about how we calculate the overall score and rating.

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Financial Performance Metrics

Program Expenses <i>(Percent of the charity's total expenses spent on the programs and services it delivers)</i>	76.2%
Administrative Expenses	15.4%
Fundraising Expenses	8.3%
Fundraising Efficiency	\$0.30
Working Capital Ratio (years)	0.58
Program Expenses Growth	10.3%
Liabilities to Assets	23.9%

All data for Financial Performance Metrics calculations was provided by Seattle Aquarium on recent 990s filed with the IRS.

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Accountability & Transparency Performance Metrics

Information Provided on the Form 990

Independent Voting Board Members	<input checked="" type="checkbox"/>
No Material diversion of assets	<input checked="" type="checkbox"/>
Audited financials prepared by independent accountant	<input checked="" type="checkbox"/>
Does Not Provide Loan(s) to or Receive Loan(s) From related parties	<input checked="" type="checkbox"/>
Documents Board Meeting Minutes	<input checked="" type="checkbox"/>
Provided copy of Form 990 to organization's governing body in advance of filing	<input checked="" type="checkbox"/>
Conflict of Interest Policy	<input checked="" type="checkbox"/>
Whistleblower Policy	<input checked="" type="checkbox"/>
Records Retention and Destruction Policy	<input checked="" type="checkbox"/>
CEO listed with salary	<input checked="" type="checkbox"/>
Process for determining CEO compensation	<input checked="" type="checkbox"/>
Board Listed / Board Members Not Compensated	<input checked="" type="checkbox"/>

Is the following information easily accessible on the charity's website?

Donor Privacy Policy	<input checked="" type="checkbox"/>
Board Members Listed	<input checked="" type="checkbox"/>
Audited Financials	<input checked="" type="checkbox"/>
Form 990	<input checked="" type="checkbox"/>
Key staff listed	<input checked="" type="checkbox"/>

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Income Statement

(FYE 12/2017)

REVENUE**Contributions**

Contributions, Gifts & Grants	\$3,014,441
Federated Campaigns	\$0
Membership Dues	\$1,474,980
Fundraising Events	\$821,361
Related Organizations	\$0
Government Grants	\$10,948

Total Contributions \$5,321,730

Program Service Revenue \$12,904,827

Total Primary Revenue \$18,226,557

Other Revenue \$1,111,932

TOTAL REVENUE **\$19,338,489**

EXPENSES

Program Expenses	\$13,019,580
Administrative Expenses	\$2,374,276
Fundraising Expenses	\$1,467,916

TOTAL FUNCTIONAL EXPENSES **\$16,861,772**

Payments to Affiliates \$0

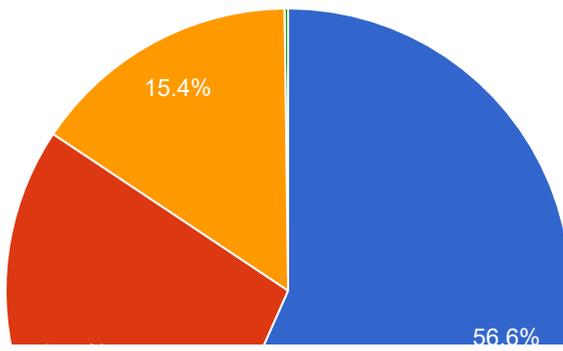
Excess (or Deficit) for the year \$2,476,717

Net Assets \$9,376,794

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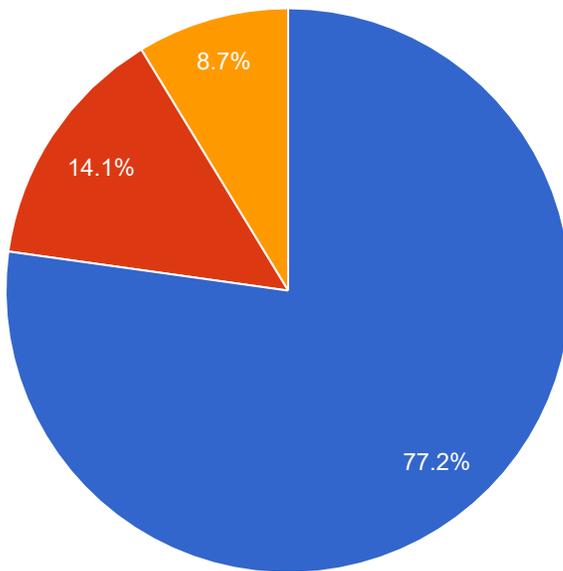
Financial Charts

