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Return of Organization Exempt From Income Tax

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

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

A For the 2005 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization SOUTH CAROLINA COASTAL CONSERVATION LEAG	D Employer identification number 57-0887278
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 328 EAST BAY STREET	E Telephone number 723-8035
		City or town, state or country, and ZIP + 4 CHARLESTON, SC 29401	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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
H(b) If "Yes," enter number of affiliates ▶ **N/A**
H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶ **N/A**

G Website: ▶ **WWW.SCCCL.ORG**

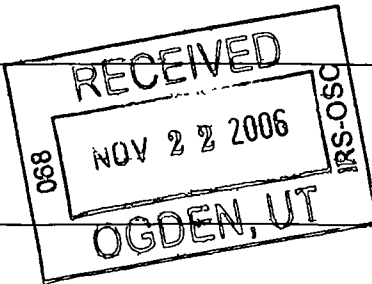
J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

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 chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1,916,577.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

		(A) Securities		(B) Other			
Revenue	1 Contributions, gifts, grants, and similar amounts received:						
	a Direct public support	1a	1,522,245.				
	b Indirect public support	1b					
	c Government contributions (grants)	1c					
	d Total (add lines 1a through 1c) (cash \$ 1,478,625. noncash \$ 43,620.)				1d	1,522,245.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)				2	3,485.	
	3 Membership dues and assessments				3	167,336.	
	4 Interest on savings and temporary cash investments				4		
	5 Dividends and interest from securities				5	59,547.	
	6 a Gross rents	6a					
	b Less: rental expenses	6b					
	c Net rental income or (loss) (subtract line 6b from line 6a)				6c		
7 Other investment income (describe ▶)				7			
8 a Gross amount from sales of assets other than inventory							
	b Less: cost or other basis and sales expenses	8a					
	c Gain or (loss) (attach schedule)	8b					
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			8d		
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>							
a Gross revenue (not including \$ 0. of contributions reported on line 1a)							
b Less: direct expenses other than fundraising expenses	9a	124,050.					
c Net income or (loss) from special events (subtract line 9b from line 9a)	9b	90.		9c	123,960.		
10 a Gross sales of inventory, less returns and allowances	10a	166.					
b Less: cost of goods sold STATEMENT 3	10b	-15.					
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) STMT 2				10c	181.		
11 Other revenue (from Part VII, line 103)				11	39,748.		
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)				12	1,916,502.		
Expenses	13 Program services (from line 44, column (B))			13	795,528.		
	14 Management and general (from line 44, column (C))			14	397,764.		
	15 Fundraising (from line 44, column (D))			15	397,839.		
	16 Payments to affiliates (attach schedule)			16			
	17 Total expenses (add lines 16 and 44, column (A))				17	1,591,131.	
18 Excess or (deficit) for the year (subtract line 17 from line 12)				18	325,371.		
19 Net assets or fund balances at beginning of year (from line 73, column (A))				19	4,187,107.		
20 Other changes in net assets or fund balances (attach explanation)				20	-109,662.		
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)				21	4,402,816.		



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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.

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/> 22				
23 Specific assistance to individuals (attach schedule) 23				
24 Benefits paid to or for members (attach schedule) 24				
25 Compensation of officers, directors, etc. * * 25	103,100.	51,550.	25,775.	25,775.
26 Other salaries and wages 26	746,532.	373,266.	186,633.	186,633.
27 Pension plan contributions 27	44,916.	22,458.	11,229.	11,229.
28 Other employee benefits 28	79,896.	39,948.	19,974.	19,974.
29 Payroll taxes 29	67,192.	33,596.	16,798.	16,798.
30 Professional fundraising fees 30				
31 Accounting fees 31	31,479.	15,740.	7,870.	7,869.
32 Legal fees 32	63,607.	31,803.	15,902.	15,902.
33 Supplies 33	12,483.	6,242.	3,120.	3,121.
34 Telephone 34	42,306.	21,153.	10,576.	10,577.
35 Postage and shipping 35	70,779.	35,390.	17,694.	17,695.
36 Occupancy 36	79,826.	39,913.	19,957.	19,956.
37 Equipment rental and maintenance 37	6,161.	3,081.	1,540.	1,540.
38 Printing and publications 38				
39 Travel 39	36,530.	18,265.	9,133.	9,132.
40 Conferences, conventions, and meetings 40				
41 Interest 41				
42 Depreciation, depletion, etc (attach schedule) 42	15,107.	7,554.	3,777.	3,776.
43 Other expenses not covered above (itemize)				
a _____ 43a				
b _____ 43b				
c _____ 43c				
d _____ 43d				
e _____ 43e				
f _____ 43f				
g SEE STATEMENT 5 43g	191,217.	95,569.	47,786.	47,862.
44 Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15) 44	1,591,131.	795,528.	397,764.	397,839.

