			EXTENDED TO MAY 17, 20	021		
	Ω	00	Return of Organization Exempt Fr	rom l	ncome Tax	OMB No. 1545-0047
For	m 🕽	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C			2019
•		uary 2020)	Do not enter social security numbers on this form as	s it may b	e made public.	Open to Public
Interr	nal Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the second seco			Inspection
AF	or th	e 2019 calend	lar year, or tax year beginning $ m JUL1$, $ m 2019$ and en	nding J	UN 30, 2020	
B c	beck if	ole: C Name of	forganization		D Employer identifica	tion number
	Addr	ge T.HE	CORAL REEF ALLIANCE			
	Name chan	ge Doing b	usiness as		94-321124	5
	return Final return	Number		oom/suite 0 0	E Telephone number $510 - 370 - 0$	500
_	termi ated	n- City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	4,056,840.
	Amer returr Appli	I OAKL	AND, CA 94612		H(a) Is this a group retu	
	tion pend	^{ing} F Name a	nd address of principal officer:MADHAVI KUSHNER AS C ABOVE		for subordinates? H(b) Are all subordinates inclu	
			X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or	527	If "No," attach a lis	t. (see instructions)
			CORAL.ORG		H(c) Group exemption I	
_			X Corporation Trust Association Other	L Year of	of formation: 1994 M S	state of legal domicile: CA
Pa	art I			~ =====		
Activities & Governance	1	Briefly describ	be the organization's mission or most significant activities: SAVINO	G THE	WORLD'S COR	AL REEFS.
erne	2	Check this bo	x 🕨 🛄 if the organization discontinued its operations or disposed	d of more	than 25% of its net asse	
0V6	3					11
ي م	4		dependent voting members of the governing body (Part VI, line 1b) \ldots			11
ies	5		of individuals employed in calendar year 2019 (Part V, line 2a)			27
ivit	6		of volunteers (estimate if necessary)			250
Act			d business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated	business taxable income from Form 990-T, line 39	·····		0.
					Prior Year	Current Year
iue	8		and grants (Part VIII, line 1h)		2,401,883. 60,360.	<u>4,031,568.</u> 24,000.
Revenue	9	U U	ice revenue (Part VIII, line 2g)		2,193.	1,272.
Be	10		come (Part VIII, column (A), lines 3, 4, and 7d)		13,477.	<u> </u>
	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,477,913.	4,056,840.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		185,923.	278,285.
	13		milar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	I	.	to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10)		2,414,482.	2,146,724.
sec	15	Drofossional f	undreising food (Part IX, column (A), line 110)		0.	0.
Expenses	10a	Total fundraia	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) ► <u>530, 375</u>	5.		••
Ă			es (Part IX, column (A), lines 11a-11d, 11f-24e)		889,924.	1,005,094.
			es Add lines 13-17 (must equal Part IX, column (A), line 25)		3,490,329.	3,430,103.
	19		expenses. Subtract line 18 from line 12		-1,012,416.	626,737.
or		nevenue less			ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (I	Part X, line 16)		2,739,599.	3,402,268.
Ass J Ba	21		s (Part X, line 26)		764,458.	800,390.
Func	22		fund balances. Subtract line 21 from line 20		1,975,141.	2,601,878.
	art II					
Und	er pen	alties of perjury,	I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of my k	nowledge and belief, it is
			. Declaration of preparer (other than officer) is based on all information of which			
Sig	n	Signatur	e of officer		Date	
Her		MADH	AVI KUSHNER, EXECUTIVE DIRECTOR		2021	-03-24

	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN				
Paid	PENNY L. LANE, CPA			self-employed P00743411				
Preparer	Firm's name 🕨 KARLSSON & LANE ,		•	Firm's EIN 94-2590397				
Use Only	Firm's address 4725 FIRST ST.,	STE. 226						
	PLEASANTON, CA 9	4566		Phone no. (925) 271-5519				
May the IF	May the IRS discuss this return with the preparer shown above? (see instructions)							
	Even 900 (0010)							

932001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2019)

Part III Statement of Program Service Accomplishments Check' Siende@ Containes aregones on tots any time in the Part III If breft describe the organization's mesion: THE CORAL REFF ALLIANCE (CORAL) IS AN ENVIRONMENTAL NGO THAT IS ON A MISSION TO SAVE THE WORLD'S CORAL REFFS. FOUNDED IN 1994, CORAL HAS A HISTORY OF WORKING COLLABORATIVELY WITH COMMUNITES TO REDUCE DIRECT THEREARTS TO REFFS. (CONTD. ON SCHEDULE O) 2 Dd the organization cases conducts, any program services during the year which were not listed on the program services of the anomal of parts and alocations to others, the total expenses. 3 Do the organization cases conducting on make significant changes in how it conducts, any program services, as measured by expenses. 3 Section 501(c)(a) and 501(c)(a) containing services are required to report the anomal of parts and alocations to others, the total expenses. 4 Conce \$1000000000000000000000000000000000000	orm	990 (2019) THE CORAL REEF ALLIANCE 94-3211245 Page 2
 Buelty describe the organization's mession: THE CORAL REFAILLAINCE (CORAL) IS AN ENVIRONMENTAL INGO THAT IS ON A MISSION TO SAVE THE WORLD'S CORAL REFS. FOUNDED IN 1994, CORAL HAS A HISTORY OF WORKING COLLABORATIVELY WITH COMMUNITIES TO REDUCE DIRECT THREATS TO REEFS. (CONTD. ON SCHEDULE 0) Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990 E27 M'wa, Guacha thus anno savicas on Schedula O. Dot the organization acceler conducting, or make significant changes in how it conducts, any program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others. The total economics mereture, if any, fee acch program service accomplishments for each of fits three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods are required to report the amount of grants and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods are required to grant and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods are required to grants and allocations to others. The total economics methods	_	
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MISSION TO SAVE THE WORLD'S CORAL REFS. FOUNDED IN 1994, CORAL HAS A HISTORY OF WORKING COLLABORATIVELY WITH COMMUNTIES TO REDUCE DIRECT THRRATS TO REFS. (CONTD. ON SCHEDULE O) 2 Dut equanization indentes any significant program services during the year which were not listed on the prof Form 300 4906227 If "Yes, 'describe these new services on Schedule O. 30 Did ne organization case conducting, or make significant changes in how it conducts, any program services, as measured by expenses. Section 501(6)(8) and 501(6)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if my freach program service accompletion matrix or grant and allocations to others, the total expenses, and (0)(6)(8) and 501(6)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and '(capress 951, 025. 40 (cose) (Concerst 951, 025. COMUNITIES AND GOVERNMENTS CORAL WORKS WITH LOCAL ORGANIZATIONS, COMMUNITIES AND GOVERNMENTS ACROSS THE MESOAMERICAN RESOLVICE WATER OLLITYTY ISSUES, ADDRESSING, ADDRESSING, OVERFISHING, AND PROMOTING SUBFAINABLE TOURISM. SPECIFICALLY, OUR RECEIVABLE IN THE CORRENT YEAR. OVER THE PAST 15 YEARS, WE HAVE BUILT EDUCAL THREATS HARE RESOLVIED WATER OLLITYTY ISSUES, ADDRESSING, OVERFISHING, AND PROMOTING SUBFAINABLE TOURISM. SPECIFICALLY, OUR LONGSTANDING WORK IN COASTAL HONDURAS AND THE BAY ISLANDS TO REDUCE LOCAL THREATS HARE RESOLVIED IN TANGINESMENT TO REDUCE TO CALL VEREFS AND THE COLORADIA WATER OLLITYTY ISUES, ADDRESSING, OVERFISHING, AND PROMOTING SUBFAINABLE TOURISM. SPECIFICALLY, OUR LOCAL THREATS HARE RESOLVIED IN TANGIELE AND DURABLE BENEFTS TO BOTH CORAL THEF	1	
HISTORY OF WORKING COLLABORATIVELY WITH COMMUNITIES TO REDUCE DIRECT THREATS TO REFY. (CONTD. ON SCHEDULE O) D dt he organization undertake any significant program services during the year which were not listed on the proform 600 or 900.27 IVes [X]1 I''Yes, 'describe these charges on Schedule O. [X] Yes [X]1 D dt ne organization careas conducting, or make significant charges in how it conducts, any program services, as measured by expenses. Sacchino Silo(Si and 501(60) regarizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service accompliatments for each of th three largest program services reported. 40 Okon KS WITH LOCAL ORGANIZATIONS, COMMUNITIES AND GOVERNMENTS ACROSS THE MESOAMERICAN REEF SYSTEM TO ESTABLISH THE CONDITIONS THAT WILL HELP CORLIS DAPPT TO THE EFPECTS OF CLIMARE CHANGE WITH FUNDING FROM LONG-TERM GRANTS RECORDED AS REVENUE IN THE PAST 15 YEARS, WE HAVE BULLT. REPUTATION AS EXPERTS IN RESOLVING WATER QUALITY ISSUES, ADDRESSING OVERFISHING, AND PROMOTING SUSTAINABLE TOURISM. SPECIFICALLY, OUR CORL THERATS HAS RESOLUTED IN THAN THEAD DUT NELL EAND STOREUCE LOCAL THERATS HAS RESULTED IN TANCIBLE AND DURABLE BENEFITS TO BOTH CORL REEFS AND THE COMMUNITIES AND THE BAY ISLANDS TO REDUCE LOCAL THERATS HAS RESULTED IN TANCIBLE AND DURABLE BENEFITS TO BOTH CORL REEFS AND THE COMMUNITIES AND THE BAY ISLANDS TO REDUCE LOCAL THERATS HAS RESULTED IN TANCIBLE AND DURABLE BENEFITS TO BOTH CORL REEFS AND THE COMMUNITIES AND THE BAY ISLANDS TO REDUCE LOCAL THERATS HAS RESULTED IN TANCIBLE AND DURABLE BENEFITS TO BOTH CORL REEFS AND THE CONDUNT TO THE REPOLCE THE AMOUNT OF POORLY REATED WASTEMATER THAT LEACHES INTO THE MARINE HAMAT I' ISLAND. CORAL		THE CORAL REEF ALLIANCE (CORAL) IS AN ENVIRONMENTAL NGO THAT IS ON A
THERATS TO REEFS. (CONTD. ON SCHEDULE 0) 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 980 or 880 627 \vec{Visc} 11" Yes, 'describe these new services on Schedule 0. \vec{Visc}		MISSION TO SAVE THE WORLD'S CORAL REEFS. FOUNDED IN 1994, CORAL HAS A
2 Did the organization undertake any significant program services during the year which were not listed on the prior FORM 900 490 €27		HISTORY OF WORKING COLLABORATIVELY WITH COMMUNITIES TO REDUCE DIRECT
2 Did the organization undertake any significant program services during the year which were not listed on the prior FORM 900 490 €27		THREATS TO REEFS. (CONTD. ON SCHEDULE O)
prior form \$00 or \$00-E27 □ Yes □	2	
<pre>If 'Ves,' describe these new services on Schedule 0. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services, as measured by septences. Section 501(69) and 501(64)(69) and 501(64)(64) and 501(64)(66) and 501(66) and 50</pre>		
3 Did the organization cases conducting, or make significant changes in how it conducts, any program services?		1
 ¹⁴ Vest⁻ describe these changes on Schedule O. ¹⁴ Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(a) and 501(c)(a) organizations are required to report the amount of grants and alcoations to others, the total expenses, and revenue, if any, for each program service reported. ¹⁵ O210. Including grants of <u>261,778.</u> [Generals<u>261,778.</u>] (Revenues<u>261,778.</u>] (Revenues<u>761,778.</u>] (Revenues<u>766,778.</u>] (Revenues<u>776,778.</u>] (Revenues<u>761,778</u>	2	
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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		х	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Δ	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
~	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		x
7	provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i> Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
5	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13	Х	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
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	140		
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? If "Yes," complete Schedule I, Parts I and II	21		X
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Part IV	Checklist	of Require	d Schedu	iles (cont	inued)

