Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public

Inspection

A Fo	r the	2008 ca	alendar yea	r, or tax year beginning 01-	01-2008	and ending 12-31-2008	3	B F	
_		pplicable	Please	C Name of organization WOODS HOLE OCEANOGRAPHI	C INSTITUTIO	ON		D Employer id	lentification number
Ad	dress c	hange	use IRS label or	Doing Business As				04-21058 E Telephone n	
☐ Na	me cha	inge	print or type. See	Doing Business As				•	
Inr	ial retu	ırn	Specific Instruc-	Number and street (or P O bo		ot delivered to street addres	ss) Room/suite	(508) 457	- 2000 ots \$ 259,777,985
Гте	mınatı	on	tions.	569 WOODS HOLE ROAD MS 14	1			d dioss receip	J is \$ 239,777,963
┌ Am	ended	return		City or town, state or country,	and ZIP + 4				
Гар	olicatio	n pending		WOODS HOLE, MA 02543					
			F Nan	ne and address of Principal	O fficer		H(a) Ic this	a group retur	n for
			SUSAN	AVERY			affiliat		⊤Yes ▼No
				OODS HOLE ROAD MS 14 S HOLE, MA 02543					
Ta	x-exer	npt status		(3) 4 (insert no)	a)(1) or \Box	527		affiliates includ	
			w whoı edu					o, attachalis Exemption N	t See instructions) umber ►
, vv	CD SIG	.e. F ****	w wildi edu				11(0)	F	
К Тур	e of or	ganızatıon	Corporat	on trust association oth	er 🟲		L Year of For	mation 1930 N	State of legal domicile MA
		l 6							
Ра	rt I		mary	e organization's mission or	most signi	ficant activities			
	*		HEDULE O	-	illost sigili	ilcant activities			
2		JLL JC	IIILDOLL O						
IEI									
臺	2	Check	this box	ıf the organızatıon dıscontır	ued its op	erations or disposed o	f more than 25	5% of its asse	ts
ŝ	3	Numbe	r of voting r	nembers of the governing bo	ody (Part V	'I, line 1a)		3	33
2 6	4	Numbe	r of ındepen	dent voting members of the	governing	body (Part VI, line 1b)	. 4	29
ĕ	5	Total n	umber of en	nployees (Part V , line 2a)				5	1,089
Activities & Governance	6	Total n	umber of vo	lunteers (estimate if neces	sary) .			6	
ą.	7a	Totalg	ross unrela	ted business revenue from l	Part VIII,	line 12, column (C) .	•	7a	47,737
	ь	Net unr	elated busi	ness taxable income from F	orm 990-1	Γ, line 34		7b	-24,383
							Prio	r Year	Current Year
	8	Contri	ibutions and	d grants (Part VIII, line 1h)		1	.41,799,534	154,056,468	
흴	9 Program service revenue (Part VIII, line 2g)							10,370,308	10,413,429
Revenu	10	Inves	tment incor	ne (Part VIII, column (A), l	ines 3, 4, a	and 7d)		36,890,980	5,957,101
<u> </u>	11	Other	revenue (P	art VIII, column (A), lınes !	5, 6d, 8c, 9	9c, 10c, and 11e)		1,708,338	628,836
	12		revenue—a	dd lines 8 through 11 (must	equal Par	t VIII, column (A), line	• 1	.90,769,160	171,055,834
	13	12) Grants	s and simila	ır amounts paıd (Part IX, co	lumn (Δ.). I	Ines 1-3)	<u> </u>	7,656,752	8,544,820
	14			r for members (Part IX, colu				,,030,,32	0,511,626
	15			empensation, employee bene			;_		
\$		10)	,		(, ,,,	,		59,408,515	63,760,624
Expenses	16a	Profes	sional fund	raising fees (Part IX, colum	n (A), lıne	11e)			11,181
ਡੌ	ь	(Total f	undraising exp	penses, Part IX, column (D), line 2	₂₅)			
_	17	Other	expenses (Part IX, column (A), lines 1	1a-11d, 1	.1f-24f)		88,879,786	97,819,405
	18	Total	expenses—	add lines 13–17 (must equ	al Part IX,	line 25, column (A))	1	.55,945,053	170,136,030
	19	Reven	ue less exp	enses Subtract line 18 fro	m line 12			34,824,107	919,804
රීලී							Beginnir	ng of Year	End of Year
Se de la company	20	Total	assets (Par	t X, line 16)			5	550,708,958	487,793,526
Net Assets or Fund Balances	21	Total	lıabılıtıes (F	art X, line 26)			1	.22,656,196	253,927,801
2 E	22	Netas	sets or fun	d balances Subtract line 2:	1 from line	20	4	28,052,762	233,865,725
Pa	t III	Sign	ature Blo	ock					
		Under p	enalties of pe	ŋury, I declare that I have examı	ned this retu	rn, including accompanying	schedules and st	atements, and to	the best of my knowledge
DI.		and bel	ief, it is true, o	correct, and complete Declaration	of preparer	(other than officer) is based	d on all informati I	on of which prepa	rer has any knowledge
Plea Sign		Sign	ature of office	r			2009-	11-03	
Her		1.					bate		
			e or print nam	VINSLOW CFO/ VP OF FIN & ADM: e and title	IN				
		<u> </u>				Date		Dreparer's DTI	N (See Gen Inst)
Da:	4		parer's PF	RICEWATERHOUSECOOPERS LLP		Dute	Check If self-	i repaici 5 PII	AT (SEC OCH TIBL)
Paid			ideale P	22200. 110 11			empolyed 🕨 🦵	·	
Use	pare	Firn	n's name (or y	yours L					
Onl			elf-employed) Iress, and ZIP	+ 4	D.			EIN 🕨	
J	•		,	PricewaterhouseCoopers LL	P 				
				125 High Street				Phone no 🕨	(617) 530-5000
				Boston, MA 02110					

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission SPONSORED AND INSTITUTIONAL RESEARCH FEDERAL AGENCIES AND 325 ARE FROM 147 WOODS HOLE OCEANOGRAPHIC INSTITUTIO	7 OTHER CLIENTS INSTITU	TION RESEARCH SPONSORE		
2	Did the organization undertake any	sıgnıfıcant program se	ervices during the year	which were not listed on	
	the prior Form 990 or 990-EZ? . If "Yes," describe these new servic	as an Schadula O			┌ Yes ┌ No
3	Did the organization cease conduct		t changes in how it con	nducte any program	
,	services?		· · · · ·	· · · · · · ·	┌ Yes ┌ No
	If "Yes," describe these changes or	n Schedule O			
4	Describe the exempt purpose achie Section 501(c)(3) and (4) organiza others, the total expenses, and rev	tions and 4947(a)(1)	trusts are required to r	eport the amount of grants a	
4a	(Code) (Expense SPONSORED AND INSTITUTIONAL RESEAR FEDERAL AGENCIES AND 325 ARE FROM WOODS HOLE OCEANOGRAPHIC INSTITUT	RCH IN OCEANOGRAPHY AND 147 OTHER CLIENTS INSTI	TUTION RESEARCH SPONSO		
4b	(Code) (Expense	s \$ 8,870,324	ıncludıng grants of \$	472,529) (Revenue \$	149,642,679)
	EDUCATION JOINT GRADUATE PROGRAM POST DOCTORAL SCHOLARS, FELLOWS, A VISITING SCHOLARS AND 63 GUEST STUD	ND INVESTIGATORS, 71 GE			
4c	(Code) (Expense	s \$	including grants of \$) (Revenue \$)
4d	Other program services (Describ	e ın Schedule O)			
_	(Expenses \$	including grants o	f \$) (Revenue \$)
4e	Total program service expenses \$	160,403,68	8 Must equal Part IX,	Line 25, column (B).	

art TV	Chec	klist of	f 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{3}$	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	Yes	

Part IV Checklist of Required Schedules (Continued)

			1 63	140
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		No
		204		NO
Ь	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV .	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	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	Yes	
37	Did the organization conduct more than 5 percent 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,	37		Νο
	Part VI **			

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance	:e				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
	of U.S. Information Returns. Enter -0- if not applicable					
		1a	140			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments t	to ven	dors and reportable			
_	gaming (gambling) winnings to prize winners?			1c	Yes	
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	1,089			
ь	If at least one is reported in 2a, did the organization file all required federal employi		,			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file thi	s retur	n.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during return?	ig the	year covered by this	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sch	edule i	0	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a s					
	over, a financial account in a foreign country (such as a bank account, securities acaccount)?	_	•	4a	Yes	
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , <i>Re Financial Accounts</i> .	eport o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time duri	ng the	tax year?	5a		Νο
ь	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νο
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp	t Entit	y Regarding Prohibited			
	Tax Shelter Transaction?	•		5с		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?	nat su	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo cormore $^{\circ}$	ntrıbutı	on of \$75 or	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services \boldsymbol{p}	rovide	d?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property.		•	7-	V	
4	file Form 8282?	7d		7c	Yes	
u	Tries, indicate the number of forms 6262 fried during the year		2			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay benefit contract?	y prem	nums on a personal	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a pers	onal b	enefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form	8899	as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization is	file a F	orm 1098-C as			
	required?			7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds a supporting organizations. Did the supporting organization, or a fund maintained by a					
	excess business holdings at any time during the	0 0 0 110	ormy organization, nave	8		
	year?				<u> </u> 	<u> </u>
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.			_		
	Did the organization make any taxable distributions under section 4966?			9a		
	Did the organization make a distribution to a donor, donor advisor, or related person	۱٬ .		9Ь		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	10a	I			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
b	facilities	100				
11	Section 501(c)(12) organizations Enter					
а	Gross income from members or shareholders	 11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 ii	n lieu d	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	<i>i</i>		I .		I	

