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)

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

OMB No. 1545-0047 2009 Open to Public Inspection

Α	For the 200	09 cal <u>endar y</u>	ear, or tax year beginning , and ending			
В	Check if applica	USO IDS	C Name of organization NC Coastal Federation, Inc.) Empl	oyer identification number
H	_	label or print or	Doing Business As		58	-1494098
\vdash	Name change	type.			hone number	
닏	Initial return	See			2-393-8185	
	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4	G	Gross red	ceipts \$ 5,083,252
	Amended return		Newport NC 28570			
	Application per	iuli iy	e and address of principal officer:	F	H(a) Is this	s a group return for
_		I	dd Miller		affilia H(b) Are a	
		I	09 Highway 24	'	includ	led? Yes No
			wport NC 28570		If "No	o," attach a list. (see instructions)
<u></u>	Tax-exempt		501(c) (3) t (insert no.) 4947(a)(1) or 527	⊢.		
<u>J</u>			ast.org			p exemption number u
	Part I	zation: X Co Summa		n: 19	04	M State of legal domicile: NC
	T		the organization's mission or most significant activities:			
		•	de citizens and groups with the assistance needed to t	ake	an a	rtive
nce			the stewardship of North Carolina's coastal water qual			
rna	1		resources.			
Governance			if the organization discontinued its operations or disposed of more than 25% of its net	assets		
<u>ග</u> න			g members of the governing body (Part VI, line 1a)		١.	29
			endent voting members of the governing body (Part VI, line 1b)			29
Activities			employees (Part V, line 2a)		5	19
Acti	6 Tota	al number of	volunteers (estimate if necessary)		6	414
	7a Tota	al gross unrel		7a		
	b Net	unrelated bu	siness taxable income from Form 990-T, line 34		7b	0
	0 000	tuile estimate man		or Year	246	Current Year
ne	8 Con	tributions and	344	,246	4,931,402	
Revenue	9 Prog	gram service	revenue (Part VIII, line 2g)	_98	,616	140,388
Re			ne (Part VIII, column (A), lines 3, 4, and 7d) Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,010 ,946	11,462
			· · · · · · · · · · · · · · · · · · ·		,516 ,576	5,083,252
			ar amounts paid (Part IX, column (A), lines 1–3)	<u> </u>	7570	3,003,232
			or for members (Part IX, column (A), line 4)			
"	4- 0.			053	,917	1,074,885
benses	16a Prof		draising fees (Part IX, column (A), line 11e)		•	,
	b Tota		expenses (Part IX, column (D), line 25) u 60,188			
ŵ	17 Othe	er expenses	(Part IX, column (A), lines 11a–11d, 11f–24f) 1,	769	,341	6,550,794
	18 Tota	al expenses.	Add lines 13–17 (must equal Part IX, column (A), line 25)		,258	7,625,679
	19 Rev	enue less ex			,318	-2,542,427
Net Assets or	00 -	d and the Co	Beginning 25			End of Year
Asse Rala	20 Tota		No. 1 V. Fra. 20)		,528 ,311	32,870,997 130,207
Net.	21 10ta		Part X, line 26) and balances. Subtract line 21 from line 20		, <u>311</u> , 217	32,740,790
F	Part II		re Block	205	<u>, </u>	32,710,730
•	art II		Ities of perjury, I declare that I have examined this return, including accompanying schedules and stateme	nts and	I to the he	est of my knowledge
			is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of w			
Sig	ηn					
He	_	Signatu	re of officer		Date)
		Type or	r print name and title			
		Preparer's		check if	_	Preparer's identifying number (see instructions)
Pa		signature		elf- mployed	u L	D00109462
	eparer's	Firm's name	G. Lee Carroll, Jr., CPA, P.C.		EIN 1	FC 00FCFFC
US	e Only	if self-emplo			Phone	
_		address, and			no. 1	u 252-247-5390
Ma	y the IRS d	liscuss this re	eturn with the preparer shown above? (see instructions)			Yes No

Pa	Part III Statement of Program Service Accomplishments	
1	1 Briefly describe the organization's mission:	
	To provide citizens and groups with the assistance nee	ded to take an active
	role in the stewardship of North Carolina's coastal wa	
	natural resources.	
1	natural resources.	
2	2 Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
2		
3		
	services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	4 Describe the exempt purpose achievements for each of the organization's three largest program services by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amour	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	3
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
	F 464 225	
	4a (Code:) (Expenses \$ 7,464,397 including grants of \$) (Revenue \$)
	Operations in coastal NC for: habitat restoration and	
τ	protection, environmental education, encouragement and	l
	onforgoment of gound rules and regulations	
	enforcement of Board futes and regulations	
	·	
	*	
	4b (Code:) (Expenses \$ including grants of \$) (Revenue \$
4b	4b (Code:) (Expenses \$ including grants of \$) (Revenue \$
4b	4b (Code:) (Expenses \$ including grants of \$) (Revenue \$
4b	4b (Code:) (Expenses \$ including grants of \$	
4b		
4c		
4c	4c (Code:) (Expenses \$ including grants of \$	
4c	4c (Code:) (Expenses \$ including grants of \$	

