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Return of Organization Exempt from Income Tax

2002

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2002 calendar year, or tax year beginning 2002, and ending

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

Please use IRS label or print or type See specific instructions S C COASTAL CONSERVATION LEAGUE POST OFFICE BOX 1765 CHARLESTON, SC 29402

D Employer Identification Number 57-0887278 E Telephone number 843-723-8035 F Accounting method Cash [X] Accrual [ ] Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

- H and I are not applicable to section 527 organizations H (a) Is this a group return for affiliates? Yes [ ] No [X] H (b) If Yes, enter number of affiliates H (c) Are all affiliates included? Yes [ ] No [ ] H (d) Is this a separate return filed by an organization covered by a group ruling? Yes [ ] No [X] I Enter 4-digit GEN M Check if the organization is not required to attach Schedule B (Form 990, 990 EZ, or 990 PF)

G Web site: N/A

J Organization type (check only one) [X] 501(c) 3 (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 1,967,342.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, Total. Includes rows for Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Other investment income, Special events, and Total revenue/expenses.

SCANNED AUG 27 2003

RECEIVED AUG 18 2003 GOLDEN, UT

20

**Part II Statement of Functional Expenses** All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (att sch) (cash \$ _____ non-cash \$ _____)	22			
23 Specific assistance to individuals (att sch)	23			
24 Benefits paid to or for members (att sch)	24			
25 Compensation of officers, directors, etc	25 73,100	58,480	7,310	7,310
26 Other salaries and wages	26 732,372	520,756	126,810	84,806
27 Pension plan contributions	27 40,135	26,423	8,731	4,981
28 Other employee benefits	28			
29 Payroll taxes	29 61,934	42,053	11,953	7,928
30 Professional fundraising fees	30			
31 Accounting fees	31 36,050.	24,478	6,958.	4,614
32 Legal fees	32 51,818.	43,793.	4,825.	3,200
33 Supplies	33			
34 Telephone	34 40,502.	27,420.	8,184.	4,898
35 Postage and shipping	35 18,235.	9,242.	2,054.	6,939
36 Occupancy	36 76,573	55,876	10,164	10,533
37 Equipment rental and maintenance	37 13,598	7,575.	4,595	1,428
38 Printing and publications	38 22,790	12,150	291	10,349
39 Travel	39			
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42 20,341	13,812	3,926	2,603.
43 Other expenses not covered above (itemize)				
a See Statement 5	43a 352,362	263,481	32,959	55,922
b -----	43b			
c -----	43c			
d -----	43d			
e -----	43e			
44 Total functional expenses (add lines 22-43) Organizations completing columns (B) (D), carry these totals to lines 13-15	44 1,539,810	1,105,539	228,760	205,511

Joint Costs Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to program services \$ \_\_\_\_\_, (iii) the amount allocated to management and general \$ \_\_\_\_\_, and (iv) the amount allocated to fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose? <b>See Statement 6</b>	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a See Statement 7 ----- ----- ----- (Grants and allocations \$ _____)	1,105,539
b ----- ----- ----- (Grants and allocations \$ _____)	
c ----- ----- ----- (Grants and allocations \$ _____)	
d ----- ----- ----- (Grants and allocations \$ _____)	
e Other program services (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), program services)	1,105,539.