Section A. Governing Body and Management

No

Yes

11

Νo

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below	, desc	cribe the circumstance	es,
processes, or changes in Schedule O. See instructions.			
	1-		2

Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 33			
Ь	Enter the number of voting members that are independent 1b 29			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	. 3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
ь	each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed MA, NY
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization

DAVID STEPHENS CONTROLLER MS 14 569 WOODS HOLE RD WOODS HOLE, MA 02543 (508) 289-3542

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

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

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

Check this box if the organization did not compensate any officer, director, trustee or key employee										
		Posit t	(C non (hat a	chec		II			(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
THOMAS B WHEELER , CHAIRMAN, TRUSTEE EX OFFICIO	5 0	х						0	0	0
CAROLYN BUNKER CFO , CLERK/VP FIN&ADM/TRUSTEE EX	40 0	х		х				214,414	0	28,979
MICHELE S FOSTER , TRUSTEE	5 0	Х						0	0	0
ROBERT A DAY JR , TRUSTEE	5 0	Х						0		
ALFRED T DENGLER , TRUSTEE	5 0	X			_		-	0		<u> </u>
SARA G DENT , TRUSTEE ERIC H JOSTROM , TRUSTEE	5 0 5 0	X						0	-	_
WILLIAM J KEALY , TRUSTEE	5 0	X						0		
Coleman P Burke , TRUSTEE	5 0	X					\vdash	0		
NANCY S NEWCOMB , TRUSTEE	5 0	Х						0	0	_
WILLIAM C MORRIS , TRUSTEE	5 0	Х						0		
CARL E PETERSON , TRUSTEE	5 0	X					_	0	_	
HARDWICK SIMMONS , TRUSTEE	5 0	X			_		\vdash	0		
RICHARD F SYRON , TRUSTEE STEPHEN E TAYLOR , TRUSTEE	5 0 5 0	X			\vdash			0		
THOMAS J TIERNEY , TRUSTEE	5 0	X						0		
Georgette C McConnell , TRUSTEE	5 0	Х						0	0	
GEOFFREY A THOMPSON , TRUSTEE	5 0	Х						0	0	0
PETER A ARON , TRUSTEE	5 0	Х						0		
ROBERT C DUCOMMUN , TRUSTEE	5 0	X						0		
JOHN F OBRIEN , TRUSTEE JOSEPH F PATTON JR , TRUSTEE	5 0 5 0	X X					-	0		
Newton PS Merrill , CHAIRMAN, TRUSTEE EX									_	
OFFICIO	5 0	Х						0	0	0
Michele G Van Leer , Trustee	5 0	Х						0		
Arthur Yorke Allen , Trustee	5 0	X						0		
JOSEPH D ROXE , treasurer, TRUSTEE EX OFFICIO JAMES A AUSTIN JR , TRUSTEE	5 0 5 0	X						0		
ROBERT M BAYLIS , TRUSTEE	5 0	X						0	_	
ROBERT L JAMES , TRUSTEE	5 0	X						0		
SUSAN AVERY BEGAN 2408,	40 0	Х		x				326,575	0	51,450
PRESIDENT/DIR/TRUSTEE EX				<u> ^</u>				<u> </u>		·
jim dunlap , TRUSTEE STEVEN HOCH , TRUSTEE	5 0 5 0	X					-	0		
TONY JAMES , TRUSTEE	5 0	X						0	_	<u> </u>
LAURENCE MADIN , EXECUTIVE VP/DIRECTOR	40 0				Х			227,882	0	
ROBERT WELLER , DEPARTMENT CHAIR	40 0				Х			201,939	0	<u> </u>
ROBERT DETRICK , SENIOR SCIENTIST	40 0				Х			190,761	0	
SUSAN HUMPHRIS , SENIOR SCIENTIST	40 0				Х	ļ	_	155,999		,
JAMES YODER , VP ACADEMICS DANIEL STUERMER , VP EXTERNAL REL	40 0 40 0				\vdash	X		197,403 190,630		,
WILLIAM JENKINS , SENIOR SCIENTIST	40 0					X		176,854		·
BRIAN TUCHOLKE , SENIOR SCIENTIST	40 0					X		158,821	0	
JUDY MCDOWELL, DEPARTMENT CHAIR	40 0					Х		159,384	0	41,089
							-			_
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Part VII Continued

	(B) Average hours per week	(C) Position (check all that apply)							(E)	(F)
(A) Name and Title		Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
				$\vdash\vdash$	\dashv		\vdash			
1b Total				Ш.			<u> </u>	2,200,662)	471,257

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►142

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

\$100,000 of compensation from the organization			
(A) Name and business address	(B) Description of services	(C) Compensation	
MCGARR SERVICE CORPORATION PO BOX 670139 CHESTNUT HILL, MA 02467	CLEANING SERVICES	687,041	
BAE SYSTEMS 2205 EAST BELT STREET SAN DIEGO, CA 92110	SHIP REPAIR SERVICES	1,874,718	
DETYENS SHIPYARD INC 1670 DRYDOCK AVENUE NORTH CHARLESTON, SC 29405	SHIP REPAIR SERVICES	1,610,767	
BOND BROS INC 145 SPRING STREET EVERETT, MA 02149	CONSTRUCTION	1,036,790	
BUFFTREE BUILDING COMPANY INC 193-R POPES ISLAND NEW BEDFORD, MA 02740	CONSTRUCTION	702,759	
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization			

Part VIII

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated can	npaigns 1a			Revenue		512, 513, 01 514
\$ \$	ь		ues					
<u>E</u> ∄			1b					
S, Ç	С	Fundraising ev	vents 1c					
無き	d	Related organ	ızatıons1d					
E, E	e	Government gran	nts (contributions) 1e	106,135,553				
Contributions, gifts, grants and other similar amounts	f	All other contribut similar amounts i	tions, gifts, grants, and not included above 1f	47,920,915				
를 등 당 등	g	Noncash cont	rıbutıons ıncluded ın					
S #	h	lines 1a-1f \$ Total (Add lin	392,873 es 1a-1f)		154,056,468			
				Business Code				
alle	2a	EDUCATION		900,099	10,413,429	10,413,429		
ı, ken	ь			,		,		
22	С							
A C	d							
Ř	e							
Program Serwce Revenue	f	All other prog	ram service revenue					
Š	g	Total. Add line ► \$ 10,413,42	es 2a-2f 9					
	3		come (including divi	dends, interest				
		other sımılar a	amounts)		3,496,652			3,496,652
	4	Income from inve	estment of tax-exempt be	ond proceeds	0			
	5	Royalties .		•	144,963			144,963
		Royalties :	(ı) Real	(II) Personal	,			·
	6a	Gross Rents	818,849	(,				
	ь	Less rental expenses	672,104					
	С	Rental income	146,745					
	d	or (loss) Net rental inc	ome or (loss)		146,745			146,745
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	90,510,496	(11)				
		than inventory	05 400 720	2 550 240				
	ь	Less cost or other basis and	85,499,728	2,550,319				
	c	sales expenses Gain or (loss)	5,010,768	-2,550,319				
	d	Net gain or (lo	ess)	. •	2,460,449		47,737	2,412,712
	8a		from fundraising					
e ne			ns reported on line					
Other Revenue			e G ıf total exceeds					
<u> </u>	ь	,						
othe	c		(loss) from fundrais	ng events	0			
_	9a	Gross income	from gaming					
		activities See Complete Schel exceeds \$15,00						
		C.CCCG #10,00	a					
	ь	Less directe	xpensesb					
	С	Net income or	(loss) from gaming a	activities •	0			
	10a	Gross sales o returns and al	fınventory, less lowances .					
			а					
	ь		goods sold b					
	С		(loss) from sales of		0			
	44-	Miscellaneou		Business Code 541,900	202 010	203,819		
	11a	INFO CENTE		900,099	,			133,309
	Ь	OTHER INCO	MF	900,099	133,309			133,309
	C							
	d e		nue es 11a-11d					
				\$ 337,128		40		A == · ==
	12	8c,	e. Add lines 1h, 2g, 3		171,055,834	10,617,248	47,737	6,334,381
	J	9c, 10c, and 1	l1e	. •				Form 990 (2008)