Form	1990 (2009) NC Coastal Federation, Inc. 58-1494098		Р	age :
Pa	art IV Checklist of Required Schedules		1	I
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	١,	\ ₃₂	
•	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			37
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete		3,7	
_	Schedule C, Part II	4	X	
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 similar funds or 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
-	Schedule D, Parts XI, XII, and XIII.	12	Х	
12Δ	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
13	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the appropriate analysis of the appropriate and the lighted Oterson	14a		X
b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
b		14h		Х
15	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	15		v
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	4.0		\ _V
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	4-7		_V
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	1	I	I

Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

If "Yes," complete Schedule G, Part III

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Form **990** (2009)

18

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Form 990 (2009) NC Coastal Federation, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			٠,,
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			7.7
.	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	240		Х
h	24b through 24d and complete Schedule K. If "No," go to line 25	24a 24b		Λ
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
C	to defence any tax exempt hands?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24u		
2 50	with a discussified person during the year? If "Voc." complete Schodule I. Part I.	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	254		25
b	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	000 E72 If "Voc " complete Schodule I. Port I.	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	200		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Voc " complete Cabadula I Dout III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Х
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			3.7
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		3,	
	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	<u> </u>

Form **990** (2009)

Г	Statements Regarding Other INS Fillings and Tax Compliance				l
10	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			Yes	No
ıa	II C. Information Datuma Fator O. if not applicable	1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rep				
·	goming (gombling) winnings to prize winners?		1c	Х	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	· · · · · · · · · · · · · · · · · · ·		21	
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a 19			
b			2b		Х
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	13:	<u>ZD</u>		
	instructions)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d bv			
-	this return?	•	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	•			
	account)?		4a		Х
b	If "Yes," enter the name of the foreign country: u				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign E	Bank			
	and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regal				
	Prohibited Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	organization solicit any contributions that were not tax deductible?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or			
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods			
	and services provided to the payor?		7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S			
	required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pe	ersonal			
	benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ct?			X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C		71.		- V
8	required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		7h		X
0	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
	organization, have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а			9a		
b	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?				
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
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		1041?	12a		
h	If "Yes" enter the amount of tax-exempt interest received or accrued during the year	126			

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

Enter the number of voting members of the governing body b Enter the number of voting members that are independent 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? 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? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets? Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Bab Each committee with authority to act on behalf of the governing body? Bab Each committee with authority to act on behalf of the governing body?		
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Build the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? Bab Bach committee with authority to act on behalf of the governing body?		X
the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 8b		X
a The governing body? b Each committee with authority to act on behalf of the governing body? 8a 8b		
b Each committee with authority to act on behalf of the governing body? 8b		
	X	
	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached		l
at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X
Section B. Policies (This Section B requests information about policies not required by the Internal		
Revenue Code.)	Т	1
	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
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?		
Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		7.7
form?		X
11a Describe in Schedule O the process, if any, used by the organization to review this Form 990.	37	
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give	\ ₃₂	
rise to conflicts?	X	<u> </u>
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	_V	
describe in Schedule O how this is done 12c	X	
13 Does the organization have a written whistleblower policy? 13	X	
Does the organization have a written document retention and destruction policy? 14 Did the process for determining componential of the following persons include a review and encrypt by	 ^	
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?	- v	
a The organization's CEO, Executive Director, or top management official Description or key employees of the experization.	X	<u> </u>
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	1	
with a toyable entity during the year?		Х
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		
	1	<u> </u>
Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed u None		

Section 6104 requires an organization to make its Forms 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. X Own website X Another's website X Upon request		
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.		
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: u Business Manager 3609 Highway 24		
Newport NC 28570 252-39		105

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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

|X| Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average	B) (C) (D) (E) rage Position (check all that apply) Reportable Reportable								(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Melvin Shepard, J	r.									
President	1.00	X						0	0	0
Dick Bierly Vice Pres.	1.00	X						0	0	0
Olivia Holding										
Treasurer	1.00	Х						0	0	0
Ginger Webster Secretary	1.00	Х						0	0	0
Gerry Barrett	1.00	^ <u> </u>						0	U	0
Board member		Х						0	0	0
Sam Bland Board member		X						0	0	0
Elizabeth Brinker										
Board member		X						0	0	0
Veronica Carter										
Board member		X						0	0	0
Matthew Converse										
Board member		X						0	0	0
Wanda Coston										
Board member		X						0	0	0
Bill Ducker										
Board member		X						0	0	0
Ernie Foster										_
Board member		X						0	0	0
James Gaskill										
Board member		X						0	0	0
Bill Hunneke									0	0
Board member		X						0	0	0
Joe Kilpatrick		٦,							0	0
Board member		X						0	0	0
Jackie Mardan		X							0	^
Board member Mary Hunter Marti	n	<u>^</u>						0	0	<u> </u>
Board member	<u> </u>	X						0	0	0
DAA	l	ΙΛ.		L				U	U	Form 990 (2009)