			Yes	No
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? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		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	38	Х	
Pa				_
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 17			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 27			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?	•		
a		9a		
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	30		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2019)

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Form 990 (2019)

Part V

Form 990	(2019))
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THE CORAL REEF ALLIANCE

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

	Check if Schedule O contains a response or note to any line in this Part VI				2
Sec	tion A. Governing Body and Management				_
				Yes	Ν
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a 11	4		
	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 on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b 11	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	nip with any other			
	officer, director, trustee, or key employee?		2		
3	Did the organization delegate control over management duties customarily performed by or under t	he direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?		3		
4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets?	5		
6	Did the organization have members or stockholders?		6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint one or			
	more members of the governing body?		7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
	persons other than the governing body?		7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by the following:			
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re				
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Revenue Code.)			
				Yes	
0a	Did the organization have local chapters, branches, or affiliates?		10a		
	If "Yes," did the organization have written policies and procedures governing the activities of such				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo		11a	Х	F
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris		12b	Х	F
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "				F
	in Schedule O how this was done		12c	Х	
3	Did the organization have a written whistleblower policy?		13	Х	F
4	Did the organization have a written document retention and destruction policy?		14	Х	F
5	Did the process for determining compensation of the following persons include a review and appro				F
•	persons, comparability data, and contemporaneous substantiation of the deliberation and decision				
а	The organization's CEO, Executive Director, or top management official		15a	х	
	Other officers or key employees of the organization		15a	X	┢
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		130		
62	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement with a			
ud			16a		
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu		108		
b					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org		166		
00	exempt status with respect to such arrangements?		16b		L
		0			
7	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright SEE SCHEDULE		2) e - ·	A	<u>ارم</u>
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 990-1 (Section 501(C)(sis ouli) avai	al
	for public inspection. Indicate how you made these available. Check all that apply.	n on Coho-lite O			
~		n on Schedule O)			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, o	conflict of interest policy, a	nd final	ncial	
	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 b	ooks and records 🕨			
	THE CORAL REEF ALLIANCE - 510-370-0500				
	1330 BROADWAY, NO. 600, OAKLAND, CA 94612		_	000	15
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Part VII	Compensation of Officers,	Directors, Trustee	s, Key Employees	, Highest 🤇	Compensated
	Employees, and Independe	ent 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.

See instructions for the order in which to list the persons above.

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

(A)	(B)	l	211120			npo	noui	(D)	(E)	(F)
		(C) Position			n				Estimated	
Name and title	Average hours per		(do not check more than one box, unless person is both an			than		Reportable compensation	Reportable compensation	amount of
	week			r and a director/trustee)				from	from related	other
	(list any	tor						the	organizations	compensation
	hours for	- direc				eq		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			en sati		(W-2/1099-MISC)	· · · · ·	organization
	organizations	l trus	nal tri		oyee	duo				and related
	below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	ner			organizations
	line)	Indi	Inst	Officer	Key	High	Former			
(1) JOHN ANNER	2.00								_	
BOARD CHAIR (THROUGH 2/1/2020)		Х		Х				0.	0.	0.
(2) KIRBY RYAN	2.00									
BOARD CHAIR		Х		Х				0.	0.	0.
(3) WILLIAM KERR	1.50									
TREASURER		X		X				0.	0.	0.
(4) ELIZABETH WAGNER	1.50									
SECRETARY		X		X				0.	0.	0.
(5) MICHAEL BENNETT	1.00									
DIRECTOR		X						0.	0.	0.
(6) JEFF CHANIN	1.00									
DIRECTOR		X						0.	0.	0.
(7) VANI KEIL	1.00									
DIRECTOR		X						0.	0.	0.
(8) AILEEN LEE	1.00									
DIRECTOR		X						0.	0.	0.
(9) JAMES LUSSIER	1.00									
DIRECTOR		X						0.	Ο.	0.
(10) ROBERT RICHMOND	1.00									
DIRECTOR		X						0.	Ο.	0.
(11) JIM TOLONEN	1.00									
DIRECTOR		X						0.	0.	0.
(12) ADAM TRATT	1.00									
DIRECTOR		X						0.	0.	0.
(13) ROBERT WATT	1.00									
DIRECTOR		x						0.	0.	0.
(14) MICHAEL WEBSTER	40.00									
EXECUTIVE DIR. (THROUGH 1/31/20)		1		x				194,000.	0.	12,926.
(15) MADHAVI KUSHNER	40.00									
EXECUTIVE DIRECTOR		1		x				146,446.	0.	21,530.
(16) DANIELLE KNIGHT	40.00							-		
DIRECTOR OF FINANCE & ADMIN.		1		x				151,545.	Ο.	10,992.
(17) DIANA SOKOLOVE	40.00									<u>.</u>
CONSERVATION PROGRAM DIRECTOR		1				x		128,857.	Ο.	11,583.
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Par	t VII Section A. Officers, Directors, Trus		ploy	vees			ighe	st C					
	(A) Name and title	(B) Average hours per week (list any	box offi	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			e than is bot	h an	(D) Reportable compensation from the	(E) Reportable compensatior from related organizations		Estin amou ot	F) nated unt of ner nsation
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS		fron organ and r	n the ization elated zations
	DOROTHY GANNES OF DEVELOPMENT (THROUGH 3/25/20	40.00					x		118,676.		Ο.	9	,049.
	JOSEPH KELLY OF MARKETING (THROUGH 5/22/20)	40.00					x		151,164.		0.	12	,121.
											_		
	Subtotal								890,688.		0.	78	,201.
d	Total from continuation sheets to Part V Total (add lines 1b and 1c)								0. 890,688.		0.	78	0. ,201.
2	Total number of individuals (including but r compensation from the organization	not limited to th	iose	liste	ed a	bove	e) wł	no r	eceived more than \$100	,000 of reportable	9		6
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s							-	, , ,			3	es No X
4	For any individual listed on line 1a, is the su and related organizations greater than \$15	um of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from	the organization			X
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," <i>corr</i>	accrue comper	nsat	ion f	rom	n any	y unr	elat	ed organization or indivi	dual for services		5	X
1 1	tion B. Independent Contractors Complete this table for your five highest co	mpensated inc	depe	ende	ent c	cont	racto	ors t	hat received more than	\$100,000 of com	pensa	ation fro	m
	the organization. Report compensation for (A)					with	or w	rithir	(B)			(C)	
	Name and business	address	N	ONE	5				Description of s	ervices	C	ompens	ation
2	Total number of independent contractors (i	•	ot li	mite	d to	tho	se li: ∩	stec	d above) who received m	ore than			
	\$100,000 of compensation from the organi	zation 🕨					0					Form 99	0 (2019)