Part IX Statement of Functional Expenses

Α	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	8,544,820	8,544,820						
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0							
4	Benefits paid to or for members	0							
5	Compensation of current officers, directors, trustees, and key employees	1,339,649	794,683	505,300	39,666				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0							
7	Other salaries and wages	48,242,882	46,548,304		1,048,723				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0							
9	Other employee benefits	13,887,168	12,690,701	644,885	551,582				
10	Payroll taxes	290,925	279,288	5,819	5,818				
11	Fees for services (non-employees)								
а	Management	333,070		333,070					
b	Legal	457,493		457,493					
c	Accounting	413,829		413,829					
d	Lobbying	195,673	195,673						
e	Professional fundraising See Part IV, line 17	11,181			11,181				
f	Investment management fees	985,302		985,302					
g	Other	9,150,627	8,184,840	965,787					
12	Advertising and promotion	306,099	242,057	42,467	21,575				
13	Office expenses	16,034,141	15,020,123	902,716	111,302				
14	Information technology	567,071	455,545	105,627	5,899				
15	Royalties	0							
16	Occupancy	576,856	261,419	315,437					
17 18	Travel	4,823,763	4,546,902	215,087	61,774				
	state or local public officials	0							
19	Conferences, conventions and meetings	0							
20 21	Interest	0							
22	Depreciation, depletion, and amortization	8,013,408	7,631,354	138,500	243,554				
23	Insurance	643,658	469,665	173,993	243,334				
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	3.137030	1037003	173,533					
а	OTHER ADMINISTRATIVE EXPENSE	524,005		314,387	209,618				
ь	SHIP AND VESSELS	41,946,865	41,946,865	,	·				
С	SHOP SERVICES	3,751,515	3,569,259	130,533	51,723				
d	EQUIPMENT RENT & MAINTENANCE	8,996,054	8,922,214	54,027	19,813				
e	MISCELLANEOUS EXPENSE	99,976	99,976		_				
f	All other expenses								
25	Total functional expenses. Add lines 1 through 24f	170,136,030	160,403,688	7,350,114	2,382,228				
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation								

Part X	Balance	Sheet

1.					Beginning of year		End of year
7	1	Cash—non-interest-bearing			13,683,748	1	707,883
	2	Savings and temporary cash investments			16,792,011	2	23,887,611
;	3	Pledges and grants receivable, net			10,678,076	3	11,981,823
	4	Accounts receivable, net			9,582,286	4	18,495,338
	5	Receivables from current and former officers, directors, trustee other related parties Complete Part II of Schedule L			0	5	553
	6	Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B) Complete Part II of				6	
7	7	Notes and loans receivable, net			823,544	7	893,841
	8	Inventories for sale or use			1,919,810	8	1,748,989
9 9	9	Prepaid expenses and deferred charges			10,650,887	9	6,972,608
ssets	10a	Land, buildings, and equipment cost basis					
₹		zana, panango, ana eqaipment coot paolo	10a	169,497,099			
	b	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10ь	80,760,971	89,336,009	10c	88,736,128
1	11	Investments—publicly traded securities			372,183,273	11	249,324,406
1	12	Investments—other securities See Part IV, line 11 Complete F Schedule D	of		12		
1	13	Investments—program-related See Part IV, line 11 $\it Complete B$ of $\it Schedule D$.	I		13		
1	14	Intangible assets		14			
1	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	25,059,314	15	85,044,346		
1	16	Total assets. Add lines 1 through 15 (must equal line 34)			550,708,958	16	487,793,526
	17	Accounts payable and accrued expenses .	15,532,454	17	24,584,429		
1	18	Grants payable		18			
1	19	Deferred revenue		8,397,103	19	7,066,560	
	20	Tax-exempt bond liabilities			54,850,000	20	117,780,187
<u>. io</u> 2	21	Escrow account liability Complete Part IV of Schedule D		•		21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
∐		persons Complete Part II of Schedule L		•		22	
7	23	Secured mortgages and notes payable to unrelated third parties	5.	•		23	
7	24	Unsecured notes and loans payable			0	24	3,882,556
2	25	Other liabilities Complete Part X of Schedule D			43,876,639	25	100,614,069
	26	Total liabilities. Add lines 17 through 25			122,656,196	26	253,927,801
ş l		Organizations that follow SFAS 117, check here ► $\sqrt{}$ and compthrough 29, and lines 33 and 34.	plete li	nes 27			
Balance	27	Unrestricted net assets			96,908,184	27	-12,433,783
8 2	28	Temporarily restricted net assets			252,277,991	28	168,404,533
<u> </u>	29	Permanently restricted net assets			78,866,587	29	77,894,975
r Fund		Organizations that do not follow SFAS 117, check here ► ☐ are lines 30 through 34.	plete				
20 2	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31		
₹ :	32	Retained earnings, endowment, accumulated income, or other fo			32		
¥ 3	33	Total net assets or fund balances			428,052,762	33	233,865,725
	34	Total liabilities and net assets/fund balances			550,708,958	34	487,793,526
Pari	t XI	Financial Statements and Reporting					

Part XT	Financial Stat	tements and	Renorting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

Employer identification number

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE A

(Form 990 or

990EZ)

h

Name of the organization WOODS HOLE OCEANOGRAPHIC INSTITUTION

Reason for Public Charity Status (to be completed by all organizations) (See Instructions) The organization is not a private foundation because it is. (Please check only one organization) A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(ii). A school described in Section 170(b)(1)(A)(iii). (Attach Schedule E) A chospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v). A organization than normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 509(a)(4). (See instructions) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See Section 509(a)(3). Check the box that describes the type of supporting organization in socion 509(a)(1) or section 509			04-2105850						
A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(ii). A school described in Section 170(b)(1)(A)(iii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part III) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(2) see Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III refunctionally Integrated d Type III other By checking this box, I certify that the organization is not controlled directly or indirectly	Pa	rt I	Reason for Public Charity Status (to be completed by all organizations) (See Instruction	ns)					
A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v). A norganization than formally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III c Functionally Integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other th	The	organı	zation is not a private foundation because it is (Please check only one organization)	_					
A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type II b Type II c Type III - Functionally Integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in sec	1	\sqcap	A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(i).						
A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions) An organization organized and operated exclusively to test for public safety See Section 509(a)(2). See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally Integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type III or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or cont	2	Г	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)						
hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v). A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type III c Type III - Functionally Integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type III or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted a	3	\sqcap	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach	Schedule H)				
An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v). A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a	4	\sqcap	A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(a)	A)(iii). Ente	r the				
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An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally Integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type III or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organiza			Section 170(b)(1)(A)(iv). (Complete Part II)						
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An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See Section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines. The through 11h a			described in Section 170(b)(1)(A)(vi) (Complete Part II)						
receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See Section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a	8	\sqcap	A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II)						
its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a	9 An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gi								
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An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a			its support from gross investment income and unrelated business taxable income (less section 511 tax)	from busine	esses				
An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a			acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III)						
one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a	10	\sqcap	An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See	ınstructior	ıs)				
other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since A ugust 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the the supported organization?	11	Γ	one or more publicly supported organizations described in section $509(a)(1)$ or section $509(a)(2)$ See Sthe box that describes the type of supporting organization and complete lines 11e through 11h	ection 509(a)(3).	Check			
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following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? 11g(i)	f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type III scheck this box	supporting o	rganız	ation,			
and (III) below, the governing body of the the supported organization?	g		following persons?						
				11~/:\	res	NO			
(iii) a 35% controlled entity of a person described in (i) or (ii) above?									

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (See Instructions))	organız col (i) your go	organization in		he organization organization in sup		the organization organization in in col (i) of your col (i) organized		(vii) A mount of support?
			Yes	No	Yes	No	Yes	No		
Total										

Provide the following information about the organizations the organization supports

Part II Support Schedule for Organizations Described in IRC 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.)

	(Complete only if you chec	ked the box o	11 IIIIe 5, 7, 0r	0 01 Part I.)				
	ublic Support	T						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	116,520,002	125,173,618	123,039,477	142,800,076	1	54,056,468	661,589,641
2	Tax revenues levied for the organization's benefit and either paid to or expended on							
_	its behalf The value of services or facilities							
3	furnished by a governmental unit to the organization without charge							
4	Total. Add line 1-3	116,520,002	125,173,618	123,039,477	142,800,076	1	54,056,468	661,589,641
5	The portion of total contribution by each							
	person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)							
6	Public Support subtract line 5 from line 4							661,589,641
T	otal Support		L	L				
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	116,520,002	4,493,210	123,039,477	142,800,076		54,056,468	661,589,641
8	Gross income from interest, dividends,							
	payments received on securities loans, rents, royalties and income from similar sources	4,663,988	4,493,210	4,987,581	4,421,287	4,460,464		23,026,530
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)				357,991		337,128	695,119
11	Total Support (Add lines 7 through 10)							685,311,290
12	Gross receipts from related activities, etc	(See instruction	s)	•	·	12		50,354,710
13 C	First Five Years. If the Form 990 is for the organization, check this box and stop here omputation of Public Support Perc		rst, second, third	l, fourth, or fifth	tax year as a 5	01(c)(▶┌
14	Public Support Percentage for 2008 (line 6		ed by line 11 co	lumn (f))		14		96 539 %
15	Public Support Percentage for 2007 Sched		•			15		96 369 %
	33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% Test - 2007. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this							
17a	box and stop here. The organization qualifier 10% Facts and Circumstances Test - 2008. more, and if the organization meets the "facts and circumstances and circumstances" meets the "facts and circumstances" meets and circumstances	If the organization is the contraction of the contr	on did not check ances" test, che	a box on line 1: ck this box and	stop here. Exp	laın ın	Part IV ho	
b	10% Facts and Circumstances Test - 2007. It more, and if the organization meets the "fact	If the organization is the contraction of the contr	on did not check ances" test, che	a box on line 1. ck this box and	3, 16a, 16b, or i I stop here. Exp	17a aı laın ın	nd line 15 Part IV ho	ıs 10% or ow
18	the organization meets the "facts and circu Private Foundation. If the organization did							F1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2008

▶□

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Political Campaign and Lobbying Activities