Part VII Section A. Officers,					nplo		, an	d Highest Compensated		raye U
(A) Name and Title	(B) Average			(C	C)	(F) Estimated				
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Randy Mason Board member		Х						0	0	0
Midge Ogletree Board member		Х						0	0	0
David Paynter Board member		Х						0	0	0
Lewis Piner Board member		Х						0	0	0
Richard Powers Board member		Х						0	0	0
Duane Reynolds Board member		Х						0	0	0
John Runkle Board member		Х						0	0	0
Bland Simpson Board member		Х						0	0	0
Donna Snead Board member		Х						0	0	0
Doug Wakeman Board member		Х						0	0	0
Keith Walker Board member		Х						0	0	0
Joe Ramus Board member		Х						0	0	0
1b Total							u			
2 Total number of individuals (inc	cluding but not li			hose	liste	ed ab	ove)	who received more than S	\$100,000 in	

reportable compensation from the organization **u** 0

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated			
	employee on line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	individual	4		Х
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		Χ

Section B. Independent Contractors

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

(A) Name and business address		(B) Description of services	(C) Compensation
Martin Marietta	PO Box	30013	
_Raleigh NC	27622	Materials/suppl	1,033,041
Steven Towing	401 E.	Church St.	
_ Edenton NC	27932	Delivery	867,766
Mattamuskeet Mge & Consulting	6155 H	wy 94	
_ Fairfield NC	27826	Construction	120,000

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

Pa	rt v	III Staten	nent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
s s	12	Federated can	npaigns	1a				10701100		0.2, 0.0, 0.0.1
ant		Membership d		1b		137,907				
Contributions, gifts, grants and other similar amounts				1c		137,007				
ifts, r a		Fundraising ev								
igi a		Related organi		1d		006 074				
sin			(contributions)	1e	۷,	886,274				
utic er	f	All other contribution								
g ts		and similar amounts	not included above	1f		907,221				
ng	g	Noncash contribution	ns included in lines 1a-	1f:	\$					
၁ ဧ	h	Total. Add line	es 1a–1f			u	4,931,402			
e						Busn. Code				
ven	2a									
æ	b									
Program Service Revenue	С									
Ser	d									
E	e									
gra	f		am service rever							
Pro			es 2a-2f			$\overline{}$				
_	3		come (including o							
	3	other similar a					140,388	140,388		
	4						140,300	140,300		
	4		nvestment of tax-		•					
	5	Royaities	() DI							
	_		(i) Real		(11) F	Personal				
	6a									
	b	Less: rental exps.								
	С	Rental inc. or (loss)								
	_d	Net rental inco	me or (loss)			u				
	/a	Gross amount from sales of assets	(i) Securities	;	(ii)	Other				
		other than inventory								
	b	Less: cost or other								
		basis & sales exps.								
	С	Gain or (loss)								
		` ,	ss)			u				
			om fundraising even							
anue		(not including \$	on ranaraising ston							
Ver		=	eported on line 1c).							
Re			•							
Other Reve	h		18	a b						
₹			(loss) from fund	~ ≀	ovento					
			(loss) from fund	ı	events .	u				
	эа		om gaming activities							
	_		19							
			penses							
			(loss) from game	ing acti	ivities	u				
	10a	Gross sales of	•							
		returns and all	owances	. а						
	b	Less: cost of g	goods sold	. b						
	С	Net income or	(loss) from sales	of inv	entory	u				
		Misce	ellaneous Revenue	:		Busn. Code				
	11a	Book stor	e sales - ne	et			8,236			8,236
	b		onser. easeme		op.		3,226			3,226
	С									•
	d		ue							
			es 11a–11d			u	11,462			
	12		s Coolingtruction			····· <u>"</u> }	5 083 252	140 388	0	11 462

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A)	<u> </u>		• •
	, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	· ·		·	, i	,
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	00 205	00 545	0 000	
	trustees, and key employees	98,385	88,547	9,838	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	887,805	795,593	53,033	39,179
7 8	Other salaries and wages Pension plan contributions (include section 401(k)	867,803	190,093	33,033	39,119
o	and section 403(b) employer contributions)				
9	Other employee benefits	11,289	8,817	1,317	1,155
10	Payroll taxes	77,406	70,122	4,287	2,997
11	Fees for services (non-employees):	, , , 100	, 0, 102	1,237	-,,,,,
а.	Management				
b		437	437		
С	Accounting	14,320		14,320	
d		15,845	15,845		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	16,278		16,278	
g	Other				
12	Advertising and promotion				
13	Office expenses	25,965	15,716	540	9,709
14	Information technology	3,914	3,914		
15	Royalties	11 750	11 750		
16	Occupancy	11,752	11,752	325	1 202
17	Travel	21,434	19,806	345	1,303
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials Conferences, conventions, and meetings	8,860	8,688		172
20		0,000	0,000		172
21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization	55,498	55,498		
23	Insurance	44,188	44,188		
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.)				
а	Land/conser transfer	3,616,239	3,616,239		
b	Materials and supplies	2,632,778	2,631,555		1,223
C	Repairs and maintenance	24,778	24,778	610	722
d	Telephones/internet	20,323 14,480	18,978 14,480	612	733
e f	Design	23,705	19,444	544	3,717
25	All other expenses Total functional expenses. Add lines 1 through 24f	7,625,679	7,464,397	101,094	60,188
26	Joint costs. Check here u if following	1,023,019	,, 101, 371	101,001	00,100
-0	SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				
DAA					Form 990 (2009)