**Part IV Balance Sheets** (See Instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year	
ASSETS	45 Cash – non-interest bearing	114,916	45	86,836.	
	46 Savings and temporary cash investments	622,892	46	916,460.	
	47 a Accounts receivable	47 a 1,312.			
	b Less allowance for doubtful accounts	47 b	47 c	1,312.	
	48 a Pledges receivable	48 a 1,252,649.			
	b Less allowance for doubtful accounts	48 b 62,633.	1,516,890.	48 c	1,190,016.
	49 Grants receivable			49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51 a Other notes & loans receivable (attach sch)	51 a			
	b Less allowance for doubtful accounts	51 b		51 c	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges			53	
	54 Investments – securities (attach schedule)	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	1,457,081	54	1,329,542
	55 a Investments – land, buildings, & equipment basis	55 a			
	b Less accumulated depreciation (attach schedule)	55 b		55 c	
	56 Investments – other (attach schedule)			56	
	57 a Land, buildings, and equipment basis	57 a 132,146.			
	b Less accumulated depreciation (attach schedule) <b>Statement 8</b>	57 b 94,703	45,771.	57 c	37,443
	58 Other assets (describe ▶ _____)			58	
59 <b>Total assets</b> (add lines 45 through 58) (must equal line 74)		3,757,550.	59	3,561,609	
LIABILITIES	60 Accounts payable and accrued expenses	862	60	36,492.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64 a Tax-exempt bond liabilities (attach schedule)		64 a		
	b Mortgages and other notes payable (attach schedule)		64 b		
	65 Other liabilities (describe ▶ _____)		65		
	66 <b>Total liabilities</b> (add lines 60 through 65)		862	66	36,492
FUNDS	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	2,299,998.	67	2,410,907.	
	68 Temporarily restricted	1,456,690.	68	1,114,210.	
	69 Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
73 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		3,756,688.	73	3,525,117	
74 <b>Total liabilities and net assets/fund balances</b> (add lines 66 and 73)		3,757,550	74	3,561,609	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

BAA

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions)			Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return		
a Total revenue, gains, and other support per audited financial statements	▶	a 1,560,348	a Total expenses and losses per audited financial statements	▶	a 1,539,810
b Amounts included on line a but not on line 12, Form 990			b Amounts included on line a but not on line 17, Form 990		
(1) Net unrealized gains on investments \$			(1) Donated services and use of facilities \$		
(2) Donated services and use of facilities \$			(2) Prior year adjustments reported on line 20, Form 990 \$		
(3) Recoveries of prior year grants \$			(3) Losses reported on line 20, Form 990 \$		
(4) Other (specify) _____ \$			(4) Other (specify) _____ \$		
Add amounts on lines (1) through (4) ▶			Add amounts on lines (1) through (4) ▶		
c Line a minus line b ▶		c 1,560,348.	c Line a minus line b ▶		c 1,539,810
d Amounts included on line 12, Form 990 but not on line a			d Amounts included on line 17, Form 990 but not on line a		
(1) Investment expenses not included on line 6b, Form 990 \$			(1) Investment expenses not included on line 6b, Form 990 \$		
(2) Other (specify) _____ \$			(2) Other (specify) _____ \$		
Add amounts on lines (1) and (2) ▶			Add amounts on lines (1) and (2) ▶		
e Total revenue per line 12, Form 990 (line c plus line d) ▶		e 1,560,348.	e Total expenses per line 17, Form 990 (line c plus line d) ▶		e 1,539,810.

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated, see instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
EDWARD DANA BEACH 485 EAST BAY STREET CHARLESTON, SC 29403	Executive Direc 40	73,100.	0.	0
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				
-----				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ▶  Yes  No  
 If 'Yes,' attach schedule — see instructions

**Part VI Other Information** (See instructions)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	77	X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79	X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80a	X
b If 'Yes,' enter the name of the organization <u>N/A</u> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a Enter direct or indirect political expenditures See line 81 instructions	81a	0
b Did the organization file Form 1120-POL for this year?	81b	X
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If 'Yes,' you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	N/A
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in house lobbying expenditures of \$2,000 or less?	85b	N/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c Dues, assessments, and similar amounts from members	85c	N/A
d Section 162(e) lobbying and political expenditures	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) organizations Enter a Gross income from members or shareholders	87a	N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88	X
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u> .		
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89b	X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d Enter Amount of tax on line 89c, above, reimbursed by the organization		0.
90a List the states with which a copy of this return is filed <u>None</u>		
b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	0
91 The books are in care of <u>THE COMPANY</u> Telephone number <u>843-723-8035</u> Located at <u>328 EAST BAY ST, CHARLESTON, SC</u> ZIP + 4 <u>29403</u>		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <u>92</u>	92	N/A

**Part VII Analysis of Income-Producing Activities** (See instructions)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts			3	45,909	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-18,734.	
101 Net income or (loss) from special events			1	43,262.	
102 Gross profit or (loss) from sales of inventory			1	271.	
103 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				70,708	
105 Total (add line 104, columns (B), (D), and (E))					70,708

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
N/A	

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See instructions)

- a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
  - b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No
- Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions)