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

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

OMB No 1545-0047

Open to Public Inspection

eiv	nce			
f th	e organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (I	olitical Camp	aign Activit	ties)
	ection 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C			
	ection 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not comple	te Part I-B		
	ection 527 organizations complete Part I-A only			
	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (L			
	ection 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A			ш А
	ection 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Pa e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax)	ILL II-B Do not co	ompiete Part	II-A
	ection 501(c)(4), (5), or (6) organizations complete Part III			
		ployer identific	ation numbe	er
	OODS HOLE OCEANOGRAPHIC INSTITUTION	, ,		
		2105850		
a r	t I-A To be completed by all organizations exempt under section 501(c) and	section 527	7	
	organizations. (See the instructions for Schedule C for details.)			
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	<i>t</i>		
2	Political expenditures	\$_		
3	V olunteer hours			
Par	t I-B To be completed by all organizations exempt under section 501(c)(3).	(See the inst	ructions	
	for Schedule C for details.)			
1	Enter the amount of any excise tax incurred by the organization under section 4955	\$ _		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$_		
3	If the organization incurred in a section 4955 tax, did it file Form 4720 for this year?		☐ Yes	☐ No
4a	Was a correction made?		☐ Yes	☐ No
ь	If "Yes," describe in Part IV			
	t I-C To be completed by all organizations exempt under section 501(c), exe	ept section	501(c)(3	3).
	(See the instructions for Schedule C for details.)		. , ,	
1	Enter the amount directly expended by the filing organization for section 527 exempt function activ	ties \$_		
2	Enter the amount of the filing organization's internal funds contributed to other organizations for sec	tion		
	527 exempt funtion activities	\$ _		
3	Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on F	orm		
	1120-POL, line 17b	\$ _		
4	Did the filing organization file Form 1120-POL for this year?		☐ Yes	┌ No

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

State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

	(election under sec	organizations exempt under section 501(tion 501(h)). (See the instructions for Schedul belongs to an affiliated group		768
	<u> </u>	checked box A and "limited control" provisions apply		
	Limits on Lo	bbying Expenditures— s" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)		
c	Total lobbying expenditures (add line	es 1a and 1b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures	(add lines 1c and 1d)		
f	Lobbying nontaxable amount Enter to columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000	The lobbying nontaxable amount is: 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (ente	r 25% of line 1f)		
h	Subtract line 1g from line 1a Enter -	0 - If line g is more than line a		
i	Subtract line 1f from line 1c Enter -	0- ıf lıne f ıs more than lıne c		
j 	If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form	m 4720 reporting	┌ Yes ┌ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

	Lobbying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line d, column (e))					
f	Grassroots lobbying expenditures					

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form **5768** (election under section **501(h)).** (See the instructions for Schedule C for details.)

		(a)		(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines c through i)?	Yes			
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?	Yes		96	
е	Publications, or published or broadcast statements?	Yes		1,675	
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		172,622	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?	Yes		21,280	
i	Other activities If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1:			195,673	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo		
b	If "Yes" enter the amount of any tax incurred under section 4912				
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

P **section 501(c)(6).** (See the instructions for Schedule C for details.)

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

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i

Ident if ier	Return Reference	Explanation
OBBYING ACTIVITY EXPLANATION	SCHEDULE C	THE WOODS HOLE OCEANOGRAPHIC INSTITUTION DID NOT PARTICIPATE OR INTERVENE IN ANY POLITICAL CAMPAIGNS THE WOODS HOLE OCEANOGRAPHIC INSTITUTION EMPLOYS A DIRECTOR OF GOVERNMENT RELATIONS WHO IS REGISTERED AS A LOBBYIST WITH THE US SENATE AND THE US HOUSE OF REPRESENTATIVES TO LOBBY ON A BROAD RANGE OF POLICY AND SPENDING LEGISLATION RELATING TO OCEAN SCIENCE SPECIFICALLY, WHOI LOBBIES FOR INCREASED FUNDING FOR COMPETITIVE OCEAN SCIENCE GRANT PROGRAMS IN THE US NAVY, THE NATIONAL SCIENCE FOUNDATION, AND THE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION IN ADDITION, THE INDIVIDUAL REPORTS TO WOODS HOLE OCEANOGRAPHIC INSTITUTION ON DEVELOPMENTS AND ISSUES OF INTEREST TO AND/OR FACING THE INSTITUTION for THE YEAR ENDED DECEMBER 31, 2008, WHOI PAID \$142,874 IN COMPENSATION to THIS INDIVIDUAL for lobbying activities THE ORGANIZATION PAID MEMBERSHIP DUES OF \$18,380 TO MEMBER ORGANIZATIONS WHICH MAY ENGAGE IN LOBBYING ACTIVITIES THEREFORE, A PORTION OF THE DUES MAY BE ATTRIBUTABLE TO LOBBYING ACTIVITIES WHOI ALSO PROVIDES EXPERT ADVICE TO CONGRESS ON OCEAN MATTERS INCLUDING ENVIRONMENTAL QUALITY, CLIMATE CHANGE AND MARINE RESOURCES

Part IV Supplemental I	Part IV Supplemental Information				
Ident if ier	Return Reference	Explanation			

Schedule C (Form 990 or 990EZ) 2008

DLN: 93493317021179

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047 Open to Public Inspection

Name of the organization **Employer identification number** WOODS HOLE OCEANOGRAPHIC INSTITUTION 04-2105850 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements 1 b Total acreage restricted by conservation 2b 10 76 easements 2c 0 Number of conservation easements on a certified historic structure included in (a) 2d 0 Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🕨 Number of states where property subject to conservation easement is located 🕨 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and √ Yes □ No enforcement of the conservation easements it holds? 4 00 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 400 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section ☐ No 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