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			Check if Schedule O contains a response	or note to any lin	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt	(C) Unrelated business revenue	(D) Revenue excluded
nts its	1	а	Federated campaigns 1a					
, Gifts, Grants nilar Amounts			Membership dues 1b					
Ğ,			Fundraising events 1c	6,263.				
ifts ar A			Related organizations					
Contributions, Gif and Other Similar			Government grants (contributions) 1e	355,518.				
Sir				555,510.				
utio		T	All other contributions, gifts, grants, and	660 797				
<u>e</u> ti				669,787.				
ont		g	Noncash contributions included in lines 1a-1f	56,459.	4 001 560			
āČ		h	Total. Add lines 1a-1f	1	4,031,568.			
				Business Code				
9	2	а	PROGRAM FEES	900099	24,000.	24,000.		
Program Service Revenue		b						
Se		с						
am		d						
- BC		e						
Pro			All other program service revenue					
			Total. Add lines 2a-2f		24,000.			
_	3	y	Investment income (including dividends, inter		21,0000			
	3				1,025.			1,025.
			other similar amounts)		1,023.			1,023.
	4		Income from investment of tax-exempt bond p					
	5		Royalties					
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b Less: rental expenses 6b						
	c Rental income		Rental income or (loss) 6c					
		d	Net rental income or (loss)	🕨				
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 247 .	,				
		b	Less: cost or other basis					
e			and sales expenses					
en		c	Gain or (loss)					
Sev			Net gain or (loss)		247.			247.
ther Revenue	•		Gross income from fundraising events (not					
ţ	0	d	6 9 6 9					
ò								
			contributions reported on line 1c). See	0				
			Part IV, line 18 8a	-				
			Less: direct expenses 8b		0			
			Net income or (loss) from fundraising events	<u>,</u>	0.			
	9	а	Gross income from gaming activities. See					
			Part IV, line 19	1				
		b	Less: direct expenses 9b					
		с	Net income or (loss) from gaming activities	🕨				
	10	а	Gross sales of inventory, less returns					
			and allowances 10a	a				
		b	Less: cost of goods sold 10k	0				
			Net income or (loss) from sales of inventory	1				
		-		Business Code				
sno	44	~		Ducinicate Court				
Dec	11							
ven		b						
Miscellaneous Revenue		c						
Μi			All other revenue					
			Total. Add lines 11a-11d			24 000		1 070
	12		Total revenue. See instructions	🕨	4,056,840.	24,000.	0.	1,272.
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Form 990 (2019)

THE CORAL REEF ALLIANCE

 Part VIII
 Statement of Revenue

 Check if Schedule O contains a response or r
 note to any line in this Part VIII THE CORAL REEF ALLIANCE

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).

Do	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
2	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
3	C I				
	organizations, foreign governments, and foreign	278,285.	278,285.		
	individuals. See Part IV, lines 15 and 16	270,203.	270,203.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	111 160	188,216.	102 040	60 006
_	trustees, and key employees	441,162.	100,210.	183,940.	69,006
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 410 000			
7	Other salaries and wages	1,410,262.	1,053,755.	92,784.	263,723
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	45,402.	28,789.	7,541.	9,072
9	Other employee benefits	133,020.	84,347.	22,094.	26,579
0	Payroll taxes	116,878.	74,541.	19,218.	23,119
1	Fees for services (nonemployees):				
а	Management				
b		1,837.	1,837.		
с	Accounting	16,700.		16,700.	
	Lobbying	78,839.	78,839.		
e		,	,		
f					
g	column (A) amount, list line 11g expenses on Sch 0.)	372,145.	301,807.	58,279.	12,059
~		572,145.	501,007.	50,275.	12,000
2	Advertising and promotion	86,199.	76,164.	1,819.	8,216
3	Office expenses	00,199.	/0,104.	1,019.	0,210
4	Information technology				
5	Royalties	100 050	0.0.01	10 000	10 055
6	Occupancy	128,250.	96,601.	12,692.	18,957
7	Travel	19,793.	14,832.	2,232.	2,729
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	4,509.	3,338.	469.	702
3	Insurance				
4	Other expenses, Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	$m \sigma \pi \pi \pi \pi \sigma \pi \sigma \pi \sigma \pi \sigma \sigma \sigma \sigma \sigma \sigma \sigma \sigma $	133,555.	129,104.	1,741.	2,710
a b	PRINTING AND COPYING	62,367.	22,149.	1,009.	39,209
	BANK CHARGES	29,340.	7,430.	241.	21,669
С С	DUES AND SUBSCRIPTIONS	28,789.	6,198.	8,887.	13,704
d					
е	· · · · · · · · · · · · · · · · · · ·	42,771.	21,412.	2,438.	18,921
5	Total functional expenses. Add lines 1 through 24e	3,430,103.	2,467,644.	432,084.	530,375
6	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)				

11530324 138273 CORALREEF

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CORALRE1

Cash - non-interest-bearing 2,042,141. 2 Savings and temporary cash investments 29,338. 3 Pledges and grants receivable, net 494,457. 4 Accounts receivable, net trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disgualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 Inventories for sale or use 8 57,367. Prepaid expenses and deferred charges 9 34,168. basis. Complete Part VI of Schedule D _____ 10a 30,383. 8,294. 10c Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 7,875. Other assets. See Part IV, line 11 15 2,739,599. 16 Total assets. Add lines 1 through 15 (must equal line 33) 262,501. 17 Accounts payable and accrued expenses 492,817. Grants payable 18 9,140. 19 Deferred revenue Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21

THE CORAL REEF ALLIANCE Part X Balance Sheet

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

1,355,286. 2 825,148. 3 326,794. 4 5 Loans and other receivables from any current or former officer, director, 6 Assets 7 8 36,673. 9 **10a** Land, buildings, and equipment: cost or other 3,785. b Less: accumulated depreciation 10b 11 12 13 14 8,225. 15 3,402,268. 16 148,193. 17 318,696. 18 333,501. 19 20 21 22 Loans and other payables to any current or former officer, director, _iabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 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 25 764,458. 800,390. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🛛 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 944,157. 863,026. Net assets without donor restrictions 27 27 1,030,984. 1,738,852. Net assets with donor restrictions 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 Retained earnings, endowment, accumulated income, or other funds 31 31 1,975,141. 2,601,878. Total net assets or fund balances 32 32 2,739,599. 3,402,268. 33 33 Total liabilities and net assets/fund balances ... Form **990** (2019)

(B)

End of year

846,357.

CORALRE1

(A)

Beginning of year

100,127.

1

1

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	990 (2019) THE CORAL REEF ALLIANCE	94-32	11245	Pag	_{je} 12
Pa	rt 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	4,056		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,430		
3	Revenue less expenses. Subtract line 2 from line 1	3	626		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,975),1	41.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,601	.,8	78.
Pa	rt 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: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				

Form **990** (2019)

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SC	HED	ULE	Α

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

	OMB No. 1545-0047				
	2019				
	Open to Public Inspection				
Employer identification number					

Name of the o	rganization
---------------	-------------

		CORAL REEF						4-3211245		
Part I	Reason for Public	Charity Status (All organizations must co	omplete th	is part.) Se	ee instructions	S.			
The orga	nization is not a private found	lation because it is:	(For lines 1 through 12. c	heck only	one box.)					
1 🗂	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)									
3	A hospital or a cooperative					ii)				
	1 ' '	1 0				,	(iiii) Entor	the beenitel's name		
4 📖	A medical research organiz	allon operated in co	injunction with a nospital	uescribed	I III Sectio		(III). Enter	the nospital's name,		
	city, and state:									
5	An organization operated for		ollege or university owned	d or opera	ted by a g	overnmental u	init descril	bed in		
	section 170(b)(1)(A)(iv). (0									
6	A federal, state, or local go	vernment or governr	mental unit described in s	section 17	70(b)(1)(A)	(v).				
7 X	An organization that norma	Illy receives a substa	antial part of its support f	rom a gov	ernmental	l unit or from t	ne genera	public described in		
	section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8	A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Parl	t II.)						
9	An agricultural research or	ganization described	l in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college		
	or university or a non-land-									
	university:	5 5 5	(,		, .	,				
10	An organization that norma	Illy receives: (1) more	than 33 1/3% of its sur	port from	contributi	ons members	hin fees	and gross receipts from		
	activities related to its exer									
	income and unrelated busin				sses acqu		yanization	alter Julie 30, 1973.		
44	See section 509(a)(2). (Co	• •	in a ha ta at fan an blia aa	fate Caa		O(-)(4)				
11	An organization organized	-	•	•			حالة الارتجار والا			
12	An organization organized									
	more publicly supported or	-						Sheck the box in		
Г	lines 12a through 12d that									
a∟	Type I. A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported or	ganization(s), t	ypically by	/ giving		
	the supported organization	on(s) the power to re	egularly appoint or elect a	a majority	of the dire	ctors or truste	es of the s	supporting		
_	organization. You must o	complete Part IV, Se	ections A and B.							
b	Type II. A supporting org	anization supervised	d or controlled in connec	tion with if	ts support	ed organizatio	n(s), by ha	aving		
	control or management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	ge the su	oported		
	organization(s). You mus	t complete Part IV,	Sections A and C.							
с [Type III functionally inte	grated. A supportin	g organization operated	in connec	tion with,	and functional	ly integrat	ed with,		
	its supported organizatio									
d	Type III non-functionally						ted organ	ization(s)		
	that is not functionally inf									
	requirement (see instruct			-			anatom			
а Г	Check this box if the orga									
e∟	0					а турет, туре	п, туре п			
	functionally integrated, o		nally integrated support	ing organi	zation.					
	ter the number of supported	•								
g Pr	ovide the following information			(iv) Is the orga	nization listed	(++) A reactions of	manatawi			
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of support (see in		(vi) Amount of other support (see instructions)		
	organization		above (see instructions))	Yes	No	Support (See III	311 40110113)			
Total										
	Paperwork Reduction Act N	latica coo the last	ructions for Form 000 a	r 000_E7	020001 00	05.10 Coho r		I rm 990 or 990-EZ) 2019		
	raperwork neulouin ACI	vouce, see the inst	13		932021 09-	-20-19 301180		1111 990 01 990-EZJ 2019		

2019.05080 THE CORAL REEF ALLIANCE

Schedule A (Form 990 or 990-EZ) 2019 THE CORAL REEF ALLIANCE

9<u>4-3211245 Page 2</u>

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.)