**Please Sign Here**

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

Signature of officer: Dana Beach Date: 8/14/03

Type or print name and title: \_\_\_\_\_

**Paid Preparer's Use Only**

Preparer's signature: John F. Hyland, CPA Date: 8/14/03 Check if self-employed:  Preparer's SSN or PTIN (see General Instruction W): \_\_\_\_\_

Firm's name (or yours if self-employed): Hyland, Kuddy and Garbett EIN: \_\_\_\_\_

Address, and ZIP + 4: 820 Johnnie Dodds Blvd Suite B Mt. Pleasant, SC 29464-3103 Phone no: (843) 884-6184

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

**Organization Exempt Under  
Section 501(c)(3)**

OMB No 1545 0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**2002**

Supplementary Information — (See separate instructions)

Department of the Treasury  
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

S C. COASTAL CONSERVATION LEAGUE

Employer identification number

57-0887278

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See instructions List each one If there are none, enter 'None')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
Cathy Forrester	Fundraising Mgr			
	40	63,100.	0	0
JANE LAREAU				
	40	63,100.	2,070	0
GERRIT JOBSIS				
	40	53,100	0	0
NANCY VINSON				
	40	55,912.	11,000	0.
MICHELLE SINKLER				
	40	55,100.	600.	0.
Total number of other employees paid over \$50,000	0			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See instructions List each one (whether individuals or firms) If there are none, enter 'None')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		0.
Total number of others receiving over \$50,000 for professional services	0	



**Part III Statements About Activities** (See instructions )

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities <b>▶ \$ 27,136.</b> (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B ) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes,' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		
<b>1</b>	<b>X</b>	
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions )		
a Sale, exchange, or leasing of property?		<b>X</b>
b Lending of money or other extension of credit?		<b>X</b>
c Furnishing of goods, services, or facilities?		<b>X</b>
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		<b>X</b>
e Transfer of any part of its income or assets?		<b>X</b>
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below )		<b>X</b>
4 Do you have a section 403(b) annuity plan for your employees?		<b>X</b>
<b>Note</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs 'qualify' to receive payments		

**Part IV Reason for Non-Private Foundation Status** (See instructions )

The organization is not a private foundation because it is (Please check only **ONE** applicable box )

- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V )
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A )
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 12  An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc. functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A )
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3) )

Provide the following information about the supported organizations (See instructions )

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See instructions )

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

**Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	1,046,364	3,989,603.	1,306,075	804,730.	7,146,772.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	76,732.	66,133	35,693.	13,367	191,925.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets See Stmt 9	-68,042	11,243.	77,047	8,425	28,673.
23 Total of lines 15 through 22	1,055,054	4,066,979.	1,418,815	826,522.	7,367,370.
24 Line 23 minus line 17	1,055,054.	4,066,979	1,418,815.	826,522	7,367,370.
25 Enter 1% of line 23	10,551	40,670.	14,188.	8,265.	

26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24	▶ 26a	147,347
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts		▶ 26b	
c Total support for section 509(a)(1) test Enter line 24, column (e)		▶ 26c	7,367,370.
d Add Amounts from column (e) for lines	18 <u>191,925.</u> 19 _____ 22 <u>28,673.</u> 26b _____	▶ 26d	220,598.
e Public support (line 26c minus line 26d total)		▶ 26e	7,146,772
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		▶ 26f	97.01 %

27 Organizations described on line 12	N/A		
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person' Do not file this list with your return Enter the sum of such amounts for each year	(2001) _____ (2000) _____ (1999) _____ (1998) _____		
b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year	(2001) _____ (2000) _____ (1999) _____ (1998) _____		
c Add Amounts from column (e) for lines	15 _____ 16 _____ 17 _____ 20 _____ 21 _____	▶ 27c	
d Add Line 27a total and line 27b total		▶ 27d	
e Public support (line 27c total minus line 27d total)		▶ 27e	
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)	▶ 27f		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))		▶ 27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))		▶ 27h	%

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15

**Part V Private School Questionnaire** (See instructions )  
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	
		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement ) ----- ----- -----		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement ) ----- -----		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?  If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement ) ----- ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If 'No,' attach an explanation		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See instructions )  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check  **a** if the organization belongs to an affiliated group Check  **b** if you checked 'a' and 'limited control' provisions apply