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 \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

**** SEE STATEMENT 6**

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

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.

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 8</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a 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	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	214,873.
b LAND US 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	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	366,020.
c SEE STATEMENT 7	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	45,345.
d 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.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	169,290.
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	795,528.

Part IV Balance Sheets (See the 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	351,114.	239,321.
	46 Savings and temporary cash investments	1,032,457.	1,010.
	47 a Accounts receivable	47a 1,451.	
	b Less: allowance for doubtful accounts	47b	47c 1,451.
	48 a Pledges receivable	48a 1,097.	
	b Less allowance for doubtful accounts	48b	48c 1,097.
	49 Grants receivable		49
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a 4,384.	
	b Less allowance for doubtful accounts	51b	51c 4,384.
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges		53
	54 Investments - securities STMT 9 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	2,403,593.	54 1,124,726.
	55 a Investments - land, buildings, and equipment basis	55a	
	b Less accumulated depreciation	55b	55c
56 Investments - other		56	
57 a Land, buildings, and equipment - basis	57a 215,205.		
b Less accumulated depreciation	57b 171,711.	57c 43,494.	
58 Other assets (describe SEE STATEMENT 10)	44,407.	58 2,993,047.	
59 Total assets (must equal line 74). Add lines 45 through 58	4,211,383.	59 4,408,530.	
Liabilities	60 Accounts payable and accrued expenses	24,276.	60 5,714.
	61 Grants payable		61
	62 Deferred revenue		62
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b
	65 Other liabilities (describe)		65
66 Total liabilities. Add lines 60 through 65	24,276.	66 5,714.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	1,575,835.	67 1,791,089.
	68 Temporarily restricted	2,611,272.	68 2,611,727.
	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 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	4,187,107.	73 4,402,816.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	4,211,383.	74 4,408,530.	

Part VI Other Information <i>(continued)</i>		Yes	No
82 a 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
83 a 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	
84 a 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? 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	85b		N/A
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
89 a 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 ▶ <u>0.</u>			
d Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ <u>0.</u>			
90 a List the states with which a copy of this return is filed ▶ SC			
b Number of employees employed in the pay period that includes March 12, 2005	90b		26
91 a The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ 843-723-8035 Located at ▶ 328 EAST BAY STREET, CHARLESTON, SC ZIP + 4 ▶ 29403			
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b		X
c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ N/A	91c		X
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <input type="checkbox"/>	92		N/A

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

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a PROGRAM SERVICES					3,485.
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					167,336.
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	59,547.	
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 personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			03	123,960.	
102 Gross profit or (loss) from sales of inventory			01	181.	
103 Other revenue:					
a OTHER INCOME			01	39,748.	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		223,436.	170,821.
105 Total (add line 104, columns (B), (D), and (E))					394,257.