-\$

Organizations Maintaining Control	illections of Art,	піз	LOII	cai ireas	ures, or Otne	r Simila	ASSE	ts (co	ontinued)
	r records, check any	of th	e foll	lowing that a	re a sıgnıfıcant u	ise of its co	llection	ו	
Public exhibition		d	\vdash	Loan or exc	hange programs				
Scholarly research		e	Г	Other					
Preservation for future generations									
-	ollections and explain	n hov	v the	v further the	organization's ex	emnt nurn	ose in		
•	mections and explain	11107	v cire;	y luitilei tile	organization's ex	venibi baib	036 111		
· , ,			,			nılar	_	Voc	□No
IV Trust, Escrow and Custodial	Arrangements.	Com	plete	e if the org		ered "Yes			,
s the organization an agent, trustee, custoo					or other assets	not	Г	Yes	┌ No
f "Yes," explain why in Part XIV and comple	ete the following table)							
							A mou	int	
Beginning balance					1c				
Additions during the year					1d				
Distributions during the year					1e				
Ending balance					1f				
Old the organization include an amount on Fo	orm 990, Part X, line	21?					Γ	Yes	┌ No
f "Yes," explain the arrangement in Part XI\	/								
V Endowment Funds. Complete									
		(b) Prior	Year (c)T	wo Years Back (d)	Three Years	Back (e	Four Y	ears Back
nvestment earnings or losses									
Grants or scholarships									
·	6,992,993								
Administrative expenses	5,473,463								
End of year balance	264,540,552								
Provide the estimated percentage of the yea	r end balance held as	5							
Board designated or quasi-endowment 🕨	22 2 %								
Permanent endowment 🕨 239 %									
Term endowment ► 539 %									
	ssion of the organizat	tion t	that a	are held and	admınıstered for	the			
·	-							Yes	No
i) unrelated organizations			•				3a(i)		No
								<u> </u>	No
	·						3b		<u> </u>
					Part Y line 10				
Tilvestillents—Land, building	s, and Equipmen	 5			1		Т		
Description of investment					basis (other)	(c) Deprec	iation	(d) Bo	ok value
ınd			L	205,524	1,360,069				1,565,593
uildings		ı		787,417	50,717,025	18,1	47,994	3	3,356,448
						1			
asehold improvements		•					J		
asehold improvements					28,225,892	20,5	64,559		7,661,333
•		•		929,891			64,559 48,418		7,661,333 6,152,754
	Jsing the organization's accession and othe tems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's correct XIV During the year, did the organization solicit of assets to be sold to raise funds rather than to the organization and agent, trustee, custod included on Form 990, Part X? If "Yes," explain why in Part XIV and completed and an expensive funds are the organization and agent, trustee, custod included on Form 990, Part X? If "Yes," explain why in Part XIV and completed and an expensive funds are the organization include an amount on Form 1990, Part XIV and completed and the organization include an amount on Form 1990, Part XIV and completed and the organization include an amount on Form 1990, Part XIV and completed and the organization include an amount on Form 1990, Part XIV and completed and the organization include an amount on Form 1990, Part XIV and completed and part and the organization include an amount on Form 1990, Part XIV and completed and programs	Using the organization's accession and other records, check any tems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain a color of the organization's collections and explain a color of the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold to raise funds rather than to be maintained as possets to be sold and promise funds and complete the following table. Provide the organization include an amount on Form 990, Part X, line for Yes," explain the arrangement in Part XIV Find the organization funds and mount on Form 990, Part X, line for Yes," explain the arrangement in Part XIV Find the organization funds not in the possession of the organization by for the possession of the organization in the possession of the organization or possession of the organization by for the possession of the organization in the possession of the organization or possession of the organization by for the possession of the organization in the possession of the organization or possession of the organization or possession of the organization or possession of the organization o	Using the organization's accession and other records, check any of thems (check all that apply) Public exhibition Scholarly research Preservation for future generations Part XIV During the year, did the organization solicit or receive donations of an assets to be sold to raise funds rather than to be maintained as part of the organization solicit or receive donations of an assets to be sold to raise funds rather than to be maintained as part of the organization and explain how Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 90, Part X? If "Yes," explain why in Part XIV and complete the following table Beginning balance Old the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Findowment Funds. Complete if the organization and assets and programs are contributions. Contributions.	Using the organization's accession and other records, check any of the foltems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how the Part XIV During the year, did the organization solicit or receive donations of art, his assets to be sold to raise funds rather than to be maintained as part of the Part XIV. Interest of the part IV, line 9, or reported an amount on Form 990, Part X (is the organization an agent, trustee, custodian or other intermediary for concluded on Form 990, Part X? If "Yes," explain why in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Ending balance Additions during the year Distributions during the year Segunning of year balance Contributions 1,638,049 1,638	Using the organization's accession and other records, check any of the following that a tems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the rear XIV During the year, did the organization solicit or receive donations of art, historical treas assets to be sold to raise funds rather than to be maintained as part of the organization of the organization and explain how they further the organization. The organization are sets to be sold to raise funds rather than to be maintained as part of the organization. The organization are sets to be sold to raise funds rather than to be maintained as part of the organization. The organization are set to be sold to raise funds rather than to be maintained as part of the organization. The organization are set to be sold to raise funds rather than to be maintained as part of the organization and set to be sold to raise funds rather than to be maintained as part of the organization for the organization and set to be sold to raise funds rather than to be maintained as part of the organization included on Form 990, Part X, line 21. If "Yes," explain why in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Distributions during the year Distributions during the year Ending balance Organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Fress to assume the vear end sold organization answered "Yes" to assume the arrangement in Part XIV and complete if the organization that are held and organization by interest the organization in that are held and organization by interest to 3a(ii), are the related organizations instead as required on Schedule R? Description of investment Description of investment Land Cost or other basis (investment)	Using the organization's accession and other records, check any of the following that are a significant Lems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's enact XIV During the year, did the organization solicit or receive donations of art, historical treasures or other sin assets to be sold to raise funds rather than to be maintained as part of the organization's collection? If YIF IT LESCOW and Custodial Arrangements. Complete if the organization and custodial Arrangements. Complete if the organization and sent XIV. Jine 9, or reported an amount on Form 990, Part X, Jine 21. If Yes," explain why in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Distributions during the year Distributions during the year If Yes," explain the arrangement in Part XIV IF IT LEMP ARRANGE AR	Using the organization's accession and other records, check any of the following that are a significant use of its cottens (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purp Part XIV During the year, did the organization solicit or receive donations of art, historical treasures or other similar issests to be sold to raise funds rather than to be maintained as part of the organization's collection? IV Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X is the organization why in Part XIV and complete the following table Beginning balance Additions during the year In the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line organization include an amount on Form 990, Part X, line 21? Freshold organization include an amount on Form 990, Part X, line 21? Freshold organization include an amount on Form 990, Part X, line 21? Freshold organization include an amount on Form 990, Part X, line 21? Freshold organization include an amount on Form 990, Part X, line 10, Part X, l	Justing the organization's accession and other records, check any of the following that are a significant use of its collection terms (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in variation to the organization solicit or receive donations of art, historical treasures or other similar basets to be sold to raise funds rather than to be maintained as part of the organization's collection? INT Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Fe Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. If "Yes," explain why in Part XIV and complete the following table Baginning balance Additions during the year Distributions during the year Distributions during the year Distributions during the year Distributions during the year Seguinning of year balance (a) (Sument Year) (b) Prior Year (c) Two Years Book (d) Three Years Book (e) T	Juny the organization's accession and other records, check any of the following that are a significant use of its collection terms (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV During the year, did the organization solicit or receive donations of art, historical treasures or other similar asserts to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes If Yres, Escrow and Custodial Arrangements. Complete fithe organization answered "Yes" to Form 9 Part IV, line 9, or reported an amount on Form 990, Part X, line 21. If Yes, "explain why in Part XIV and complete the following table Beginning balance Additions during the year Ending balance Additions for the organization include an amount on Form 990, Part X, line 212 If Yes (Pessift "Yes," explain why in Part XIV I Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Seginning of year balance Additions for the arrangement in Part XIV I Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Administrative expenses 5,473,463 Administrative expenses 6,982,993 Administrative expenses 7,473,463 Administrative expenses 7,473,463 Administrative expenses 7,473,463 Administrative expenses 7,473,463 Administrative expenses 8

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	<u>). </u>	
(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation -year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line 1	13.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
(a) Description of investment type	(B) Book value	Cost or end-of-	-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, II	no 15		
(a) Descri		-	(b) Book value
REMAINDER TRUSTS	•		8,483,567
CONTRIBUTED ASSETS			10,810,446
ANNUITY INVESTMENTS AT MARKET			879,869
SHORT TERM INVESTMENTS			64,606
DEPOSITS FOR CONSTRUCTION			10,111,687
DEPOSITS FOR DEBT SERVICE			53,700,092
DEFERRED FIXED RATE VARIANCES			994,079
Total. (Column (b) should equal Form 990, Part X, col.(B) line			85,044,346
Part X Other Liabilities. See Form 990, Part	T T		
(a) Description of Liability	(b) A mount		
Federal Income Taxes	E 050 170		
SUPPLEMENT RETIREMENT RESERVE	5,058,172		
ACCRUED PENSION LIABILITY	84,409,200		
ACCRUED POSTRETIREMENT LIABILITY	11,146,697		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	100,614,069		

Secess or (deficit) for the year Subtract line 2 from line 1	1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	171,055,834
Net unrealized gains (losses) on investments	2	Total expenses (Form 990, Part IX, column (A), line 25)	2	170,136,030
Donated services and use of facilities	3	Excess or (deficit) for the year Subtract line 2 from line 1	3	919,804
Figure 2	4	Net unrealized gains (losses) on investments	4	-113,407,806
7	5	Donated services and use of facilities	5	
8 0.1 0.2	6	Investment expenses	6	
Total adjustments (net) Add lines 4 - 8 9 -195,106,841	7	Prior period adjustments	7	
Excess or (deficit) for the year per financial statements Combine lines 3 and 9 10 -194,187,037	8	Other (Describe in Part XIV)	8	-81,699,035
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements	9	Total adjustments (net) Add lines 4 - 8	9	-195,106,841
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements	10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-194,187,037
Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments	Par		per R	eturn
Net unrealized gains on investments	1	Total revenue, gains, and other support per audited financial statements	1	48,920,481
b Donated services and use of facilities	2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
c Recoveries of prior year grants	а	Net unrealized gains on investments		
d Other (Describe in Part XIV)	b	Donated services and use of facilities		
Add lines 2a through 2d	c	Recoveries of prior year grants		
Subtract line 2e from line 1	d	Other (Describe in Part XIV)		
A mounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b . 4a b Other (Describe in Part XIV)	e	Add lines 2a through 2d	2e	-122,135,353
Investment expenses not included on Form 990, Part VIII, line 7b . 4b	3	Subtract line 2e from line 1	3	171,055,834
b Other (Describe in Part XIV)	4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
c Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	b	, , , , , , , , , , , , , , , , , , ,		
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements	С			
Total expenses and losses per audited financial statements				· · · · · · · · · · · · · · · · · · ·
A mounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities				
a Donated services and use of facilities				170,808,134
b Prior year adjustments				
c Losses reported on Form 990, Part IX, line 25			-	
d Other (Describe in Part XIV)			1	
	e	Add lines 2a through 2d	2e	672,104
				170,136,030
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				-,,
a Investment expenses not included on Form 990, Part VIII, line 7b 4a				
b Other (Describe in Part XIV) 4b			1	
c Add lines 4a and 4b	c	,	4c	
5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	170,136,030

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanat ion
CONSERVATION EASEMENTS	FORM 990, SCHEDULE D, PART II, LINE 5	Facilities Office personnel walk the conservation easement area twice a year to ensure that there are no encroachments on the 10 76 acre area and that there are no prohibited uses as defined in the terms of the conservation restriction FORM 990, SCHEDULE D, PART II, LINE 9 THE WOODS HOLE OCEANOGRAPHIC INSTITUTION'S CONSERVATION EASEMENT IS NOT ACCOUNTED FOR SEPARATELY, BUT IS INCLUDED AS PART OF LAND ON THE BALANCE SHEET
INTENDED USE OF ENDOWMENT FUND	FORM 990, SCHEDULE D, PART V, LINE 4	-provide a stReam of income in support of annual budgetary needs -preserve and enhance the real (inflation-adjusted) purchasing power -provide support for capital investment needs as they arise
ADJUSTMENTS TO NET ASSETS	FORM 990, SCHEDULE D, PART XI, LINE 8	PENSION RELATED CHANGES other than cost (56,477,400) UNREALIZED LOSS ON SWAP (9,399,651) CHANGE IN SPLIT INTEREST AGREEMENTS (3,055,594) DISTRIBUTION IN EXCESS OF INCOME EARNED (9,484,852) CHANGE IN PREPAID PENSION COST (3,190,468) REDESIGNATION OF GIFTS (91,070) TOTAL (81,699,035)
REVENUE INCLUDED ON BOOKS BUT NOT ON RETURN	FORM 990, SCHEDULE D, PART XII, LINE 2D	UNREALIZED LOSS ON SWAP (9,399,651) RENTAL EXPENSE 672,104 TOTAL (8,727,547)
expenses INCLUDED ON BOOKS BUT NOT ON RETURN	FORM 990, SCHEDULE D, PART XIII, LINE 2D	RENTAL EXPENSE 672,104