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term 'expenditures' means amounts paid or incurred )			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)		
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		27,136.
38	Total lobbying expenditures (add lines 36 and 37)	0	27,136
39	Other exempt purpose expenditures		1,512,674
40	Total exempt purpose expenditures (add lines 38 and 39)	0	1,539,810.
41	Lobbying nontaxable amount Enter the amount from the following table --		
	<b>If the amount on line 40 is --</b>		
	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		
	Over \$17,000,000		
	<b>The lobbying nontaxable amount is --</b>		
	20% of the amount on line 40		
	\$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		
	\$1,000,000		
41			226,991.
42	Grassroots nontaxable amount (enter 25% of line 41)		56,748
43	Subtract line 42 from line 36 Enter 0 if line 42 is more than line 36	0.	0.
44	Subtract line 41 from line 38 Enter -0 if line 41 is more than line 38	0.	0
<b>Caution</b> If there is an amount on either line 43 or line 44, you must file Form 4720			

**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 45 through 50 )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4 -Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45	226,991.	15,195.	211,660.	566.	454,412.
46					681,618.
47	27,136.	15,195.	74,755.	2,831.	119,917.
48	56,748.	850	52,915.	142.	110,655.
49					165,983
50			54,975.		54,975.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**  
 (For reporting only by organizations that did not complete Part VI-A) (See instructions )

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h )			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h )			

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities



## S. C. COASTAL CONSERVATION LEAGUE

57-0887278

**Statement 1**  
**Form 990, Part I, Line 8**  
**Net Gain (Loss) from Noninventory Sales**

Publicly Traded Securities

Gross Sales Price: 357,645  
 Cost or Other Basis: 376,379.

Total Gain (Loss) Publicly Traded Securities \$ -18,734.

Total Net Gain (Loss) From Noninventory Sales \$ -18,734.

**Statement 2**  
**Form 990, Part I, Line 9**  
**Net Income (Loss) from Special Events**

<u>Special Events</u>	<u>Gross Receipts</u>	<u>Less Contributions</u>	<u>Gross Revenue</u>	<u>Less Direct Expenses</u>	<u>Net Income (Loss)</u>
OUTINGS/SPECIAL EVENTS	73,877	0	73,877	30,615.	43,262.
Total	\$ <u>73,877.</u>	\$ <u>0.</u>	\$ <u>73,877.</u>	\$ <u>30,615.</u>	\$ <u>43,262.</u>

**Statement 3**  
**Form 990, Part I, Line 10**  
**Gross Profit (Loss) From Sales Of Inventory**

	\$ 271
Gross Sales	\$ <u>271</u>
Less Returns & Allowances	<u>0.</u>
Net Sales	\$ <u>271.</u>
Less Cost Of Goods Sold	<u>0</u>
Gross Profit From Sales Of Inventory	\$ <u>271</u>

**Statement 4**  
**Form 990, Part I, Line 20**  
**Other Changes in Net Assets or Fund Balances**

UNREALIZED LOSS ON INVESTMENTS	\$ -252,109
Total	\$ <u>-252,109</u>

## S. C. COASTAL CONSERVATION LEAGUE

57-0887278

Statement 5  
Form 990, Part II, Line 43  
Other Expenses

	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
ADMINISTRATIVE SUPPORT	3,991.	2,710.	770	511.
ADVERTISING	22,894	22,602.	267.	25.
BANK CHARGES	1,957.	1,333.	378.	246.
CONTRACT LABOR	939.	868.	16.	55
CONTRACT PROJECTS/EVENTS	167,427.	139,635	10,154.	17,638.
DUES, SUBSCRIPTS, PUB	13,984.	10,576.	1,705.	1,703
INSURANCE	68,208.	43,045	12,236	12,927.
MISCELLANEOUS	10,798.	4,675.	1,227	4,896.
OFFICE SUPPLIES	21,632.	14,411.	3,791.	3,430
PENALTIES & FINES	109.	5.	103.	1.
PHOTOGRAPHY	1,880.	1,666.	92.	122.
TRAVEL	38,543.	21,955.	2,220	14,368
Total	\$ 352,362.	\$ 263,481	\$ 32,959	\$ 55,922