Par	t X	Balance Sheet					
					(A)		(B)
					Beginning of year		End of year
		Cash—non-interest bearing			1 022 026	1	1 170 150
	2	Savings and temporary cash investments			1,032,236	2	1,179,152
	3	Pledges and grants receivable, net			0.50 500	3	
	4	Accounts receivable, net			263,630	4	106,686
	5	Receivables from current and former officers, directors, t	rustees, ke	ey			
		employees, and highest compensated employees. Comp	lete Part II	of			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined	under sect	ion			
		4958(f)(1)) and persons described in section 4958(c)(3)(I	3). Comple	ete			
		Part II of Schedule L			6		
Assets	7	Notes and loans receivable, net		L		7	
SS	8	Inventories for sale or use			7,817	8	6,621
⋖	9	Prepaid expenses and deferred charges				9	
1		Land, buildings, and equipment: cost or]				
		other basis. Complete Part VI of Schedule D	10a	1,306,419			
	b	Less: accumulated depreciation	10b	306,430	1,030,127	10c	999,989
1		The state of the s			432,750	11	1,059,246
		Investments—other securities. See Part IV, line 11			,	12	, ,
		Investments—program-related. See Part IV, line 11				13	_
		later sible seests				14	
		Other accets Can Dort IV line 14			32,704,968	15	29,519,303
		Total assets. Add lines 1 through 15 (must equal line 34			35,471,528	16	32,870,997
-		Accounts payable and accrued expenses			188,311	17	130,207
		_			100/511	18	130/207
		* *				19	
	20	Deferred revenue				20	
	.0	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of	 Schodula			21	
ij 2		Payables to current and former officers, directors, trustee		۲			
<u>≒</u> 1		employees, highest compensated employees, and disquare					
Liabilities		paragra Complete Port II of Cabadula I				22	
						23	
		Secured mortgages and notes payable to unrelated third				24	
	4	Unsecured notes and loans payable to unrelated third pa	rues			25	
		Other liabilities. Complete Part X of Schedule D			188,311		130,207
-	6	Total liabilities. Add lines 17 through 25	· · · · · · · · · · · · · · · · · · ·		100,311	26	130,207
SS		Organizations that follow SFAS 117, check here u	_ and				
֝֞֞֞֞֞֞֞֞֞֞֩֞֞֞֞֞֞֞֞֩֞		complete lines 27 through 29, and lines 33 and 34.			2 200 606		2 256 710
# 2	7	Unrestricted net assets			2,308,606	27	2,356,719
<u>m</u> 2	8	Temporarily restricted net assets			221,377	28	280,944
≦ 2	9	Permanently restricted net assets	· · · · · · · · · · · · · · · · · · ·		32,753,234	29	30,103,127
띠		Organizations that do not follow SFAS 117, check hel	re u 💹				
ō		and complete lines 30 through 34.					
र्ध 3	0	Capital stock or trust principal, or current funds				30	
Assets or Fund Balances		Paid-in or capital surplus, or land, building, or equipment				31	
A 3		Retained earnings, endowment, accumulated income, or				32	
	3	Total net assets or fund balances			35,283,217	33	32,740,790
$z _3$	4	Total liabilities and net assets/fund balances			35,471,528	34	32,870,997

Form **990** (2009)

Pa	irt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
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	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	X	

Form **990** (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NC Coastal Federation, Inc.

Employer identification number 58-1494098

Pa	art I	Reas	on for Public Charity	Status (All organizations	must o	complete	e this	part.) S	See in	struct	ions.		
The	orgar	nization is not	a private foundation because	e it is: (For lines 1 through 11, ch	neck only	one box.)							
1		A church, cor	nvention of churches, or ass	ociation of churches described in	section	170(b)(1)	(A)(i).						
2	П	A school des	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E.)		. ,, ,	. ,.,						
3	П			ce organization described in sec	tion 170(l	o)(1)(A)(iii	i).						
4	П	•	• •	in conjunction with a hospital d	•	,,,,,,,	•	1)(A)(iii)	. Enter	the hos	spital's name		
·	ш			·				- /(/(/			opital o Haillo		
5	\Box	An organization	on operated for the benefit of	of a college or university owned	or operate	d by a go		tal unit	describ	d in			
,	ш				or operate	a by a gc	, verriiriei	itai uiit	acscrib	ou III			
	\Box	•	b)(1)(A)(iv). (Complete Part	•		/L\/4\/ A\/							
7	X		•	overnmental unit described in se			•	the e		مناطنيم			
7	Λ	-	•	substantial part of its support from	m a gover	nmentar t	anii or iii	om me ç	jenerai	public			
_	\Box		section 170(b)(1)(A)(vi). (C	•									
8	Н	-		70(b)(1)(A)(vi). (Complete Part	,				,				
9	An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross												
		•		pt functions—subject to certain e		` '							
			~	d unrelated business taxable inc	,		,	from bu	sinesse	S			
	acquired by the organization after June 30, 1975. See section 509(a)(2) . (Complete Part III.)												
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).												
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the												
	purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section												
		<u>—</u>		he type of supporting organization		•	es 11e t	— ·					
	_	a Type		c Type III–Functiona	, ,		d		e III–Oth	ner			
е	Ш	, ,		anization is not controlled directly				•					
				and other than one or more pub	olicly supp	orted orga	anization	s descril	ped in s	ection			
		. , . ,	section 509(a)(2).				_						
f				mination from the IRS that it is a	Type I, T	ype II, or	Type III	supporti	ng				
		•	check this box										. Ш
g		Since August	17, 2006, has the organizat	ion accepted any gift or contribu	tion from	any of the)						
		following per	sons?										
		.,	•	ontrols, either alone or together v	•		` '					Yes	No
				f the supported organization?							11g(i)		
			member of a person describ								11g(ii	<u> </u>	
		(iii) A 35% c	ontrolled entity of a person of	described in (i) or (ii) above?							11g(ii	i)	
h		Provide the f	ollowing information about the	ne supported organization(s).									
(i)		of supported	(ii) EIN	(iii) Type of organization	1 ' '	organization	. ' '	ou notify		s the		nount of	
	orga	anization		(described on lines 1–9 above or IRC section		sted in your document?	col. (i)	nization in of your	organizati (i) organi		suբ	port	
				(see instructions))				ort?	_	S.?			
					Yes	No	Yes	No	Yes	No			
					1								
					1								
					-								
					1								
			İ	I	i								