Part XIV Supplemental Inf	ormation(continued)	
Ident if ier	Return Reference	Explanation
CONSERVATION EASEMENTS	FORM 990, SCHEDULE D, PART II, LINE 5	Facilities Office personnel walk the conservation easement area twice a year to ensure that there are no encroachments on the 10 76 acre area and that there are no prohibited uses as defined in the terms of the conservation restriction FORM 990, SCHEDULE D, PART II, LINE 9 THE WOODS HOLE OCEANOGRAPHIC INSTITUTION'S CONSERVATION EASEMENT IS NOT ACCOUNTED FOR SEPARATELY, BUT IS INCLUDED AS PART OF LAND ON THE BALANCE SHEET
INTENDED USE OF ENDOWMENT FUND	FORM 990, SCHEDULE D, PART V, LINE 4	-provide a stReam of income in support of annual budgetary needs -preserve and enhance the real (inflation-adjusted) purchasing power -provide support for capital investment needs as they arise
ADJUSTMENTS TO NET ASSETS	FORM 990, SCHEDULE D, PART XI, LINE 8	PENSION RELATED CHANGES other than cost (56,477,400) UNREALIZED LOSS ON SWAP (9,399,651) CHANGE IN SPLIT INTEREST AGREEMENTS (3,055,594) DISTRIBUTION IN EXCESS OF INCOME EARNED (9,484,852) CHANGE IN PREPAID PENSION COST (3,190,468) REDESIGNATION OF GIFTS (91,070) TOTAL (81,699,035)
REVENUE INCLUDED ON BOOKS BUT NOT ON RETURN	FORM 990, SCHEDULE D, PART XII, LINE 2D	UNREALIZED LOSS ON SWAP (9,399,651) RENTAL EXPENSE 672,104 TOTAL (8,727,547)
expenses INCLUDED ON BOOKS BUT NOT ON RETURN	FORM 990, SCHEDULE D, PART XIII, LINE 2D	RENTAL EXPENSE 672,104

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue

Service

Statement of Activities Outside the United States

► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization		Employer identification number				
WOODS HOLE OCEANOGRA	PHICINSTITUT	ION			04-210585	0
Part I General Infor "Yes" to Form 9			ide the United States	s. Complete	e if the orgai	nization answered
1 For grantmakers. Doe assistance, the grante	es the organiza	ition maintain r or the grants or	records to substantiate assistance, and the se	lection crite	rıa used to a	ward
2 For grant makers. Descri United States	be in Part IV the	organization's pi	ocedures for monitoring th	ne use of grai	nt funds outsic	le the
3 Activites per Region (U	se Schedule F-1	(Form 990) ıf ad	ditional space is needed)			
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	is a progr describe st	ty listed in (d) am service, pecific type of s) in region	(f) Total expenditures in
Central America and the Caribbean	1	19	Program Services	RESEARCH		196,052
Central America and the Caribbean		2	Program Services	SHIP OPER	ATIONS	53,158
Europe (Including Iceland and Greenland)		3	Program Services	SHIP OPER	ATIONS	14,780
Middle East and North Africa	1	33	Program Services	RESEARCH		606,313
Middle East and North Africa		3	Program Services	SHIP OPER	ATIONS	5,717
North America		4	Program Services	SHIP OPER	ATIONS	27,830
Sub-Saharan Africa		2	Program Services	SHIP OPER	ATIONS	3,733

Totals ▶

907,583

Name of anization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							

a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method o valuation (book, FMV, appraisal, othe

Schedule F (Form 990) 2008

	Supplemental Infor	mation	raye 🕶
			in Part I, line 2, and any other additional information.
	Identifier	ReturnReference	Explanation
DESCRIPTI ACTIVITIE:		SCHEDULE F, part I, line 3	woods Hole Oceanographic Institution (WHOI) operates three U S government-owned oceanographic research vessels under the University-National Oceanographic Laboratory System (UNOLS) The ships operate by "legs," periods of time at sea Each leg ends in a port of call to disembark researchers, equipment and sometimes marine crew, then load equipment, and board the next set of researchers and sometimes crew members for the following leg. Some ports of call are in foreign regions as determined by grants that fund ship operations. WHOI does not consider these transient activities to constitute foreign activities that should be reported on form 990, schedule f. In all of these cases the purpose of joining a ship is to conduct research activities or ship operations at sea, not in the foreign country. However, agents, primarily ship's agents who are paid for services to facilitate the turnover between legs at sea, are reported by number and total expenditures (Part I, line 3, column (c) & (f)). Two places in foreign regions can be identified where research is carried out on a repeated basis. One, in the Middle East & North Africa Region, a graduate-level scientific research university has an agreement with WHOI to collaborate on marine research projects. The other is the Liquid Jungle Lab (LJL) in the central america/carribean region. WHOI uses these facilities, but does not have an ownership interest. This is the basis for counting them as offices for the purposes of Part I, line 3, column (b). Part I, line 3, columns (b) & (f) - Reportable information is obtained through WHOI's financial management system. Provision of column (f) data for the university was facilitated by a locally-imposed accounting procedure that separates costs incurred inside its borders from those incurred outside.
-			
-			
		<u> </u>	Schodule E (Form 990) 2008

Software ID:

Software Version:

EIN: 04-2105850

Name: WOODS HOLE OCEANOGRAPHIC INSTITUTION

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
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efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493317021179

Employer identification number

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

2008

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Inspect ion

WOODS HOLE OCEANOGRAI	DUIC INCTITUTIO	. NI					
WOODS HOLE OCEANOGRAP	PRIC INSTITUTIO	· IV				04-2105850	
Part I General Infor	mation on Gra	nts and Assistance	2			1	
Does the organization mathematics the selection criteria useDescribe in Part IV the organization	ed to award the grai	nts or assistance?					
Form 990, Part Part IV and Sch	IV, line 21 for ar ledule I-1 if addi	ny recipient that rece tional space is	erved more than \$5,0	00. Check this box	tes. Complete if the of the office of the conference of the confer	ceived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
2 Enter total number of seconganizations					•		
3 Enter total number of oth							•
For Paperwork Reduction Act No				Cat No 50055			hedule I (Form 990) 2008

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
FELLO WSHIPS/SCHOLARSHIPS	106		3,852,995	воок	TUITION
STIPENDS	255	4,691,825			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

See Additional Data Table		
Ident if ier	Return Reference	Explanation
MAINTAINING RECORDS	I, LINE 1	APPLICATIONS FOR ADMISSIONS ARE REVIEWED BY FACULTY STUDENTS ARE ADMITTED BASED UPON THEIR ACADEMIC RECORD, AND ALL ARE GIVEN SUPPORT THROUGH EITHER WHOI OR MIT WRITTEN RECORDS OF ALL DECISIONS ARE RETAINED MONITORING USE OF GRANT FUNDS FORM 990, SCHEDULE I, PART I, LINE 2 EACH STUDENT'S ACADEMIC PROGRESS IS EVALUATED YEARLY

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493317021179

Employer identification number

Schedule J

Name of the organization

Compensation Information

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

WOODS HOLE OCEANOGRAPHIC INSTITUTION 04-2105850 **Questions Regarding Compensation** Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) **b** If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain 1b Νo Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Νo Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a Receive a severance payment or change of control payment? 4a Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III 501(c)(3) and 501(c)(4) organizations only must complete lines 5-8. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? **5**a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Nο 6b Νo Any related organization? If "Yes," to line 6a or 6b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III

Yes

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
CAROLYN BUNKER CFO	(I)	196,635 0	0 0	17,779 0	28,230 0	749 0	243,393 0	
SUSAN AVERY BEGAN 2408	(I)	306,035 0	0 0	20,540 0	41,077 0	10,373 0	378,025 0	
LAURENCE MADIN	(ı) (ıı)	212,625 0	0 0	15,257 0	58,268 0	12,792 0	298,942 0	(
ROBERT WELLER	(ı) (ıı)	180,722 0	0	21,217 0	29,006 0	10,667 0	241,612 0	(
ROBERT DETRICK	(ı) (ıı)	190,013 0	0	7 4 8 0	25,793 0	11,135 0	227,689 0	(
SUSAN HUMPHRIS	(I) (II)	134,929 0	0	21,070 0	21,215 0	14,666 0	191,880 0	
JAMES YODER	(I) (II)	197,403 0	0	0	27,227 0	15,296 0	239,926 0	
DANIEL STUERMER	(I)	179,341 0	0	11,289 0	26,725 0	19,826 0	237,181 0	
WILLIAM JENKINS	(ı) (ıı)	159,388 0	0	17,466 0	25,635 0	13,241 0	215,730 0	
BRIAN TUCHOLKE	(ı) (ıı)	137,585 0	0	21,236 0	22,174 0	16,073 0	197,068 0	(
JUDY MCDOWELL	(ı) (ıı)	138,463 0	0 0	20,921 0	23,494 0	17,595 0	200,473	(
	(ii) (i) (ii)							
	(i) (ii)							