Statement 6  
Form 990, Part III  
Organization's Primary Exempt Purpose

TO PROTECT THREATENED RESOURCES BY WORKING ON SOLUTIONS TO ENVIRONMENTAL CHALLENGES

Statement 7  
Form 990, Part III, Line a  
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
WATER QUALITY & RIVER PROTECTION. Program is to improve the regulatory process designed to protect water quality, and to involve the public in decision-making regarding protection of local water resources. Achievements include opposing marinas proposed for Outstanding Resources Waters, preventing expansion of a landfill into wetlands, and challenging a highway through the ACE Basin.		389,993.
LAND USE PLANNING. The program is to analyze community growth patterns, identify problems and recommend changes to promote environmentally sensitive and economically responsible growth policies that can be used in any community. Achievements include publications of Development Bulletin and fostering community involvement in improving development and transportation policies.		434,530.
FORESTRY/WILDLIFE. The program is to promote restoration of native forest ecosystems on public and private lands where feasible, to restore and maintain native bio diversity in coastal plain, and to promote forest practices that are both economically productive and environmentally healthy.		

## S. C. COASTAL CONSERVATION LEAGUE

57-0887278

Statement 7 (continued)  
Form 990, Part III, Line a  
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
Achievements include changing the direction of the US Forest Service in managing the Frances Marion National Forest and educating the public and land managers on alternative forestry practices. The Wildlife program is to protect native wildlife and restore habitat, where possible, to promote viable populations. Achievements include protecting sea turtles from dredges and promoting native habitats in the region.		45,515
PUBLIC EDUCATION: The program is to educate the public on local environmental issues and offer solutions and positive channels for action to foster economically and environmentally healthy communities. Achievements include national award for our Environmental School of the Year contest, scores of educational presentations to schools, civic clubs, community organizations, etc., and participation on local, state and national boards and committees dealing with environmental issues		235,501
	<u>\$ 0.</u>	<u>\$ 1,105,539.</u>

Statement 8  
Form 990, Part IV, Line 57  
Land, Buildings, and Equipment

Category	Basis	Accum. Deprec.	Book Value
Furniture and Fixtures	\$ 27,050.	\$ 16,224.	\$ 10,826
Machinery and Equipment	94,154.	67,609.	26,545
Miscellaneous	10,942.	10,870	72
Total	<u>\$ 132,146</u>	<u>\$ 94,703.</u>	<u>\$ 37,443.</u>

Statement 9  
Schedule A, Part IV-A, Line 22  
Other Income

Description	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
OTHER INCOME	\$ -68,042	\$ 11,243.	\$ 77,047	\$ 8,425	\$ 28,673.
Total	<u>\$ -68,042</u>	<u>\$ 11,243</u>	<u>\$ 77,047.</u>	<u>\$ 8,425.</u>	<u>\$ 28,673.</u>



# Application for Extension of Time to File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box.
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

**Note** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Part I** **Automatic 3-Month Extension of Time** — Only submit original (no copies needed)

**Note** Form 990-T corporations requesting an automatic 6-month extension — check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization <b>S C COASTAL CONSERVATION LEAGUE</b>	Employer identification number <b>57-0887278</b>
	Number, street, and room or suite number. If a P.O. box, see instructions. <b>POST OFFICE BOX 1765</b>	
	City, town, or post office. For a foreign address, see instructions. <b>CHARLESTON, SC 29402</b>	state ZIP code

Check type of return to be filed (file a separate application for each return)

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990 T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990 BL	<input type="checkbox"/> Form 990 T (Section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input checked="" type="checkbox"/> Form 990 EZ	<input type="checkbox"/> Form 990 T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990 PF	<input type="checkbox"/> Form 1041 A	<input type="checkbox"/> Form 8870

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the **whole group**, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3 month (6 month, for **990-T corporation**) extension of time until 8/15, 20 03, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶  calendar year 20 02 or

▶  tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_

2 If this tax year is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

3a If this application is for Form 990 BL, 990 PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ \_\_\_\_\_ 0

b If this application is for Form 990-PF or 990 T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ \_\_\_\_\_ 0

c **Balance Due** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ \_\_\_\_\_ 0

### Signature and Verification

Under penalties of perjury I declare that I have examined this return including accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ [Handwritten Signature] Title ▶ ACCOUNTANT Date ▶ 5-12-03