Contributions Breakdown (FYE 12/2017)



- Contributions, Gifts & Grants
- Membership Dues
- Fundraising Events
- Government Grants

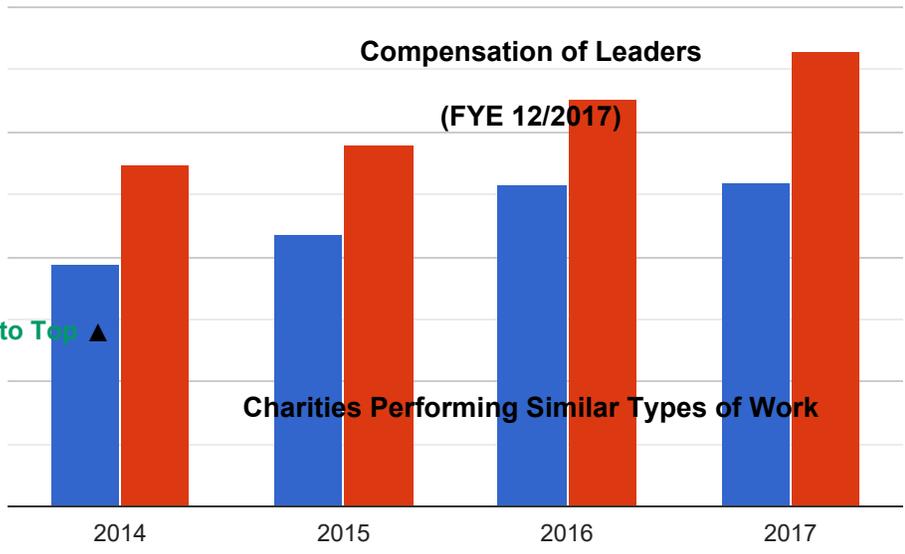
Expenses Breakdown (FYE 12/2017)



- Program
- Administrative
- Fundraising

Revenue/Expenses Trend

[Back to Top ▲](#) ■ Program Expenses ■ Primary Revenue



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Charities Performing Similar Types of Work

Charity Name & State	Overall Score	Overall Rating
Seattle Aquarium (WA)	89.00	★★★★☆
Monterey Bay Aquarium (CA)	95.80	★★★★★
Niagara Aquarium Foundation (NY)	86.39	★★★★☆
Shedd Aquarium (IL)	90.86	★★★★★
The Florida Aquarium (FL)	90.00	★★★★★

[Compare These Charities \(Highly Rated\)](#)

Charity Representative Login

This charity has an official representative registered with Charity Navigator.

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Join over 400,000 other informed givers and get updates on charity ratings, new features, hot topics, and tips for donating.

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ALL MEMBERSHIPS

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INDIVIDUAL

\$79

All membership benefits for one named adult (age 18 and over).

Details

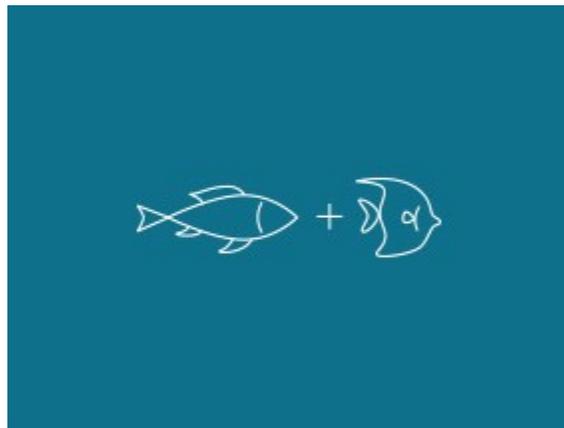
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GIFT MEMBERSHIP

Starts at purchase

GIFT CERTIFICATE

Starts when redeemed



INDIVIDUAL PLUS

\$119

All membership benefits for one named adult (age 18 and over) plus one free guest admission per visit (accompanied by the named member).