Part III Supplemental Information

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

See Additional Da	ta Table								
Ident if ier	Ret urn Ref erence	Explanation							
HOUSING ALLOWANCE DESCRIPTION	FORM 990, SCHEDULE J, LINE 1B	AN ON-SITE RESIDENCE IS MADE AVAILABLE TO THE PRESIDENT/DIRECTOR AS AN ELEMENT OF HER EMPLOYMENT CONTRACT IMPUTED INCOME IS CALCULATED FOR THIS HOUSING PROVISION INITIAL CONTRACT FORM 990, SCHEDULE J, LINE 8 Susan Avery entered into an employment agreement with Woods Hole Oceanographic Institution in december 2007. The terms of her contract include a base salary, regular employee benefits (e.g., life insurance, medical insurance, disability income, vacation, retirement, and other benefit plans which the Institution may from time to time have in effect for all or most of its senior administrators), participation in the Retirement Benefit Restoration Plan, housing assistance (allowed to reside at Meteor House until the time she elects to purchase a home in the Woods Hole area, at which time she would be provided with a first or second mortgage loan towards the purchase of the first principal residence, maximum of loan will be the lower of \$250,000 or fifty percent of the purchase price of the property), and a 12-month severance provision							
-									
-									

Software ID: Software Version:

EIN: 04-2105850

Name: WOODS HOLE OCEANOGRAPHIC INSTITUTION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Torin 550, Schedule 5,	Torm 330, Schedule 3, Part II Officers, Directors, Prastees, Key Employees, and Ingliest compensated Employees								
(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	3C compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form	
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ	
CAROLYN BUNKER CFO	(1) (11)	'	0	17,779 0	28,230 0	749 0	243,393	0	
SUSAN AVERY BEGAN 2408	(1) (11)	·	, 0	20,540 0	41,077 0	10,373	378,025	0	
LAURENCE MADIN	(1) (11)	·	0	15,257 0	58,268 0	12,792	298,942	0	
ROBERT WELLER	(ı) (ıı)	:	0	21,217 0	29,006 0	10,667	241,612	0	
ROBERT DETRICK	(ı) (ıı)	I	, 0	748 0	25,793 0	11,135	227,689	0	
SUSAN HUMPHRIS	(1) (11)	I	0	21,070 0	21,215 0	14,666	191,880	0	
JAMES YODER	(1) (11)		0	0	27,227 0	15,296 0	239,926	0	
DANIEL STUERMER	(1) (11)		0	11,289 0	26,725 0	19,826	237,181	0	
WILLIAM JENKINS	(1) (11)		0	17,466 0	25,635 0	13,241	215,730	0	
BRIAN TUCHOLKE	(1) (11)	•	, o	21,236 0	22,174 0	16,073	197,068	0 0	
JUDY MCDOWELL	(I) (II)		, 0	20,921	23,494	17,595 0	200,473	0	

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
	SCHEDULÉ J, LINE 1B	AN ON-SITE RESIDENCE IS MADE AVAILABLE TO THE PRESIDENT/DIRECTOR AS AN ELEMENT OF HER EMPLOYMENT CONTRACT IMPUTED INCOME IS CALCULATED FOR THIS HOUSING PROVISION INITIAL CONTRACT FORM 990, SCHEDULE J, LINE 8 Susan Avery entered into an employment agreement with Woods Hole Oceanographic Institution in december 2007. The terms of her contract include a base salary, regular employee benefits (e.g., life insurance, medical insurance, disability income, vacation, retirement, and other benefit plans which the Institution may from time to time have in effect for all or most of its senior administrators), participation in the Retirement Benefit Restoration Plan, housing assistance (allowed to reside at Meteor House until the time she elects to purchase a home in the Woods Hole area, at which time she would be provided with a first or second mortgage loan towards the purchase of the first principal residence, maximum of loan will be the lower of \$250,000 or fifty percent of the purchase price of the property), and a 12-month severance provision

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

OMB No 1545-0047

Open to Public Inspect ion

Department of the Treasury

WOODS HOLE OCEANOGRAPHIC INSTITUTION

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.

Internal Revenue Service Name of the organization

Employer identification number

04-2105850

										0. 2103				
Pa	rt I Bond Issues (Required	d for 2008)								•				
	(a) Issuer Name (b) Issuer EIN (c) CUSIP #		(d) Date	Issued	(e) Issue Price (f) Description of		Purpose (g) Defeased		feased	(h) O n Behalf of Issuer				
											Yes	No	Yes	No
A	MHEFA	04-2456011	57586CCY9	06-29-2	2004	54,8	350,000	CONSTRUC [*] OF FACIL	TION, REN	IOVATION		х		Х
В	MHEFA	04-2456011	57586ECE9	12-04-2	2008	65,0	000,000	REFINANCE 6/29/2004	D BOND I	SSUE OF		Х		Х
Par	Proceeds (Optional for	2008)			•	_				_				
					4	E	3	(:	D			E	
1	Total Proceeds of Issue													
2	Gross Proceeds in Reserve Funds	3												
3	Proceeds in Refunding or Defeasa	nce Escrows												
4	Other Unspent Proceeds													
5	Issuance Costs from Proceeds													
6	6 Working Capital Expenditures from Proceeds													
7	7 Capital Expenditures from Proceeds													
8	Year of Substantial Completion													
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	s	No
9	Were the bonds issued as part of a	a current refunding is:	sue?											
10	Were the bonds issued as part of a	an advance refunding	ıssue?											
11	Has the final allocation of proceed	ds been made?												
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?													
Par	t IIII Private Business Use	(Optional for 2008	3)	1						l I				
				<i>p</i>	1	E	3	C D					E	
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	5	No
1	Was the organization a partner in which owned property financed by		∍mber of an LLC,											
2	Are there any lease arrangements which may result in private busine		inanced property											
For Paperwork Reduction Act Notice, see the Instructions for Form 990.						Cat No 501	.93E			Sch	nedule K	Form 99	0) 2008	

Schedule K (Form 990) 2008						
Part III	Private	Business	Use	(Continued)		

		4	A	E	3	(С	I	D		E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
За	Are there any management or service contracts with respect to the										
	financed property which may result in private business use?										
3b	A re there any research agreements with respect to the financed property which may result in private business use?										
3с	c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	A	E	3	С		l	D E		E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
b	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?										
6	Did the bond issue qualify for an exception to rebate?										

DLN: 93493317021179

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

OMB No 1545-0047 Open to Public Inspection

Name of the organization **Employer identification number** WOODS HOLE OCEANOGRAPHIC INSTITUTION 04-2105850 Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person 1 (b) Description of transaction 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (b) Loan to or (e) In Approved (g)Written from the (c)O riginal principal default? by board or agreement? (a) Name of interested person and purpose (d)Balance due organization? amount committee? Yes Τо From No Yes No Yes No LAURENCE MADIN EDUCATION 6,000 553 Χ Νo Yes Yes 553 Part III Grants or Assistance Benefitting Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27. (b)Relationship between interested person (a) Name of interested person (c)A mount of grant or type of assistance and the organization CARLY BUCHWALD DAUGHTER OF TRUSTEE M VAN LEER 15,002 CARLY BUCHWALD DAUGHTER OF TRUSTEE M VAN LEER 30,115 Part IV Business Transactions Involving Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (b) Relationship organization's between interested (c) A mount of (d) Description of transaction (a) Name of interested person revenues? person and the transaction organization Yes No

SCHEDULE M (Form 990)

Non-Cash Contributions

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Open to Public Inspection

ame of the organization /OODS HOLE OCEANOGRAPHIC INSTITUTION Employer identification					ion nu	mber		
VOO	DS HOLE OCEANOGRAPHIC INSTITUTION				04-2105850			
Ρā	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of d reven	etermı	ning	
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
_	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property			202.27				
	Securities—Publicly traded .	X	18	392,873	I FM V			
	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 .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other (describe)							
	Other (describe)							
	Other (describe)							
	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement	d Form 828		ar for contributions for	29			
							Yes	No
30a	During the year, did the organization hold for at							ı
	least three years from the date of for the entire holding period? .		•	not required to be used for	exempt purposes	30a		No
b	If "Yes", describe the arrangem					300		
	Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
	Does the organization hire or us							
	contributions?					32a		Νo
ь 33	If "Yes", describe in Part II If the organization did not report	revenuesı	n Column (c) for a type of p	property for which Column (a) ıs			
	checked, describe in Part II						- 1	

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

| Identifier | Parturp of reasons | Explanation | Explanati

32b, and 33. Also complete this part for any additional information.						
Identifier	ReturnReference	Explanation				
CONTRIBUTION METHOD	FORM 990, SCHEDULE M, PART I, COLUMN (B)	WOODS HOLE OCEANOGRAPHIC INSTITUTION HAS REPORTED THE NUMBER OF CONTRIBUTIONS ON THIS SCHEDULE				

DLN: 93493317021179

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008
Open to Public Inspection