	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	(0) 2010	(0) 2010	(0) 2017	(0) 2010	(0) 2010	(i) iotai
	membership fees received. (Do not						
	include any "unusual grants.")	3,256,953.	2,821,206.	4,401,536.	2,401,883.	4,031,568.	16,913,146.
2	Tax revenues levied for the organ-	-,		_,,	_,,		
-	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
Ŭ	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	3,256,953.	2,821,206.	4,401,536.	2,401,883.	4,031,568.	16,913,146
5				-,,	_,,		
5	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,						
							3,550,247
6	Public support. Subtract line 5 from line 4.						13,362,899
	ction B. Total Support						13,302,000
	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	3,256,953.	2,821,206.	4,401,536.	2,401,883.	4,031,568.	16,913,146
8	Gross income from interest,	5,250,555.	2,021,200.	1,101,000.	2,401,003.	+,031,300.	10,919,140
0							
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources	423.	214.	633.	1,665.	1,025.	3,960.
9		123.	211.	055.	1,003.	1,025.	5,5000
9	activities, whether or not the						
	business is regularly corriad on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
44	Total support. Add lines 7 through 10						16,917,106
12	Gross receipts from related activities,		20)			12	10,517,100
	First five years. If the Form 990 is for			fourth or fifth tox			
13	organization, check this box and stop	•	inst, second, trind,	, iourtii, or intii tax	year as a section	1501(0)(5)	
_	ction C. Computation of Publi	ic Support Per	centage				
Se							
				lump (f))		14	78,99 0
14	Public support percentage for 2019 (I	ine 6, column (f) div	ided by line 11, co			14	
14 15	Public support percentage for 2019 (li Public support percentage from 2018	ine 6, column (f) div Schedule A, Part II	ided by line 11, co , line 14			15	79.76 %
14 15	Public support percentage for 2019 (li Public support percentage from 2018 a 33 1/3% support test - 2019. If the o	ine 6, column (f) div Schedule A, Part II organization did not	ided by line 11, co , line 14 check the box on	line 13, and line 14	4 is 33 1/3% or m	15 nore, check this bo	79.76 9 x and
14 15 16a	Public support percentage for 2019 (li Public support percentage from 2018 a 33 1/3% support test - 2019. If the o stop here. The organization qualifies	ine 6, column (f) div Schedule A, Part II organization did not as a publicly suppo	ided by line 11, co , line 14 check the box on rted organization	line 13, and line 14	4 is 33 1/3% or m	15 nore, check this bo	79.76 9 x and ▶ X
14 15 16a	Public support percentage for 2019 (li Public support percentage from 2018 a 33 1/3% support test - 2019. If the o stop here. The organization qualifies o 33 1/3% support test - 2018. If the o	ine 6, column (f) div Schedule A, Part II organization did not as a publicly suppo organization did not	ided by line 11, co , line 14 check the box on rted organization check a box on lin	line 13, and line 14 line 13 or 16a, and li	4 is 33 1/3% or m ine 15 is 33 1/3%	15 hore, check this bo or more, check th	79.76 9 x and is box ► X
14 15 16a	Public support percentage for 2019 (li Public support percentage from 2018 a 33 1/3% support test - 2019. If the o stop here. The organization qualifies a 33 1/3% support test - 2018. If the o and stop here. The organization quali	ine 6, column (f) div Schedule A, Part II organization did not as a publicly suppo organization did not fies as a publicly su	ided by line 11, co , line 14 check the box on rted organization check a box on lin upported organizat	line 13, and line 14 lie 13 or 16a, and li ion	4 is 33 1/3% or m ine 15 is 33 1/3%	15 hore, check this bo or more, check th	79.76 9 x and is box
14 15 16a	Public support percentage for 2019 (li Public support percentage from 2018 a 33 1/3% support test - 2019. If the o stop here. The organization qualifies a 33 1/3% support test - 2018. If the o and stop here. The organization quali a 10% -facts-and-circumstances test	ine 6, column (f) div Schedule A, Part II organization did not as a publicly suppo organization did not fies as a publicly su t - 2019. If the organ	ided by line 11, co , line 14 check the box on rted organization check a box on lin ipported organizat nization did not ch	line 13, and line 14 le 13 or 16a, and li ion eck a box on line	4 is 33 1/3% or m ine 15 is 33 1/3% 13, 16a, or 16b, a	15 nore, check this bo or more, check th and line 14 is 10%	79.76 9 x and is box or more,
14 15 16a	Public support percentage for 2019 (li Public support percentage from 2018 a 33 1/3% support test - 2019. If the or stop here. The organization qualifies a 33 1/3% support test - 2018. If the or and stop here. The organization quali a 10% -facts-and-circumstances test and if the organization meets the "fac	ine 6, column (f) div Schedule A, Part II organization did not as a publicly suppo organization did not fies as a publicly su t - 2019. If the organ ts-and-circumstance	ided by line 11, co , line 14 check the box on rted organization check a box on lin upported organizat nization did not ch es" test, check this	line 13, and line 14 le 13 or 16a, and li ion leck a box on line s box and stop he	4 is 33 1/3% or m ine 15 is 33 1/3% 13, 16a, or 16b, a r e. Explain in Par	15 ore, check this bo or more, check th and line 14 is 10% t VI how the organ	79.76 9 x and is box or more, ization
14 15 16a k	Public support percentage for 2019 (li Public support percentage from 2018 a 33 1/3% support test - 2019. If the or stop here. The organization qualifies a 33 1/3% support test - 2018. If the or and stop here. The organization quali a 10% -facts-and-circumstances test and if the organization meets the "fac meets the "facts-and-circumstances"	ine 6, column (f) div Schedule A, Part II organization did not as a publicly suppo organization did not ifies as a publicly su t - 2019. If the organits- and-circumstance test. The organizati	ided by line 11, co , line 14 check the box on rted organization check a box on lin upported organizat nization did not ch es" test, check this on qualifies as a p	line 13, and line 14 le 13 or 16a, and li ion eck a box on line s box and stop he ublicly supported	4 is 33 1/3% or m ine 15 is 33 1/3% 13, 16a, or 16b, a r e. Explain in Par organization	15 ore, check this bo or more, check th and line 14 is 10% t VI how the organ	79.76 9 x and is box or more, ization ▶□
14 15 16a k	Public support percentage for 2019 (I Public support percentage from 2018 a 33 1/3% support test - 2019. If the o stop here. The organization qualifies a 33 1/3% support test - 2018. If the o and stop here. The organization quali a 10% -facts-and-circumstances test and if the organization meets the "fac meets the "facts-and-circumstances test o 10% -facts-and-circumstances test	ine 6, column (f) div Schedule A, Part II organization did not as a publicly suppo organization did not ifies as a publicly su t - 2019. If the organizati test. The organizati t - 2018. If the organizati	ided by line 11, co , line 14 check the box on rted organization check a box on lin upported organizat nization did not ch es" test, check this on qualifies as a p nization did not ch	line 13, and line 14 le 13 or 16a, and li ion eck a box on line s box and stop he ublicly supported eck a box on line	4 is 33 1/3% or m ine 15 is 33 1/3% 13, 16a, or 16b, a r e. Explain in Par organization 13, 16a, 16b, or 1	15 nore, check this bo or more, check th and line 14 is 10% t VI how the organ 7a, and line 15 is	79.76 9 x and is box or more, ization ▶□
14 15 16a k	Public support percentage for 2019 (I Public support percentage from 2018 a 33 1/3% support test - 2019. If the o stop here. The organization qualifies a 33 1/3% support test - 2018. If the o and stop here. The organization quali a 10% -facts-and-circumstances test and if the organization meets the "fact meets the "facts-and-circumstances test more, and if the organization meets the	ine 6, column (f) div Schedule A, Part II organization did not as a publicly suppo organization did not ifies as a publicly su t - 2019. If the organizati test. The organizati t - 2018. If the organizati t - 2018. If the organizati	ided by line 11, co , line 14 check the box on rted organization check a box on lin upported organizat nization did not ch es" test, check this on qualifies as a p nization did not ch nstances" test, chec	line 13, and line 14 ion eck a box on line s box and stop he ublicly supported eck a box on line eck this box and s	4 is 33 1/3% or m ine 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Par organization 13, 16a, 16b, or 1 top here. Explain	15 or more, check this bo or more, check th and line 14 is 10% t VI how the organ 7a, and line 15 is in Part VI how the	79.76 9 x and is box or more, ization 10% or
14 15 16a k	Public support percentage for 2019 (li Public support percentage from 2018 a 33 1/3% support test - 2019. If the or stop here. The organization qualifies a 33 1/3% support test - 2018. If the or and stop here. The organization quali a 10% -facts-and-circumstances test and if the organization meets the "facts- meets the "facts-and-circumstances test more, and if the organization meets the organization meets the "facts-and-circumstances test	ine 6, column (f) div Schedule A, Part II organization did not as a publicly suppo organization did not fifes as a publicly su t - 2019. If the organ ts-and-circumstance test. The organization t - 2018. If the organ te "facts-and-circum sumstances" test. T	ided by line 11, co , line 14 check the box on rted organization check a box on lin upported organizat nization did not ch es" test, check this on qualifies as a p nization did not ch nstances" test, che he organization qu	line 13, and line 14 ion eck a box on line s box and stop he ublicly supported eck a box on line eck this box and s alifies as a publicl	4 is 33 1/3% or m ine 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Par organization 13, 16a, 16b, or 1 top here. Explain ly supported orga	15 ore, check this bo or more, check th and line 14 is 10% t VI how the organ 7a, and line 15 is in Part VI how the nization	79.76 % x and is box or more, ization 10% or

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Schedule A (Form 990 or 990-EZ) 2019 THE CORAL REEF ALLIANCE

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.)