Details

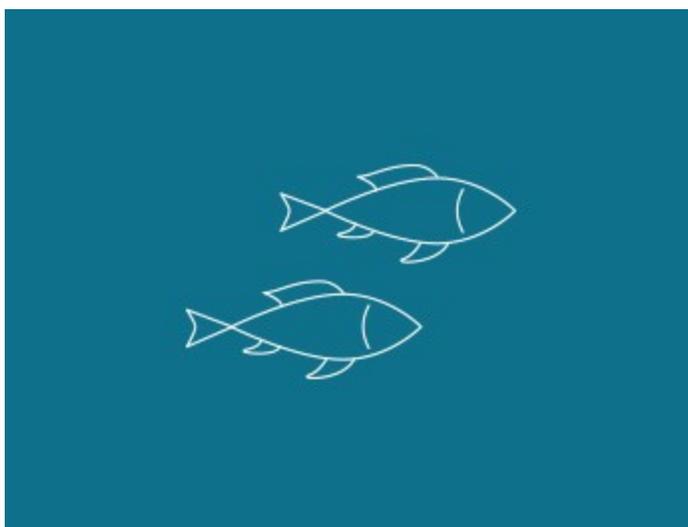
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GIFT MEMBERSHIP

Starts at purchase

GIFT CERTIFICATE

Starts when redeemed



DUAL

\$119

All membership benefits for two named adults (age 18 and over).

[Details](#)

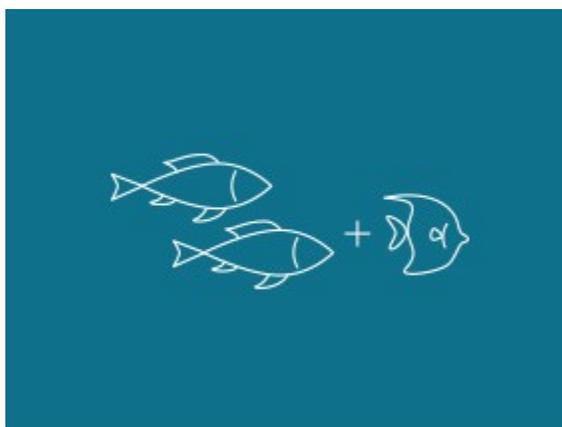
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GIFT MEMBERSHIP

Starts at purchase

GIFT CERTIFICATE

Starts when redeemed



DUAL PLUS

\$159

All membership benefits for two named adults (age 18 and over) plus one free guest admission per visit (accompanied by the named member).

Details

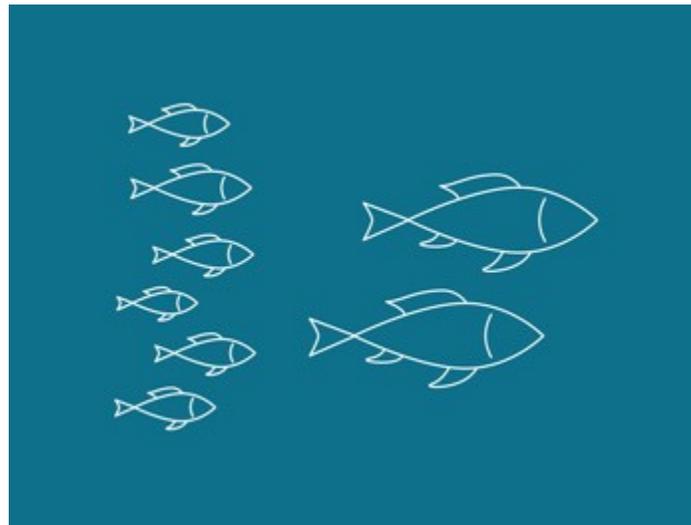
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GIFT MEMBERSHIP

Starts at purchase

GIFT CERTIFICATE

Starts when redeemed



FAMILY

\$179

All membership benefits for one or two named adults and up to six of your children/grandchildren (age 18 and under).

Details

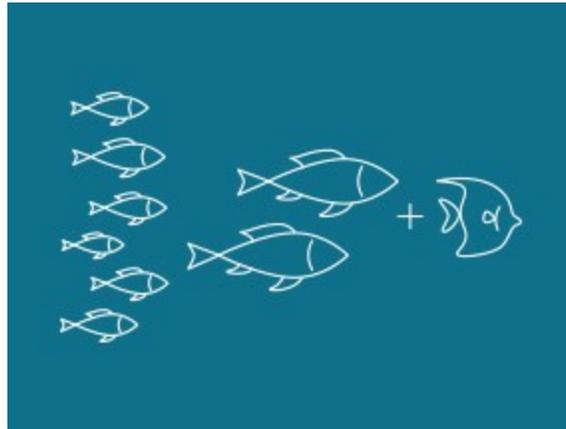
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GIFT MEMBERSHIP

Starts at purchase

GIFT CERTIFICATE

Starts when redeemed



FAMILY PLUS

\$219

All membership benefits for one or two named adults, up to six of your children/grandchildren (age 18 and under), plus one free guest admission per visit (accompanied by a named member or child of named member).