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 NC Coastal Federation, Inc. 58-1494098

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Sec	tion A. Public Support													
	lendar year (or fiscal year beginning in) u	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total							
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,923,512	3,592,321	3,471,190	4,672,728	4,931,402	21,591,153							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf													
3	The value of services or facilities furnished by a governmental unit to the organization without charge													
4	Total. Add lines 1 through 3	4,923,512	3,592,321	3,471,190	4,672,728	4,931,402	21,591,153							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)													
6	Public support. Subtract line 5 from line 4						21,591,153							
	tion B. Total Support													
Cal	lendar year (or fiscal year beginning in) u	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total							
7	Amounts from line 4	4,923,512	3,592,321	3,471,190	4,672,728	4,931,402	21,591,153							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	28,462	13,778	12,251	28,491		82,982							
9	Net income from unrelated business activities, whether or not the business is regularly carried on	4,587	2,242	113,854	135,946	2,226	258,855							
10 11	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10					8,236	8,236 21,941,226							
12	Gross receipts from related activities, etc. ((see instructions)				12	140,388							
13	First five years. If the Form 990 is for the	organization's first	second third four	th, or fifth tax year	as a section 501(c)(3)	110,000							
	organization, check this box and stop here	•		•	,	,	▶ □							
Sec	tion C. Computation of Public Su	upport Percent	age											
14	Public support percentage for 2009 (line 6,						98.40 %							
15	Public support percentage from 2008 Sche	edule A. Part II. line	14	<i>\''</i>		15	98.15%							
16a	33 1/3 % support test—2009. If the organ													
	and stop here. The organization qualifies a				•		▶ 🗓							
b	33 1/3 % support test—2008. If the organ			or 16a, and line 15	is 33 1/3 % or mo	ore, check this								
	box and stop here. The organization qualit						▶ □							
17a	10%-facts-and-circumstances test—200													
	more, and if the organization meets the "fa	acts-and-circumstand	ces" test, check thi	s box and stop he	re. Explain in Part	IV how the								
	organization meets the "facts-and-circumst	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization												
b	10%-facts-and-circumstances test—200	8. If the organizatio	n did not check a l	box on line 13, 16a	, 16b, or 17a, and	line 15 is 10% or								
	more, and if the organization meets the "fa	acts-and-circumstand	ces" test, check thi	s box and stop he	re. Explain in Part	IV how the								
	organization meets the "facts-and-circumsta	ances" test. The org	ganization qualifies	as a publicly supp	oorted organization	١	▶ □							
18	Private foundation. If the organization did						▶ _							

Schedule A (Form 990 or 990-EZ) 2009

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

	(Complete only if you che	ecked the box	on line 9 of Pa	art I.)			
	tion A. Public Support				_		
Ca	lendar year (or fiscal year beginning in) ${f u}$	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5						
_	received from disqualified persons				-	+	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support				_		
Ca	lendar year (or fiscal year beginning in) u	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
I0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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						
	organization, check this box and stop here						<u></u> ▶ ∟
	tion C. Computation of Public Su			(0)		11	
15	Public support percentage for 2009 (line 8,						<u>%</u>
16 Soc	Public support percentage from 2008 Sche					16	%
	tion D. Computation of Investme			(n)		47	
17	Investment income percentage for 2009 (li						<u>%</u>
18 100	Investment income percentage from 2008						%
19a	33 1/3 % support tests—2009. If the orga						⊾ □
h	17 is not more than 33 1/3 %, check this be		=				
b	33 1/3 % support tests—2008. If the orgal line 18 is not more than 33 1/3 %, check the						▶ □
20	Private foundation. If the organization did						

Schedule A (F	orm 990 or 990-	EZ) 2009	NC	Coasta	l Fede:	ration,	, Inc.	58-	1494098	Page 4
Part IV	Suppleme	ntal Info	rmatio	n. Comple	ete this pa	art to prov	ide the e	58- explanations required	by Part II, line 10;	
	Part II, line	17a or	17b; aı	nd Part III	, line 12.	Provide a	ny other	additional information	. See instructions.	
• • • • • • • • • • • • • • • • • • • •										
• • • • • • • • • • • • • • • • • • • •										
• • • • • • • • • • • • • • • • • • • •										
• • • • • • • • • • • • • • • • • • • •										