	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2	2019	(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 per- formed, 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 bus-								
	iness under section 513								
4	Tax revenues levied for the organ-								
	ization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge \dots								
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								
	Public support. (Subtract line 7c from line 6.)								
Sec	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2	2019	(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								
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
2	Other income. Do not include gain or loss from the sale of capital								
12	assets (Explain in Part VI.)								
	First five years. If the Form 990 is for	r the organization'	s first, second, thi	I ird. fourth or fifth t	I ax year as a section	1 = 501(c)(c)	3) organiz	ation	
	check this box and stop here	-			-				
Ser	ction C. Computation of Publ					<u></u>			
	Public support percentage for 2019 (colump (fl)		15			%
15 16	Public support percentage from 2018					16			%
	ction D. Computation of Invest								70
	•					17			0/
	Investment income percentage for 20								%
	Investment income percentage from 2						anal lina d	7 := := = t	%
198	33 1/3% support tests - 2019. If the						and line I		
le le	more than 33 1/3%, check this box a						0.1/00/	► L	
D	33 1/3% support tests - 2018. If the								
00	line 18 is not more than 33 1/3%, che								\dashv
	Private foundation. If the organization	n did not check a	box on line 14, 19	9a, or 19b, check t					
3202	23 09-25-19			15	Sch	edule A (⊦orm 990	or 990-EZ) 2	:019
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10	JAH IJUAIJ CURALKEI	ы. ZU.	T3.02000	THE CORAL	REEF ALL	TUNCE		CORALRI	لل ت

1

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3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? *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.*
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **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.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in 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).
- **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? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019 THE CORAL REEF ALLIANCE Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion 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		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
' a	The organization satisfied the Activities Test. Complete line 2 below.	•		
a b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	2)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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? <i>Provide details in</i> Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
93202	5 09-25-19 Schedule A (Form 9	90 or 99	90-EZ)	2019
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Schedule A (Form 990 or 990-EZ) 2019 THE CORAL REEF ALLIANCE

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.

Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion 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	Check here if the current year is the organization's first as a non-functional	v integrate	ed Type III supporting or	anization (see

7 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) 2019

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Schedule A (Form 990 or 990 EZ) 2019 THE CORAL REEF ALLIANCE

Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	U
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
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	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
с	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
-	Applied to underdistributions of prior years			
-	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
6	5			
	and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7				
1	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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	Supplemental Informat Part IV, Section A, lines 1, 2, 3I line 1; Part IV, Section D, lines Section D, lines 5, 6, and 8; an (See instructions.)	d Part V, Section E, I	ines 2, 5, an	d 6. Also	o complete t	his part fo	r any additional infor	mation.
32028 09-25-1	9			20			Schedule A (For	m 990 or 990-EZ) 2

SCHEDULE C Political Campaign and Lobbying Activities					OMB No. 1545-0047
(Form 990 or 990-EZ)	2010				
	LUIJ				
Department of the Treasury	-	if the organization is described			openiterabile
Internal Revenue Service		to www.irs.gov/Form990 for in			Inspection
-		Form 990, Part IV, line 3, or For		e 46 (Political Campaig	yn Activities), then
	-	plete Parts I-A and B. Do not com		De met e met lete Deut l	D
)1(c)(3)) organizations: Complete F	Parts I-A and C below.	Do not complete Part I-	В.
Section 527 organization	•	•	m 000 EZ Davt \// liv	o 47 /L obbying Activit	ica) than
-		Form 990, Part IV, line 4, or For have filed Form 5768 (election und			
	e	have NOT filed Form 5768 (election dife			-
	e	Form 990, Part IV, line 5 (Proxy			
Tax) (see separate inst					, ,
 Section 501(c)(4), (5)), or (6) organizat	tions: Complete Part III.			
Name of organization		•		Em	nployer identification number
		AL REEF ALLIANCE			94-3211245
Part I-A Comple	ete if the org	anization is exempt unde	r section 501(c) o	or is a section 527	organization.
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities in	n Part IV.	
2 Political campaign	activity expendit	ures		Þ	►\$
3 Volunteer hours for	political campai	gn activities			
		anization is exempt unde		•	
		incurred by the organization unde			
		incurred by organization manager			
		n 4955 tax, did it file Form 4720 fo			
b If "Yes," describe in					
		anization is exempt unde	r section 501(c),	except section 50	1(c)(3).
-		by the filing organization for sect			\$
		ization's funds contributed to othe			· · · · · · · · · · · · · · · · · · ·
			-		►\$
		. Add lines 1 and 2. Enter here an			
				▶	►\$
		1120-POL for this year?			Yes No
5 Enter the names, a	ddresses and en	nployer identification number (EIN)	of all section 527 pol	itical organizations to w	hich the filing organization
	-	tion listed, enter the amount paid			-
	-	omptly and directly delivered to a			arate segregated fund or a
political action com	mittee (PAC). If	additional space is needed, provic	le information in Part I	V.	
(a) Name	•	(b) Address	(c) EIN	(d) Amount paid fron filing organization's funds. If none, enter -(contributions received and

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

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Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019	THE	CORAL	REEF	ALLIANCE
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Par	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under							
	section 501(h)).							
A Cł	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 Cł	neck 🕨 📃 if the filing organization check	ed box A and "limited control" provisions apply.						
	Limits on Lob! (The term "expenditures" m	(a) Filing organization's totals	(b) Affiliated group totals					
1a	Total lobbying expenditures to influence pub	lic opinion (grassroots lobbying)						
b	Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	78,839.					
с	Total lobbying expenditures (add lines 1a and	d 1b)	78,839.					
d			3,351,264.					
е	Total exempt purpose expenditures (add line	s 1c and 1d)	3,430,103.					
f	Lobbying nontaxable amount. Enter the amo	unt from the following table in both columns.	321,505.					
	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% o	f line 1f)	80,376.					
h	Subtract line 1g from line 1a. If zero or less, e	enter -0-	0.					
i	Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.					
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720	_					
	reporting section 4911 tax for this year?			Yes No				

4-Year Averaging Period Under Section 501(h)

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

nditures During 4 Vec abby . .

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total			
2a Lobbying nontaxable amount		326,215.	324,516.	321,505.	972,236.			
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					1,458,354.			
c Total lobbying expenditures		24,317.	3,927.	78,839.	107,083.			
d Grassroots nontaxable amount		81,554.	81,129.	80,376.	243,059.			
e Grassroots ceiling amount (150% of line 2d, column (e))					364,589.			
f Grassroots lobbying expenditures								

Schedule C (Form 990 or 990-EZ) 2019

932042 11-26-19

Schedule C (Form 990 or 990-EZ) 2019 THE CORAL REEF ALLIANCE

94-3211245 Page 3

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 e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(b)	
of the	e lobbying activity.	Yes	Νο	Amo	ount
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: Volunteers?				
h	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	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)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ection	
	501(0)(0).			Yes	No
-	Ware substantially all (00% as mare) dues resained handeductible by members?		1	103	
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
3 Par	t III-B Complete if the organization is exempt under section 501(c)(4), section			ction	
l ai	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				e 3. is
	answered "Yes."		. ()	,	0 0, 10
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politi				
_	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	oolitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part I	I-A, lines 1 a	and 2 (see	
instru	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PAI	RT II-A, LINE 1 AND LINE 2				
COI	RAL CONTRACTED LOBBYING SERVICES IN THE STATE OF HA	WAII	TO SUP	PORT	
BU	ILDING A WASTEWATER TREATMENT FACILITY IN THE COMMU	NITY C)F PUA	KO ON	
		、			
HAV	VAII ISLAND TO PROTECT ITS CORAL REEFS FROM SEWAGE	POLLUI	TION.	SERVIC	CES
WEI	RE ALSO CONTRACTED TO SUPPORT BILLS THAT WOULD LEAD	TO MI	TIGAT	ION OF	7
ਸ਼ੁਰ	SIDENTIAL CESSPOOL IMPACTS ON CORAL REEFS ACROSS TH	E CUN7	ν E		
1/12/	TERMITAL CEODIONI IMPACIO ON COLAN VEELO ACKODO IN			000 or 000	-E7\ 2010
93204	3 11-26-19	Schedu	ie c (rorm	390 OL 99()-EZ) 2019
	28				

11530324 138273 CORALREEF

2019.05080 THE CORAL REEF ALLIANCE

SCHEDULE D

(Form 9	90)
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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.



Employer identification number

94-3211245

Department of the Treasury Internal Revenue Service Name of the organization

THE CORAL REEF ALLIANCE Part Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

		(a) Donor advised funds	(b) Funds ar	d other acco	unts
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 v	writing that the assets held in donor ad	vised fur	ds		
	are the organization's property, subject to the organization's	exclusive legal control?			Yes	N
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can	be used (only		
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpo	se confei	ring		
	impermissible private benefit?				. Yes	
Pa	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990), Part IV	, line 7.		
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).				
	Preservation of land for public use (for example, recrea	tion or education) Preservation	of a histo	orically impo	rtant land are	a
	Protection of natural habitat	Preservation	of a certi	fied historic	structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the for	m of a co	onservation	easement on	the last
	day of the tax year.				at the End of t	
а				2a		
b				2b		
с				2c		
d						
	listed in the National Register			2d		
3	Number of conservation easements modified, transferred, rel			ization duri	ng the tax	
	year 🕨		0		0	
4	Number of states where property subject to conservation eas	sement is located				
5	Does the organization have a written policy regarding the per		 of			
-	violations, and enforcement of the conservation easements it				Yes	N
6	Staff and volunteer hours devoted to monitoring, inspecting,					
•		nanaling of violatione, and officienty of	onconvaci		te danng trie	your
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conser	vation ea	isements di	iring the vear	
			valion of		anig the year	
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 1	70(h)(4)(F	3)(i)		
•	and section 170(h)(4)(B)(ii)?				Yes	
9	In Part XIII, describe how the organization reports conservation				100	
	balance sheet, and include, if applicable, the text of the footr	-			s the	
	organization's accounting for conservation easements.	lote to the organization s infancial state			5 110	
) ai	rt III Organizations Maintaining Collections of	f Art. Historical Treasures, or	Other	Similar A	ssets.	
	Complete if the organization answered "Yes" on Form		e anor	onnar /	000101	
10	If the organization elected, as permitted under FASB ASC 95		at and ba	lanco choot	worko	
Ia	of art, historical treasures, or other similar assets held for put					
	service, provide in Part XIII the text of the footnote to its finar				C	
h				a abaat war	lio of	
b						
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in it	intrierario	e or public s	service,	
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1					
_	(ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, historical treater the following and the barren start works of art, historical treater the following and the barren start works of art, historical treater the following and the barren start works of art, historical treater the following and the barren start works of art, historical treater the following and the barren start works of art, historical treater the following and the barren start works of art, historical treater the following and the barren start works of art, historical treater the following and the barren start works of art, historical treater treater the following and the barren start works of art, historical treater trea		cial gain,	provide		
	the following amounts required to be reported under FASB A	-		•		
	· · · · · · · · · · · · · · · · · · ·					
	Assets included in Form 990, Part X					
	For Paperwork Reduction Act Notice, see the Instructions	for Form 000		Sche	dule D (Form	1 990) 20 [.]
ΗA	,,,,,,	s for Form 990.		Ochic		
	1 10-02-19			Oche		
3205	1 10-02-19	29 5080 THE CORAL REEF				ALRE