[Details](#)

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GIFT MEMBERSHIP

Starts at purchase

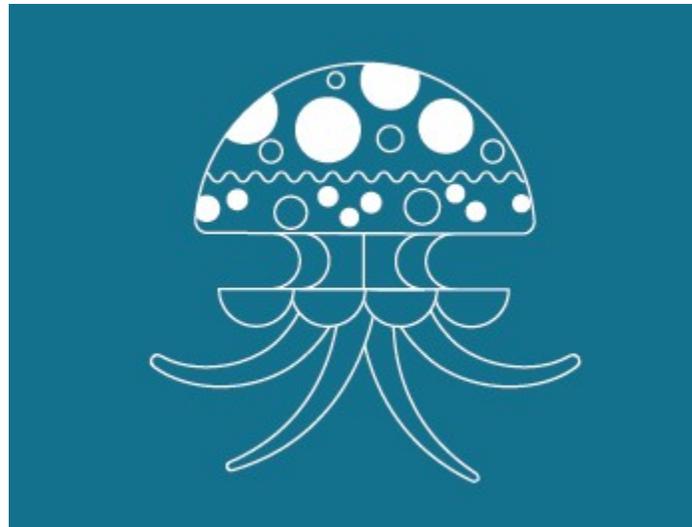
GIFT CERTIFICATE

Starts when redeemed

FRIENDS OF THE AQUARIUM

If you are considering a donation of \$300 or more, become a Friend of the Aquarium or Aquarium Ambassador today and be a vital part of bringing our mission, *Inspiring Conservation of Our Marine Environment*, to its fullest potential.

Donor club members enjoy access to special opportunities and experiences that allow you to see your contribution at work.



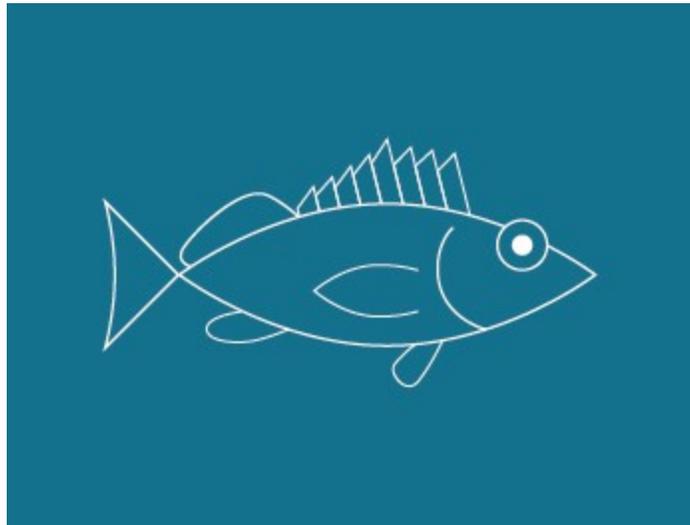
CONTRIBUTOR

\$300

Family plus membership benefits, plus: meet a diver opportunity, two one-time use Aquarium passes, annual impact report, recognition in our annual report and more.

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GIFT MEMBERSHIP



CONTRIBUTOR PLUS

\$500

Contributor benefits, plus: personalized tour, complimentary admission for four to Lightning Talks.

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GIFT MEMBERSHIP



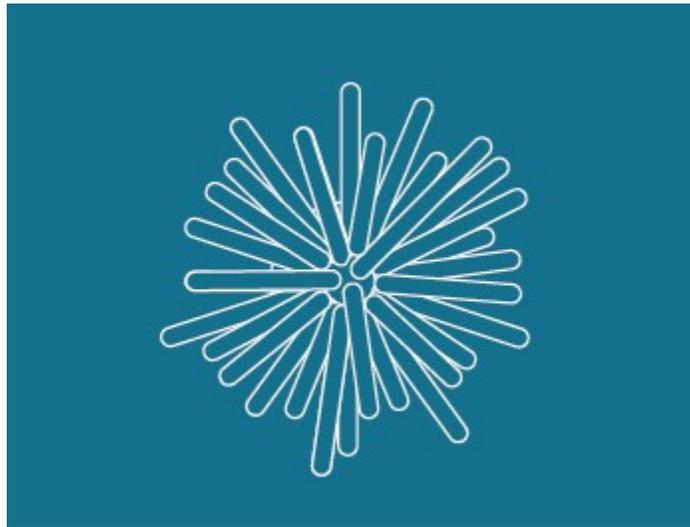
PUGET SOUND STEWARD

\$1,000

Contributor Plus benefits, plus: invitation to a beach naturalist outing, two additional one-time use Aquarium passes (four total).