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

u Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

Employer identification number

2009

NC Coastal Fed	eration, Inc.	58-1494098							
Organization type (check one)	:								
Filers of:	Section:								
Form 990 or 990-EZ	\boxed{X} 501(c)(3) (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation								
	527 political organization								
Form 990-PF	501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
, ,	vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule.	See							
General Rule									
	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money contributor. Complete Parts I and II.	/ or							
Special Rules									
sections 509(a)(1) and	organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulation 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Pa	f the greater							
the year, aggregate co	, (8), or (10) organization filing Form 990 or 990-EZ that received from any one contribute ntributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literate the prevention of cruelty to children or animals. Complete Parts I, II, and III.	_							
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year									
990-EZ, or 990-PF), but it must	s not covered by the General Rule and/or the Special Rules does not file Schedule B (Fo t answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990,	m							
For Privacy Act and Paperwork for Form 990, 990-EZ, or 990-PF.		ule B (Form 990, 990-EZ, or 990-PF) (2009)							

NC Coastal Federation, Inc.

Employer identification number 58-1494098

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.1	State of NC Clean Water Mngt Fund 1651 Mail Service Center Raleigh NC 27699-1651	\$ 138,982	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.2	NC Dept. of Environment and Natural 1617 Mail Service Center Raleigh NC 27699-1617	\$ 138,404	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.3	Restore America'a Estuaries 5314 17th Ave NW #A Seattle WA 98107-3815	\$ 103,067	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	Attorney General of North Carolina NC Dept. of Justice 9001 Mail Service Center Raleigh NC 27699-9901	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.5	NOAA Restoration Center F/HC3 1315 East West Highway Silver Spring MD 20910	\$ 2,048,285	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.6	Fred & Alice Stanback 507 W. Innes St. #270 Salisbury NC 28144	\$ 650,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization
NC Coastal Federation

Employer identification number 58-1494098

IVC C	Castai redefation, inc.	50	1171070
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.7	Smith Richardson Foundation Lake Pt. 701 Green Valley Rd. Greensboro NC 27429	\$ 100,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
.8	Mary Flagler Cary Charitable Trust 122 E. 42nd Street New York NY 10168	\$ 200,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
9	Z. Smith Reynolds Foundation 147 South Cherry St. Suite 200 Winston Salem NC 27101-5287	\$270,200	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.10	US Fish and Wildlife Service 1875 Century Blvd. Suite 310 Atlanta GA 30345	\$ 158,253	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
.11.	NC Dept of Transportation 1410 Mail Service Center Raleigh NC 27699-1410	\$ 107,440	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 u Complete if the organization is described below.

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

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

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

Na	me of organization	_		Employer identifi	
Dai	NC Coastal Federation of the Iran Complete if the organization is executed by the Iran Complete if the organization is executed by the Iran Complete if the organization is executed by the Iran Coastal Federation is executed by the Iran Coas		or is a sostia	58-14940	
				on 527 organizatio	on.
1 2	Provide a description of the organization's direct and indirect and indirect averagitures			¢	
3	Political expenditures				
	Volunteer hours			–	
Pai	t I-B Complete if the organization is exe	mpt under section 501(c)	(3).		
1	Enter the amount of any excise tax incurred by the organi	zation under section 4955		u\$_	
2	Enter the amount of any excise tax incurred by organizati	on managers under section 4955		u\$_	
3	If the organization incurred a section 4955 tax, did it file F	orm 4720 for this year?			Yes No
					Yes No
	If "Yes," describe in Part IV.				
Pa	rt I-C Complete if the organization is exe	mpt under section 501(c)	, except sect	ion 501(c)(3).	
1	Enter the amount directly expended by the filing organizate	•			
	activities			u \$_	
2	Enter the amount of the filing organization's funds contrib	•			
_	527 exempt function activities			u\$_	
3	Total exempt function expenditures. Add lines 1 and 2. Er			•	
	line 17b			u\$_	
4	Did the filing organization file Form 1120-POL for this year				Yes No
5	Enter the names, addresses and employer identification names were made. For each organization listed, enter the amour	` ,	ŭ		N.
	contributions received that were promptly and directly deli			•	11
	fund or a political action committee (PAC). If additional sp		•	a separate segregateu	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(0) =	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization. If
					none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2009