Sche	dule D (Form 990) 2019 THE COR	AL REEF AL	LIAN	ICE			9	94-32	11245	D Pa	age 2
Pa	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, c	or Other					
3	Using the organization's acquisition, accession										
	collection items (check all that apply):										
а	Public exhibition	c	1	Loan or exc	hange progra	ım					
b	Scholarly research	e		Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how t	hey further t	he organizati	on's exem	npt purpo	se in Par	t XIII.		
5	During the year, did the organization solicit o	r receive donations	of art, h	istorical trea	asures, or othe	er similar a	assets		_		_
	to be sold to raise funds rather than to be ma								Yes		No
Pa	t IV Escrow and Custodial Arrang		ete if the	e organizatio	on answered "	'Yes" on F	orm 990 ⁻	, Part IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodi		•						-		-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:							
									Amount		
	Beginning balance										
	Additions during the year										
е	Distributions during the year										
f	0								1		1
	Did the organization include an amount on Fo						y?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Pa	t V Endowment Funds. Complete in							aava haali	() [heeli
4.	De sinsis e duran halanaa	(a) Current year	(b)⊦	Prior year	(c) Two year	s back (c	a) Three ye	ears back	(e) Four	years	DACK
	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
	Administrative expenses										
-	End of year balance	ant year and belong									
2	Provide the estimated percentage of the curr Reard designated or guasi and summat			rg, column (a	a)) neiù as.						
	Board designated or quasi-endowment ▶ Permanent endowment ▶	%	_%								
		⁹⁰									
C	The percentages on lines 2a, 2b, and 2c sho	-									
20	Are there endowment funds not in the posse	•	ation th	at are hold a	and administa	rad for the	orgoniz	ation			
Ja	by:	ssion of the organiz	ation th				e organiz	ation	Г	Yes	No
	(i) Unrelated organizations									105	
	(ii) Related organizations										
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on §	Schedule R?)				3b		
4	Describe in Part XIII the intended uses of the								00	1	
	t VI Land, Buildings, and Equipm		Swinent								
	Complete if the organization answered		0. Part I	V. line 11a. S	See Form 990	. Part X. li	ine 10.				
	Description of property	(a) Cost or c		1	t or other		cumulate	d	(d) Book	value	<u> </u>
		basis (investr			(other)	• • •	reciation		(, 200)		
1 a	Land			1							
	Buildings			1							
	Leasehold improvements			1							
	Equipment			3	34,168.		30,38	33.		3,78	85.
	Other				-		-			-	
	Add lines 1a through 1e. (Column (d) must e		X, colui	mn (B), line 1	10c.)					3,78	85.
		,			,		5	Schedule	D (Form	-	

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Complete if the organization answered "Yes" or	n 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	5.
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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

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Sche	edule D (Form 990) 2019 THE CORAL REEF ALLIANCE		94-	3211245 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Sta	tements With Reve		
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	4,056,840.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
с				
d				
е			2e	0.
3	Subtract line 2e from line 1			4,056,840.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			4,056,840.
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	atements With Expe	enses per Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.		
1	Total expenses and losses per audited financial statements		1	3,430,103.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
с	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			3,430,103.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3.)		3,430,103.
Pa	rt 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 X, LINE 2:

THE ORGANIZATION HAS ADOPTED THE ACCOUNTING GUIDANCE RELATED TO UNCERTAIN TAX POSITIONS, AND HAS EVALUATED ITS TAX POSITIONS TAKEN FOR ALL OPEN TAX YEARS. IN MANAGEMENT'S JUDGMENT THERE ARE NO UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2020.

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Schedule D (Form 990) 2019

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(Form 990)	Complete if	the organizatio	n answered "Yes" on Form 990, Part	IV, line 14b, 1	15, or 16.	2019
Department of the Treasury			Attach to Form 990.			Open to Public
Internal Revenue Service	Go to v	www.irs.gov/Fo	orm990 for instructions and the lates	t information.		Inspection
Name of the organization					Employer	identification number
THE CORAL REEF					94-321	
Part I General Inf	ormation on A	ctivities Ou	tside the United States. Compl	ete if the orgar	nization answ	ered "Yes" on
Form 990, Part						
-	-		ds to substantiate the amount of its gr the selection criteria used to award the			X Yes No
2 For grantmakers. Des United States.	scribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and o	ther assistan	ce outside the
3 Activities per Region.	The following Parl	I, line 3 table c	an be duplicated if additional space is	needed.)		
(a) Region	(b) Number of offices in the region	employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (gram service e specific typ e(s) in the regi	e expenditures for and investments
				OCEANIA: TO CORAL REEF	SCIENCE,	
OCEANIA	1	3	DROCRAM CERVICE	MANAGEMENT		47 245
OCEANIA		3	PROGRAM SERVICE	CONSERVATIO		,
				CARIBBEAN:		
CENTRAL AMERICA AND				FUNCTIONING		
THE CARIBBEAN	1	35	PROGRAM SERVICE	EFFECTIVELY	Y MANAGED	639,926.
				ASIA: SUPPO	ORT LOCAL	
				COMMUNITIES	S CONSERVA	TION
				AND MANAGEN	MENT FOR T	HE
ASIA	1	3	PROGRAM SERVICE	DEVELOPMENT	F OF A	23,046
3 a Subtotal	3	41				710,317.
b Total from continuatio						
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	3	41				710,317.

Statement of Activities Outside the United States

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART V FOR COLUMN (E) DESCRIPTIONS Schedule F (Form 990) 2019

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SCHEDULE F

OMB No. 1545-0047

2010

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Page 2	ır any	(i) Method of valuation (book, FMV, appraisal, other)	U.S. DOLLARS					Schedule F (Form 990) 2019
	990, Part IV, line 15, fo	(h) Description of noncash assistance						Schec
94-3211245	1 "Yes" on Form ((g) Amount of noncash assistance	0				xempt	
94-32	ganization answered	(f) Manner of cash disbursement	WIRE TRANSFER				recognized as tax-e	
	omplete if the orç eded.	(e) Amount of cash grant	234,521.)				foreign country, er	
ALLIANCE	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	(d) Purpose of grant	SEE PART V				Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	
CORAL REEF ALI	anizations or Entities C 000. Part II can be duplic	(c) Region	CENTRAL AMERICA AND THE CARIBBEAN S				is listed above that are re nsel has provided a secti	r entities
THE	ir Assistance to Org eived more than \$5,0	(b) IRS code section and EIN (if applicable)					ecipient organizatior h the grantee or cou	other organizations o
Schedule F (Form 990) 2019	Part II Grants and Othe recipient who rec	1 (a) Name of organization					2 Enter total number of r by the IRS, or for whic	3 Enter total number of other organizations or entities

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Page 3		(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2019
	V, line 16.	(g) Description of noncash assistance					Sched
94-3211245	on Form 990, Part I'	(f) Amount of noncash assistance					
56	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.	(e) Manner of cash disbursement					
CE	ites. Complete if 1	(d) Amount of cash grant					
F ALLIANCE	le the United St a ed.	c) Number of recipients					
THE CORAL REEF	e to Individuals Outsic dditional space is neede	(b) Region					
Schedule F (Form 990) 2019 T	Part III Grants and Other Assistance to Individuals Outside Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance					

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	(Form 990) 2019		CORAL	REEF	ALLIANCE
Part IV	Foreign Form	S			

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

Schedule F (Form 990) 2019

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Schedule F (Form 990) 2019 THE CORAL REEF ALLIANCE 94-3211245 Part V Supplemental Information	Page 5
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.	
PART I, LINE 2:	
THE CORAL REEF ALLIANCE PROVIDES GRANTS AND ASSISTANCE THROUGH TWO	
SEPARATE PROGRAMS: 1) SUB-AWARDS TO ORGANIZATIONS WHOSE MISSION AND	
ACTIVITIES COLLABORATE WITH CORAL'S WORK AND 2) MICRO-GRANT PROGRAM THA	\T
PROVIDES SUPPORT FOR SMALL-SCALE LOCAL PROJECTS THAT ARE INTEGRAL TO	
CORAL'S MISSION AND PROGRAM ACTIVITIES IN THE REGION. THE MICRO-GRANT	
PROGRAM PROVIDES SUPPORT OUTSIDE OF THE U.S.	
FUNDING PRIORITIES ARE DETERMINED FIRST BY THE INTENTIONS OF CORAL'S	
RESTRICTED GRANTS, AND SECONDLY BY THE REGIONAL PRIORITIES ESTABLISHED	BY
THE ORGANIZATION. GRANTEES MUST COMPLETE AND CERTIFY CORAL'S STANDARD	
MICRO-GRANT AGREEMENT. DISBURSEMENT OF FUNDS ARE MANAGED BY THE	
ACCOUNTING STAFF, SUBJECT TO THE SAME APPROVAL AND DOCUMENTATION	
PROCEDURES REQUIRED FOR ALL EXPENDITURES.	
CORAL USES THE VOLUNTARY BEST PRACTICES FOR U.SBASED CHARITIES ISSUED)
BY THE US TREASURY DEPARTMENT'S ANTI-TERRORIST FINANCING GUIDELINES, AS	5

WELL AS THE PRINCIPLES OF INTERNATIONAL CHARITY TO INFORM THE PROCESS OF

APPROVAL APPLICATIONS AND MONITORING THE USE OF FUNDS. EACH MICRO-GRANT

HAS A DESIGNATED PROGRAM MANAGER AS THE PRIMARY CONTACT, AND WHO IS

RESPONSIBLE FOR OBTAINING AND DELIVERING REPORTS TO

CORAL STAFF AND FUNDERS.