Name of the organization
WOODS HOLE OCEANOGRAPHIC INSTITUTION

Employer identification number

04-2105850

ldentifier	Return Reference	Explanation
MISSION STATEMENT	LLINE LAND PART	THE WOODS HOLE OCEANOGRAPHIC INSTITUTION IS DEDICATED TO RESEARCH AND EDUCATION TO ADVANCE UNDERSTANDING OF THE OCEAN AND ITS INTERACTION WITH THE EARTH SYSTEM, AND TO COMMUNICATE THIS UNDERSTANDING FOR THE BENEFIT OF SOCIETY FOREIGN COUNTRIES FORM 990, PART V, LINE 4B CAYMAN ISLANDS CURACAO ENGLAND NETHERLAND ANTILLES

ldentifier	Return Reference	Explanation
FAMILY/BUSINESS RELATIONSHIPS	FORM 990, PART VI, LINE 2	JOSEPH d roxe, TREASURER/TRUSTEE EX OFFICIO AND JOSEPH f patton jr, TRUSTEE serve jointly on the board of Boston Symphony Orchestra, another not-for-profit 990 REVIEW PROCESS FORM 990, PART VI, LINE 10 Management will distribute a draft version of Form 990 to the Audit Committee. The Audit Committee will return their comments to management each voting member of the governing body, the President & Director and Vice President for Finance & Administration & Chief Financial Officer will receive copies of Form 990 for review. The auditors/tax consultants will then finalize the Form 990. Copies of completed Form 990 will be distributed in electronic or paper form to members of the governing body prior to filing with the IRS. A designee of the Vice President for Finance & Administration & Chief Financial Officer will be responsible for maintaining a current distribution list and distributing the copies.

ldentifier	Return Reference	Explanation
CONFLICT OF INTEREST COMPLIANCE	FORM 990, PART VI, LINE 12C	EACH TRUSTEE AND OFFICER OF WOODS HOLE OCEANOGRAPHIC INSTITUTION ("WHOI") IS REQUIRED TO DISCLOSE ON AN ONGOING BASIS, IN WRITING, ON WHOI'S DISCLOSURE STATEMENT, (A) ANY FINANCIAL OR BUSINESS RELATIONSHIPS THAT HE OR SHE, OR ANY FAMILY MEMBER, HAS WITH WHOI OR ANY AFFILIATED ORGANIZATION OR WITH ORGANIZATIONS THAT DO BUSINESS WITH WHOI OR ANY AFFILIATED ORGANIZATION, (B) ANY ELECTED OR APPOINTIVE OFFICE OR POSITION THAT HE OR SHE, OR ANY FAMILY MEMBER, HOLDS IN A BRANCH OF GOVERNMENT OR IN A REGULATORY AGENCY HAVING AUTHORITY OR JURISDICTION OVER WHOI, OR (C) OTHER PERSONAL, FAMILIAL, FINANCIAL, OR BUSINESS RELATIONSHIPS THAT OTHERWISE COULD BE CONSTRUED TO AFFECT THE INDEPENDENT, UNBIASED JUDGMENT OF SUCH TRUSTEE OR OFFICER IN LIGHT OF HIS OR HER DECISION-MAKING AUTHORITY OR RESPONSIBILITIES FOR WHOI THE DISCLOSURE STATEMENTS ARE FILED WITH WHOI'S CLERK AND THE CLERK WILL PREPARE A REPORT ANNUALLY OR MORE FREQUENTLY AS NECESSARY FOR THE TRUSTEES AND OFFICERS SUMMARIZING ANY CONFLICT ISSUES THE AUDIT COMMITTEE REVIEWS THE DISCLOSURE REPORTS AND ANY CONFLICT ISSUES THE AUDIT COMMITTEE REVIEWS THE DISCLOSURE REPORTS AND THE EXECUTIVE COMMITTEE'S ATTENTION THE EXECUTIVE COMMITTEE'S ATTENTION THE EXECUTIVE COMMITTEE WILL DETERMINE WHETHER A CONFLICT EXISTS BASED ON WHOI'S CONFLICT OF INTEREST POLICY IF A CONFLICT OF INTEREST IS DETERMINED, THE EXECUTIVE COMMITTEE WILL EXERCISE THEIR JUDGMENT ON THE BEST COURSE TO FOLLOW

ldentifier	Return Reference	Explanation
COMPENSATION APPROVAL	FORM 990, PART VI, LINE 15	THE COMPENSATION PROCESS CONSISTS OF COMPARABLE, RELEVANT MARKET DATA FOR THE INSTITUTION'S POSITIONS OBTAINED FROM PUBLISHED SURVEYS, AND OTHER AVAILABLE SOURCES SUCH AS PEER ORGANIZATIONS' 990 FORMS OTHER SURVEYS OF SPECIALIZED SKILL SETS OR EMPLOYEE ATTRIBUTES CRITICAL TO THE SUCCESS OF THE INSTITUTION WILL ALSO BE INCORPORATED AS NEEDED MOREOVER, THE COMMITTEE MAY RELY ON MEMBERS OF WHOI MANAGEMENT AND OUTSIDE ADVISORS, CONSULTANTS, AND COUNSEL TO PROVIDE MARKET DATA REPORTS, ANALYSIS, AND OPINIONS WITH RESPECT TO COMPENSATION-RELATED MATTERS ALL COMPENSATION DECISIONS MADE ARE DOCUMENTED IN THE MINUTES

ldentifier	Return Reference	Explanation
PUBLIC DISCLOSURE OF DOCUMENTS	FORM 990, PART VI, LINE 19	THE WOODS HOLE OCEANOGRAPHIC INSTITUTION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC THROUGH ITS WEBSITE

ldentifier	Return Reference	Explanation
RELATED ORGANIZATIONS	FORM 990, PART VII	CAROLYN BUNKER, CLERK/CFO/VP FINANCE & ADMINISTRATION/TRUSTEE EX OFFICIO OF WOODS HOLE OCEANOGRAPHIC INSTITUTION ("WHO!") DEDICATES AN AVERAGE OF ONE HOUR PER WEEK TO RELATED ORGANIZATIONS OF WHO!

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

DLN: 93493317021179

2008

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2008

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service

SCHEDULE R

(Form 990)

▶ Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Name of the organization VOODS HOLE OCEANOGRAPHIC INSTITUTION	Employer Identification number					
TOODS TOLE OCCUMOSION THE INSTITUTION				04-2105850		
Part I Identification of Disregarded Entities						
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity	
Part II Identification of Related Tax-Exempt Organizat	ions					
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity stati (if section 501(c)(3	(F) us Direct controlling 3)) entity	
RETIREMENT TRUST FOR EMPLOYEES OF WHOI						
569 woods hole road woods hole, MA02543 04-2893434	RET TRUST	МА	401(a)	N/A	NA	
WHOI TAX EXEMPT EMP WELFARE BEN TRUST 569 WOODS HOLE ROAD WOODS HOLE, MA02543 04-3282355	BEN TRUST MA 501(c)(9)		501(c)(9)	N/A	NA	

Cat No 50135Y

art III Identification of R			(C)			(E)		(G)	_ (I	1)	(1)		(J)	_
(A) Name, address, and EIN of related organization	(B) Primary act	ivity	Legal domicile (state o foreign country)	r	(D) Direct controlling entity	Predominant income(related, investment, unrelated)	(F) Share of total income	Share of end-of- year assets		prtionate tions?	(I) Code V—UBI am on Box 20 of K-	1	General nanagır partner	ng r?
									Yes	No		Y	res N	0
														_
Part IV Identification of R	Related Org	anizations	Taxa	ble as	a Corporation	or Trust								_
(A) Name, address, and EIN of related o		(B) Primary act			(C) egal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total inc	ome	Sł end	(G) lare of -of-year ssets	(H) Percent owners	age	
QUISSETT DEVELOPMENT CORP REALTY TRU 569 WOODS HOLE ROAD WOODS HOLE, MA02543 26-6212595	JST	LICENSING			МА	NA	TRUST		0		0	100 %		
														_
														_

Part V Transactions with Related Organizations
--

Part	t V Transactions with Related Organizations			
N	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Duri	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a R	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b 0	Gift, grant, or capital contribution to other organization(s)	1b		No
c G	Gift, grant, or capital contribution from other organization(s)	1 c		No
d L	Loans or loan guarantees to or for other organization(s)	1d		No
e L	Loans or loan guarantees by other organization(s)	1e		No
f S	Sale of assets to other organization(s)	1f		No
g P	Purchase of assets from other organization(s)	1 g		No
h E	Exchange of assets	1h		No
i L	Lease of facilities, equipment, or other assets to other organization(s)	1 i		No
j L	Lease of facilities, equipment, or other assets from other organization(s)	1 j		No
k P	Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
I P	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m S	Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n S	Sharing of paid employees	1n		No
o R	Reimbursement paid to other organization for expenses	10		No
p R	Reimbursement paid by other organization for expenses	1p		No
q C	O ther transfer of cash or property to other organization(s)	1 q	Yes	
r O	O ther transfer of cash or property from other organization(s)	1 r		No
2 If	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresh	nolds		
	(A) Name of other organization(s) (B) Transaction type(a-r) (C) Amount In			
(1)	RETIREMENT TRUST FOR EMPLOYEES OF WHOI	8,	,000,000	0

(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1) RETIREMENT TRUST FOR EMPLOYEES OF WHOI	Q	8,000,000
(2) WHOI TAX EXEMPT EMP WELFARE BEN TRUST	Q	447,218
(3)		
(4)		
(5)		
(6)		

Part VI Unrelated Organizations Taxable as a Partnership

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

								1						
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		(E) Share of end-of-year assets			(G) Code V—UBI amount on Box 20 of K-1	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No				
								Cabadula	R (Form	200) 2000				