Sche	dule C ((Form	990 or	990-EZ) 20	09 NC	Coastal	Federation,	Inc.	58-14940)98		Page 2
	t II-A								d filed Form 5768 (ele	ection		
				section								
	Check Check						to an affiliated groud box A and "limited		sions apply.			
		(The te			obbying Expo	enditures ints paid or incurred.)		(a) Filing organization's totals	,	Affiliated oup totals	
							rass roots lobbying)					
							(direct lobbying)					
d	Other e	exem	pt purpo	se expendit	tures							
е	Total e	exemp	ot purpos	se expenditi	ures (add	lines 1c and 1d)						
f	Lobbyir	ng no	ontaxable	e amount. E	nter the	amount from the	following table in both					
_	column	ns.										
	If the am	nount o	on line 1e,	column (a) or	(b) is:	The lobbying	g nontaxable amount is:					
_	Not ove	r \$500	0,000			20% of the an	nount on line 1e.					
L	Over \$5	00,00	0 but not	over \$1,000,0	000	\$100,000 plus	15% of the excess over \$500),000.				
L	Over \$1	,000,0	000 but n	ot over \$1,50	0,000	\$175,000 plus	10% of the excess over \$1,0	00,000.				
L	Over \$1	,500,0	000 but n	ot over \$17,0	00,000	\$225,000 plus	5% of the excess over \$1,50	0,000.				
	Over \$1	7,000	,000			\$1,000,000.						
g	Grassr	oots i	nontaxal	ole amount	(enter 25	% of line 1f)						
h	Subtrac	ct line	g 1g from	n line 1a. If	zero or le	ss, enter -0						
i	Subtrac	ct line	e 1f from	line 1c. If z	zero or le:	ss, enter -0						
							ine 1i, did the organization		porting			_
	section	4911	1 tax for	this year?				<u></u>			Yes	No
		,,		· · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		raging Period Unde		(h)			

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 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period											
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total						
2a Lobbying non-taxable amount											
b Lobbying ceiling amount (150% of line 2a, column(e))											
c Total lobbying expenditures											
d Grassroots nontaxable amount											
e Grassroots ceiling amount (150% of line 2d, column (e))											
f Grassroots lobbying expenditures											

Schedule C (Form 990 or 990-EZ) 2009

1 1

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

		(a	a)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local			
	legislation, including any attempt to influence public opinion on a legislative matter or			
	referendum, through the use of:			
а	Volunteers?	X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
С	Media advertisements?		X	
d	Mailings to members, legislators, or the public?		Х	
е	Publications, or published or broadcast statements?	X		350
	Grants to other organizations for lobbying purposes?		Х	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		X	
i	Other activities? If "Yes," describe in Part IV	X		34,787
	Total. Add lines 1c through 1i			35,137
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	
	If "Yes," enter the amount of any tax incurred under section 4912			
С	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?			
2 aı	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	;)(5),	or se	ection

501(c)(6).

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

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

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	
С	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
	and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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. Also, complete this part for any additional information.

Schedule	С,	Part	II-B,	Line	1i	

Direct contact with legislators, and coordination of members of the public to meet with legislators to encourage legislation related to conservation, primarily as it relates to eastern North Carolina. There are no contributions to or endorsements of individual candidates.

Schedule C (F	orm 990 or 990-EZ) 2009	NC	Coastal	Federation,	Inc.	58-1494098	Page 4
Part IV	orm 990 or 990-EZ) 2009 Supplemental In	nforma	tion (continu	ed)			

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

u Attach to Form 990. u See separate instructions.

OMB No. 1545-0047
2009
Open to Public Inspection

Name of the organization Employer identification number NC Coastal Federation, Inc. 58-1494098 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 Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 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). X Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area X Protection of natural habitat Preservation of certified historic structure X Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 12 Total number of conservation easements 2a Total acreage restricted by conservation easements 6,598.00 2b Number of conservation easements on a certified historic structure included in (a) d 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 ${f u}$ _ _ _ _ _ Number of states where property subject to conservation easement is located ${f u}$ _ _ _ _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **u**\$_ _ _ <u>4</u>,<u>9</u>65 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a 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: (i) Revenues included in Form 990, Part VIII, line 1 _____ u \$___ _ _ (ii) Assets included in Form 990, Part X 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: a Revenues included in Form 990, Part VIII, line 1 u \$_ _ _ _ Assets included in Form 990, Part X _____ u \$__ _ _ _

Pa	rt III Organizations Maintaining	Collections of Art, F	listorical Treas	ures, c	or Other S	Similar A	ssets (co	วทtinu	ied)				
3	Using the organization's acquisition, accession, collection items (check all that apply):	and other records, check	any of the following	that are	a significant	use of its							
а	Public exhibition	d Loan o	r exchange program	S									
b													
С	Preservation for future generations												
4	Provide a description of the organization's collection Part XIV.	ections and explain how th	ey further the organi	ization's	exempt purpo	ose in							
5 ——	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?												
Pa				ation a	nswered "	Yes" to F	orm 990	, Par	t				
	IV, line 9, or reported an am												
1a	Is the organization an agent, trustee, custodian	•					г	–					
	included on Form 990, Part X?						L	Yes	· 📙	No			
b	If "Yes," explain the arrangement in Part XIV ar	nd complete the following t	able:										
							A	mount					
С	Beginning balance												
d	Additions during the year												
е	Distributions during the year												
f	Ending balance					1f		_					
	Did the organization include an amount on Form	m 990, Part X, line 21?					L	Yes	; 📙	No			
	If "Yes," explain the arrangement in Part XIV.		1 (0 / 11 /		200 5	. 13 / 12	40						
Pa	rt V Endowment Funds. Comple	T T											
		(a) Current year	(b) Prior year	(c) Two	years back	(d) Three yea	ars back (e	e) Four	years b	ack			
1a	Beginning of year balance	48,266	59,367										
b	Contributions	495,416											
С	Net investment earnings, gains,												
	and losses	42,155	-11,101										
d	Grants or scholarships												
е	Other expenditures for facilities												
	and programs												
f	Administrative expenses	2,013											
g	End of year balance	583,824	48,266										
2	Provide the estimated percentage of the year e												
а	Board designated or quasi-endowment $ {f u} $ _	%											
b	Permanent endowment \mathbf{u} %												
	Term endowment \mathbf{u} %												
3a	Are there endowment funds not in the possess	ion of the organization that	t are held and admir	nistered f	for the			_					
	organization by:						r		Yes	No			
	(i) unrelated organizations							3a(i)		Χ			
	(ii) related organizations							3a(ii)		Χ			
b	If "Yes" to 3a(ii), are the related organizations I	isted as required on Sched	lula DO					3b					
4	Describe in Part XIV the intended uses of the	organization's endowment	funds.										
Pa	rt VI Investments—Land, Buildin	gs, and Equipment	. See Form 990), Part	X, line 10								
	Description of investment	(a) Cost or other basis	(b) Cost or other	er	(c) Accu	mulated	(d)	Book \	/alue				
		(investment)	basis (other)		depred	ciation							
1a	Land			,702					0,7				
	Buildings		536	,931	1	19,703	3	41	7,2	28			
	Leasehold improvements												
	Equipment		318	,786	1	.86,72	7	13	2,0	59			
	Other												
Total	Add lines 1a through 1e. (Column (d) must equ	ial Form 990 Part X colui	mn (B) line 10(c)			1	1	90	9 9	29			