PART I, LINE 3, COLUMN (E):

REGION: OCEANIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: OCEANIA: TO ADVANCE CORAL REEF

SCIENCE, MANAGEMENT, AND CONSERVATION THROUGH INTERDISCIPLINARY STUDY OF

REEF RESILIENCE, AND TO WORK WITH MANAGERS TO APPLY THIS NEW

UNDERSTANDING TO REEF CONSERVATION.

932075 10-12-19

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Schedule F (Form 990) 2019 THE CORAL REEF ALLIANCE
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Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(E) SPECIFIC TYPES OF SERVICES IN REGION: CENTRAL AMERICA AND THE

CARIBBEAN: TO DEVELOP FUNCTIONING AND EFFECTIVELY MANAGED NETWORK OF

MARINE PROTECTED AREAS IN THE BAY ISLANDS, SUPPORTED BY LOCAL

COMMUNITIES.

REGION: ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: ASIA: SUPPORT LOCAL

COMMUNITIES CONSERVATION AND MANAGEMENT FOR THE DEVELOPMENT OF A

FUNCTIONING NETWORK OF MARINE PROTECTED AREAS.

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(Form 990) For cortain Officers, Directors, Trustees, Key Employes, and Highest Dent De Public Dent De Publi	SCHEDULE J	Compensation Information	1	OMB No. 1	545-00	47				
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Department Attach to Form 990. Open to Public inspection Name of the organization Exployer identification number 94-3211245 THE CORAL REEF ALLIANCE Employer identification number 94-3211245 Image: Complete Part III to provide any of the following to of ra person listed on Form 990. Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these litens. Image: Complete Part III to provide any relevant information regarding these litens. Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these litens. Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these litens. Part VIII to provide any relevant information regarding these litens. Part of the boxes on line 1a are checked, did the organization toget with policy regarding payment or reinbursement or provision of all of the expense described above if 1two, 'complete Part III to exploin. 2 Ub the organization require substantiation prior for elembursing or allowing expenses incurred by all directors, trustees, and officers, including the GEO/Executive Director, regarding the litems checked on line 1a? 1 Indicate which, if any, of the following the organization used to establish the compensation orthogenization to establish compensation committee 1 Mean establish compensation committee 1 Approval by the board or compensation committee 1 Approval by the board or compensation committee 1 Prom section 501(c)(3, 501(c)(4, and 501(c)(2) organization must complete line 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nontixed payments nordisect or	· · ·									
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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: 4a X a Receive a severance payment or change-of-control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c X if "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. 4a X 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: 5a X a The organization? 5a X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 6a X 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: 6a X a The organization? 6a X b Any related organization? 6a X										
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organization or a related organization: 4a X a Receive a severance payment or change-of-control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c X lf "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. 4c X 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: 5a X a The organization? 5a X J J So and the organization pay or accrue any compensation contingent on the net earnings of: 5b X a The organization? 5a X J										
a Receive a severance payment or change-of-control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c X lf "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. 4c X 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: 5a X a The organization? 5a X b Any related organization? 5b X lf "Yes" on line 5a or 5b, describe in Part III. 5b X 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: 6a X a The organization? 6a X X b Any related organization? 6a X c The organization? 6a X b Any related organization? 6a X lf "Yes" on line 6a or 6b, describe in Part III. 7 X b Any related organization? <td>4 During the year, di</td> <td>d any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing</td> <td></td> <td></td> <td></td> <td></td>	4 During the year, di	d any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing								
b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c X lf "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. 4c X 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: 5a X a The organization? 5a X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 6a X 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: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 7 X 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. 7 X	organization or a re	elated organization:								
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. 4c X 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: 5a X a The organization? 5a X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 6b X 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: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 6b X 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. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initital contract exception described in Regulations section 53.4958-4(a		., .								
If "Yes" to any of lines 4a.c, list the persons and provide the applicable amounts for each item in Part III. Image: 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. 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: 5a X a The organization? 5a X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 5b X 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the retearnings of: 6a X a The organization? 6a X b Any related organization? 6b X contingent on the net earnings of: 6b X a The organization? 6a X f "Yes" on line 6a or 6b, describe in Part III. 6b X 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. 7 X 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)?										
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: 5a X a The organization? 5b X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 5b X 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: 6a X a The organization? 6a X b Any related organization? 6a X contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6a X if "Yes" on line 6a or 6b, describe in Part III. 6b X 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. 7 X 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. 8 X										
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: 5a X a The organization? 5a X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 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: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X f "Yes" on line 6a or 6b, describe in Part III. 6b X f "Yes" on line 6a or 6b, describe in Part III. 7 X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described 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 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.									
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: 5a X a The organization? 5a X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 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: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X f "Yes" on line 6a or 6b, describe in Part III. 6b X f "Yes" on line 6a or 6b, describe in Part III. 7 X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described 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 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9										
contingent on the revenues of: 5a X a The organization? 5b X b Any related organization? 5b X If "Yes" on line 5a or 5b, describe in Part III. 5b X 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: 6a X a The organization? 6a X b Any related organization? 6b X contingent on the net earnings of: 6b X a The organization? 6b X b Any related organization? 6b X If "Yes" on line 6a or 6b, describe in Part III. 7 X 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. 7 X 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. 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9										
a The organization? 5a X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 5b X 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: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described 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. 7 X 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. 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9			วท							
b Any related organization? 5b X 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: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 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. 7 X 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. 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9	•					v				
If "Yes" on line 5a or 5b, describe in Part III. Image: contingent on the net earnings of: Image: contingent on the net earnings of: a The organization? Image: contingent on the net earnings of: Image: contingent on the net earnings of: b Any related organization? Image: contingent on the form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation Image: contingent on the net earnings of: contingent on the net earnings of: Image: contingent on the net earnings of: Image: contingent on the net earnings of: b Any related organization? Image: contingent on the form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments Image: contingent 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. Image: contract that was subject to the Image: contract the contract the contract that was subject to the 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Image: contract the contrate contrate contract the contract the contract the co	a The organization?			<u>5a</u>						
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: 6a X a The organization? 6a X b Any related organization? 6b X If "Yes" on line 6a or 6b, describe in Part III. 6b X 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. 7 X 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. 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9				5b						
contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6b X If "Yes" on line 6a or 6b, describe in Part III. 6b X 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. 7 X 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 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9										
a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 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. 7 X 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 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9			วท							
b Any related organization? 6b X If "Yes" on line 6a or 6b, describe in Part III. 6b X 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. 7 X 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 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9	-	-				v				
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)?	a The organization?			6a						
 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. 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 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in If "Yes" on line 8,				6b		~				
not described on lines 5 and 6? If "Yes," describe in Part III 7 X 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 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9			_							
 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				-		v				
initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9				/		~				
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9						y				
Regulations section 53.4958-6(c)?				8		~				
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Schedule J (Form 990) 2019 THE CC	ORZ	THE CORAL REEF AL	ALLIANCE		94-3211245	245		Page 2
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed	nploy	/ees, and Highest (Compensated Emp	oloyees. Use duplica	tte 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.	be rep	orted on Schedule 90, Part VII.	J, report compensa	ttion from the organi	zation on row (i) and fro	om related organizatior	ns, described in the ins	tructions, on row (ii).
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.	bd ind	ividual must equal t	he total amount of I	⁻ orm 990, Part VII, S	section A, line 1a, appli	cable column (D) and (E) amounts for that inc	ividual.
		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a)-(i)(a)	reported as deferred on prior Form 990
(1) MICHAEL WEBSTER	Ξ	194,000.	.0	.0	5,832.	7,094.	206,926.	•0
EXECUTIVE DIR. (THROUGH 1/31/20)	: 🗉	•0	.0				• 0	.0
(2) MADHAVI KUSHNER	Ξ	146,446.	• 0	• 0	4,714.	16,816.	167,97	• 0
EXECUTIVE DIRECTOR	<u> </u>		.0			• 0	•0	•0
LE KNIGHT	Ξ	151,545.	0.		4,56	6,43	162,	.0
DIRECTOR OF FINANCE & ADMIN.	(ii)		0.				.0	0.
	(!)	151,164.	.0		4,562.	7,55	163,285.	.0
DIR. OF MARKETING (THROUGH 5/22/20) ((ii)	.0	.0	.0	.0	0.	.0	.0
-	Ξ							
)	(ii)							
-	Ξ							
<u>)</u>	(ii)							
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7	<u>(ii</u>							
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932112 10-21-19

Schedule J (Form 990) 2019 THE CORAL REEF ALLIANCE	94-3211245 Page 3
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.	bart for any additional information.
PART I, LINE 3:	
THE EXECUTIVE COMMITTEE SHALL ANNUALLY REVIEW THE COMPENSATION OF THE	
EXECUTIVE DIRECTOR AND THE FINANCE DIRECTOR. THE EXECUTIVE COMMITTEE SHALL	
GATHER RECENT DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED	
PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED	
ORGANIZATIONS. MANAGEMENT MAY ASSIST THE COMMITTEE IN THE DATA COLLECTION.	
UPON REVIEW OF ALL PERTINENT DATA, THE MEMBERS OF THE EXECUTIVE COMMITTEE	
SHALL DETERMINE AND APPROVE THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND	
THE FINANCE DIRECTOR. COMPENSATION DECISIONS ARE RECORDED AND MAINTAINED IN	
THE ORGANIZATION'S RECORDS.	
	Schedule J (Form 990) 2019

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

9

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 instructions and the latest information.