JOIN ([HTTPS://WWW.SEATTLEAQUARIUM.ORG/BUY/MEMBERSHIP?ID=59284D6C68D609016D0D48E7&ACTION=UPGRADE](https://www.seattleaquarium.org/buy/membership?id=59284d6c68d609016d0d48e7&action=upgrade))

GIFT MEMBERSHIP



PUGET SOUND STEWARD PLUS

\$2,500

Puget Sound Steward benefits, plus: animal care experience, two additional one-time use Aquarium passes (six total).

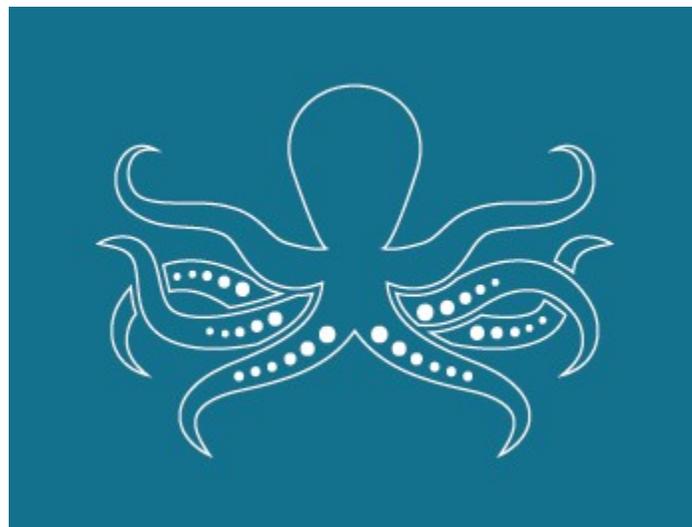
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GIFT MEMBERSHIP

AQUARIUM AMBASSADORS

Play a vital role in protecting our shared marine environment and the animals who call it home with your leadership support as an Aquarium Ambassador. You'll receive exclusive access to Aquarium Ambassador events, invitations to connect and exchange ideas with senior staff and join a network of like-minded ocean enthusiasts.

Enrollment is based on your total yearly giving to the Seattle Aquarium and will automatically renew with annual contributions of \$5,000 or more.



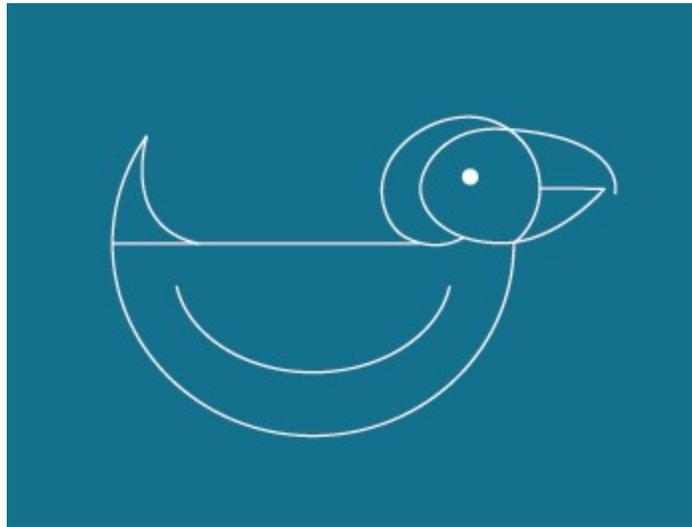
AMBASSADOR

\$5,000

Puget Sound Steward benefits, plus: Animal meal preparation experience, Gift family membership to give to another family, or donate to a nonprofit or school auction, two additional one-time use Aquarium passes (eight total).

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ID=5C5C80F4C1A3EF77E62057CF&ACTION=UPGRADE](https://www.seattleaquarium.org/buy/membership?id=5c5c80f4c1a3ef77e62057cf&action=upgrade))**

GIFT MEMBERSHIP



AMBASSADOR PLUS

\$10,000

Above benefits, plus: Invitation to a conservation conversation with the President of the Aquarium, seal of approval two-hour behind-the-scenes experience, two additional one-time use Aquarium passes (ten total).

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GIFT MEMBERSHIP



PRESIDENT'S CIRCLE

\$25,000

Customized benefits and invitations depending on your personal interests.

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GIFT MEMBERSHIP

MEMBERSHIP FAQ
(<HTTPS://WWW.SEATTLEAQUARIUM.ORG>
FAQ)

HOURS: 9:30AM–5PM DAILY

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(<https://www.seattleaquarium.org/buy>)

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