Schedule D (Form 990) 2009

Part VII	Investments—Other Securities. See Form 9	990, Part X, line 12.		1 135 5
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-yea	r market value
Financial deriv				
	quity interests			
Other		-		
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		-		
		_		
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)	u		
Part VIII	Investments—Program Related. See Form 9	990, Part X, line 13.		
	(a) Description of investment type	(b) Book value	(c) Method of	
			Cost or end-of-yea	r market value
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.)	u		
Part IX	Other Assets. See Form 990, Part X, line 15			
	(a) Description			(b) Book value
	Conservation easements	/land		29,519,303
-				
Total (Colum	n (b) must equal Form 990, Part X, col. (B) line 15.)		u	29,519,303
Part X	Other Liabilities. See Form 990, Part X, line	25.	u	27/317/303
1.	(a) Description of liability	(b) Amount		
Federal incom	e taxes			
T-1-1 (0.1	(I) and an al-Free 200 Part V (I) (I) (II)			
iotai. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.)	u		

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

_either_by_purchase,_with_funds_provided_by_grants,_or_by_gift._________

_Part_XI, Line_8_-_Reconcilation_of_Changes - Other _ _ _ _ \$ _ _ 55,498 _ _

Schedule D (Form 990) 2009

Schedule D	(Fo	rm 990)	2009	NO	C (Coa	sta	1 F	'ede	rat	ion	,]	Inc.				5	3-14	1940	98					Page 5
Part XI	V	Supp	lemen	ıtal	Info	rma	tion	(con	tinue	d)															
				_	_					_		_		_										_	
_P <u>art</u>	<u>X</u>]	<u>I</u> I,	<u>Lin</u>	e_4	4 <u>b</u>	<u>-</u> -	Exp	e <u>n</u> s	<u>e A</u>	m <u>o</u> ı	ı <u>n</u> t <u>s</u>	<u>I</u> r	n <u>c</u> lu	<u>.de</u> c	l_o <u>r</u>	<u>n</u> <u>R</u> e	e <u>t</u> u:	<u>r</u> n	0	<u>t</u> h <u>e</u>	er_			_	
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

u Attach to Form 990.

OMB No. 1545-0047
2009
Open to Public Inspection

Name of the organization

NC Coastal Federation, Inc.

Employer identification number 58-1494098

Form 990, Part I, Line 6
Primarily volunteer labor to help with restoration plantings and similar
projects.
Form 990, Part VI, Line 11A - Organization's Process to Review Form 990
Form 990 is prepared by an independent contractor CPA. The form is reviewed
by the organization's Executive Director, Business Manager, and Director of
Development before completion and filing.
Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Employee's must review the confict of interest policies annually, and are
advised to discuss potential problems with their supervisor or the
Executive Director. Board of Directors members are reminded periodically
regarding the policies, and excuse themselves when appropriate.
Form 990, Part VI, Line 15a - Compensation Process for Top Official
Annual review by key members of the board of directors including analysis
of comparable positions before making a recommendation to the full Board of
Directors for their approval.
Form 990, Part VI, Line 15b - Compensation Process for Officers
Annual review by key board members with recommendation to the full board
regarding compensation.
Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Name of the organization NC Coastal Federation, Inc.	Employer identification number 58-1494098
An annual report summary (derived from audited financial	
posted on the organization's web site, mailed to donors, a	and is available
to the public upon request.	
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Federal Statements

Form 990, Part IX, Line 24f - All Other Expenses

Description	E	Total expenses	Program Service	igement & eneral	Fund Raising		
Dues	\$	8,300	\$ 8,300	\$ 	\$		
Utilities		7,832	6,857	544		431	
Bank and card fees		3,286				3,286	
Training		3,237	3,237				
Boat operations		1,050	 1,050	 			
Total	\$	23,705	\$ 19,444	\$ 544	\$	3,717	