		Inspection
1	Employer	identification number

Name of the	organization
-------------	--------------

ipioyer	Identifi	cation	numc
9.	4-32	112	45

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	THE CORAL RE	EF ALL	IANCE		94-3	2112	245	
Par	t 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 de noncash contribu		-	S
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	13	56,459.	FMV			
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 ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organi	zation durin	g the tax year for c	contributions				
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowledg	gement 29				
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rep	ported in Part I, lines 1 throug	gh 28, that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	d which isn't required to be u	sed for			
	exempt purposes for the entire holding period	?				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	itions?	31		Х
32a	Does the organization hire or use third parties							
	contributions?		-			32a		Х
b	If "Yes," describe in Part II.							
	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,			
	describe in Part II.							

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

Schedule M (Form 990) 2019

932141 09-27-19

11530324 138273 CORALREEF

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.

 				. M (E
			Schedul	e M (Form 990

94-3211245

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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

Employer identification number

THE CORAL REEF ALLIANCE

94-3211245

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RECENTLY, CORAL LED SCIENTIFIC RE-SEARCH INTO HOW CORALS ADAPT TO

CLIMATE CHANGE AND WHAT THIS MEANS FOR CONSERVATION TODAY. BY COMBINING

ITS COMMUNITY-CENTERED CONSERVATION APPROACH AND SCIENTIFIC EXPERTISE,

CORAL CREATES THE CONDITIONS THAT GIVE REEFS AROUND THE WORLD THE BEST

CHANCE TO THRIVE FOR GENERATIONS TO COME.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

DISCONTINUED FIJI PROGRAM, INDONESIA PROGRAM AND CORAL CONSERVATION

PRIZE.

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

NATIVE SPECIES. OUR WORK CAPTURES AND RETAINS SEDIMENT AND INCREASING

THE LAND'S CAPACITY TO FILTER STORMWATER AND ABSORB NUTRIENTS,

SEDIMENTS, AND OTHER POLLUTANTS.

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

BUILDING ALLIANCES TO FACILITATE CORAL ADAPTATION WITHIN DIVERSE,

CONNECTED, AND LARGE NETWORKS OF HEALTHY REEFS.

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

EDUCATION AND OUTREACH (EXPENSES \$190,809)

CORAL HAS A STRONG HISTORY OF EDUCATING COMMUNITIES AND BUILDING

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2019)

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2019.05080 THE CORAL REEF ALLIANCE

Schedule O (Form 990 or 990-EZ) (2019)	Page 2							
Name of the organization THE CORAL REEF ALLIANCE	Employer identification number 94-3211245							
AWARENESS ABOUT CORAL REEF THREATS AND THE IMPORTANCE OF PROTECTING								
THEM. CORAL USES VARIOUS EDUCATIONAL PUBLICATIONS, MAGAZINES, WEBSITES								
AND OTHER PRINT AND DIGITAL OUTLETS TO KEEP COMMUNITIES INFORMED ABOUT								
BEST PRACTICES FOR BUILDING SUCCESSFUL REEF CONSERVATION EFFORTS AND								
EDUCATES THE PUBLIC ABOUT WAYS TO PROTECT CORAL REEFS FROM HOME.								
FIJI (EXPENSES \$71,911. INCLUDING GRANTS OF \$9,530)								
SINCE 2004, CORAL HAS WORKED WITH FIJIAN COMMUNITIES TO CURB								
OVERFISHING AND IMPROVE MANAGEMENT OF LOCALLY MANAGED MARINE AREAS								
(LMMAS). OUR WORK LAST YEAR FOCUSED ON THE COMMUNITY OF ONEATA, WHERE								
WE COLLABORATED WITH COMMUNITY LEADERS, THE FIJIAN MINISTRY OF								
FISHERIES, AND THE LAU PROVINCIAL GOVERNMENT TO DEVELOP ALTERNATIVE AND								
FEASIBLE INCOME-GENERATING ACTIVITIES, SUCH AS THE INSTALLATION OF FISH								
AGGREGATING DEVICES (FADS). WE DISCONTINUED OUR FIJI PROGRAM IN 2020.								
INDONESIA (EXPENSES \$57,107. INCLUDING GRANTS OF \$6,977))								
CORAL HAS OVER 10 YEARS OF EXPERIENCE WORKING IN INDONESIA ON CORAL								
REEF CONSERVATION. IN COLLABORATION WITH COMMUNITIES AND OTHER								
STAKEHOLDERS IN NORTH BALI, WE HAVE BEEN INVESTIGATING DIFFERENT								
APPROACHES TO CORAL RESTORATION TO IDENTIFY WHICH ARE BEST FOR								
REBUILDING REEFS. WE ARE DEVELOPING A SET OF BEST PRACTICE GUIDELINES,								
WHICH WILL IMPROVE CORAL RESTORATION TECHNIQUES IN INDONESIA AND								
BEYOND. THROUGH OUR WORK, WE ARE ALSO STRENGTHENING SOCIAL ENTERPRISE								
BUSINESSES FOR THE BENEFIT OF LOCAL COMMUNITIES AND THE E	NVIRONMENT.							
FOR EXAMPLE, IN THE COMMUNITY OF TULAMBEN, WE HAVE SUPPOR	TED A LOCAL							
WOMAN'S GROUP WHICH HAS CREATED A BUSINESS TO COLLECT AND	SORT WASTE							
FOR RECYCLING.								
EXPENSES \$ 319,826. INCLUDING GRANTS OF \$ 16,507. REV	ENUE \$ 0.							

	FORM	990,	PART	VI,	SECTION	В,	LINE	11B:					
	932212 09-	06-19							45			Schedule O (Fo	rm 990 or 990-EZ) (2019)
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Schedule O (Form 990 or 990-EZ) (2019)	Page 2		
Name of the organization THE CORAL REEF ALLIANCE	Employer identification number 94-3211245		
A DRAFT COPY OF THE FORM 990 AS PREPARED BY THE AUDIT FIR	M SHALL BE		
REVIEWED IN TURN BY THE FINANCE DIRECTOR, THE EXECUTIVE D	IRECTOR, AND THE		
EXECUTIVE COMMITTEE OF THE BOARD, PRIOR TO FILING. EACH S	TAFF MEMBER AND		
COMMITTEE MEMBER SHALL SIGN-OFF AS THEIR REVIEW IS COMPLE	TED. A COPY IS		
ALSO PROVIDED TO THE ENTIRE GOVERNING BOARD FOR COMMENT B	EFORE FILING.		

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

MEMBERS OF THE BOARD OF DIRECTORS AND STAFF SIGN A CONFLICT OF INTEREST POLICY STATEMENT ON AN ANNUAL BASIS. MEMBERS OF THE BOARD OF DIRECTORS AND STAFF HAVE A CONTINUING RESPONSIBILITY TO PROMPTLY DISCLOSE TO THE ORGANIZATION THE EXISTENCE OF ANY ADDITIONAL AFFILIATIONS AS THEY ARE UNDERTAKEN. IF ANY CONFLICTS OF INTEREST EXIST, THE BOARD MEMBERS WILL DISCUSS THE NEXT STEPS AND DOCUMENT HOW TO RECTIFY THE SITUATION.

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

THE EXECUTIVE COMMITTEE SHALL ANNUALLY REVIEW THE COMPENSATION OF THE EXECUTIVE DIRECTOR. THE EXECUTIVE COMMITTEE SHALL GATHER RECENT DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS. MANAGEMENT MAY ASSIST THE COMMITTEE IN THE DATA COLLECTION. UPON REVIEW OF ALL PERTINENT DATA, THE MEMBERS OF THE EXECUTIVE COMMITTEE SHALL DETERMINE AND APPROVE THE COMPENSATION OF THE EXECUTIVE DIRECTOR. COMPENSATION DECISIONS ARE RECORDED AND MAINTAINED IN THE ORGANIZATION'S RECORDS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AK,AZ,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,LA,MA,MD,ME,MI,MN,NC,ND,NH,NJ,NM,NV NY,OK,OH,OR,PA,RI,SC,TN,UT,VA,WV,WI

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Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization THE CORAL REEF ALLIANCE	Employer identification number 94-3211245
FORM 990, PART VI, SECTION C, LINE 18:	
THE FEDERAL FORM 990 IS POSTED ON THE ORGANIZATION'S WEBS	ITE, AND AVAILABLE
UPON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ARTICLES OF INCORPORATION, BYLAWS AND CONFLICT OF INT	EREST POLICY ARE
AVAILABLE ON REQUEST. THE AUDIT REPORT IS POSTED ON THE O	RGANIZATION'S
WEBSITE, AND THE FINANCIAL STATEMENTS ARE AVAILABLE IN AN	ABBREVIATED FORM
IN THE ANNUAL REPORT.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTANTS:	
PROGRAM SERVICE EXPENSES	301,807.
MANAGEMENT AND GENERAL EXPENSES	58,279.
FUNDRAISING EXPENSES	12,059.
TOTAL EXPENSES	372,145.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	372,145.

Schedule O (Form 990 or 990-EZ) (2019)