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 the 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).
93A	PROGRAMS TO EDUCATE THE PUBLIC ON CONSERVATION

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the 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 the 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: 11/15/06 Type or print name and title: Dana Beach, Exec. Director

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 11/9/06 Check if self-employed: Preparer's SSN or PTIN: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: **DIXON HUGHES PLLC**
P.O. BOX 973
CHARLESTON, SC 29402

EIN: _____ Phone no.: **843-722-6443**

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 4947(a)(1) Nonexempt Charitable Trust

2005

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization SOUTH CAROLINA COASTAL CONSERVATION LEAG	Employer identification number 57 0887278
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the 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 & deferred compensation	(e) Expense account and other allowances
JANE LAREAU 485 EAST BAY STREET, CHARLESTON, SC 2	FORESTRY DIRECTOR 40.00	72,100.		0.
CATHY FORRESTER 485 EAST BAY STREET, CHARLESTON, SC 2	DEVELOPMENT DIRECTOR 40.00	72,100.		0.
NANCY VINSON 485 EAST BAY STREET, CHARLESTON, SC	WATER QUAL DIRECTOR 40.00	72,100.		0.
GERRITT JOBSIS 485 EAST BAY STREET, CHARLESTON, SC	RIVERS ASSOCIATE 40.00	61,800.		0.
TARA MCGRATH 485 EAST BAY STREET, CHARLESTON, SC 2	BEAUFORT DIRECTOR 40.00	54,895.		0.
Total number of other employees paid over \$50,000 ▶		0		

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

(See page 2 of the 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		
Total number of others receiving over \$50,000 for professional services ▶		0

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

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

Part III Statements About Activities (See page 2 of the 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 ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i 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.	X	
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?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e	Transfer of any part of its income or assets?		X
3 a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		X
b	Do you have a section 403(b) annuity plan for your employees?		X
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		X
4 a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the 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) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 of the 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 page 6 of the 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) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,739,504.	1,310,639.	1,102,213.	1,046,364.	5,198,720.
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	70,910.	34,993.	70,708.	76,732.	253,343.
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		-368,185.	SEE STATEMENT 13 -252,108.	-68,042.	-688,335.
23 Total of lines 15 through 22	1,810,414.	977,447.	920,813.	1,055,054.	4,763,728.
24 Line 23 minus line 17	1,810,414.	977,447.	920,813.	1,055,054.	4,763,728.
25 Enter 1% of line 23	18,104.	9,774.	9,208.	10,551.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	▶ 26a	95,275.
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 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	▶ 26b	0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)	▶ 26c	4,763,728.
d Add: Amounts from column (e) for lines: 18 <u>253,343.</u> 19 _____ 22 <u>-688,335.</u> 26b _____	▶ 26d	-434,992.
e Public support (line 26c minus line 26d total)	▶ 26e	5,198,720.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	▶ 26f	109.1313%

27 Organizations described on line 12 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: N/A	(2004)	(2003)	(2002)	(2001)
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 11b, 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: N/A	(2004)	(2003)	(2002)	(2001)
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	▶ 27c	N/A		
d Add: Line 27a total _____ and line 27b total _____	▶ 27d	N/A		
e Public support (line 27c total minus line 27d total)	▶ 27e	N/A		
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f	N/A			
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	▶ 27g	N/A %		
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	▶ 27h	N/A %		

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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 page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		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.) _____ _____		
34 a	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 page 9 of the instructions.) **N/A**

(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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	If the amount on line 40 is -		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	The lobbying nontaxable amount is -		
	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		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: 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 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45		234,012.	222,899.	226,991.	683,902.
46					1,025,853.
47		46,007.	41,206.	27,136.	114,349.
48		55,725.	56,748.	850.	113,323.
49					169,985.
50					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

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		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
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 Total lobbying expenditures (Add lines c through h)			0.

FORM 990	SPECIAL EVENTS AND ACTIVITIES			STATEMENT	1
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPECIAL EVENT	124,050.		124,050.	90.	123,960.
TO FM 990, PART I, LINE 9	124,050.		124,050.	90.	123,960.

FORM 990

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 10

STATEMENT 2

INCOME

1. GROSS RECEIPTS	166	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		166
4. COST OF GOODS SOLD (LINE 13)	-15	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		181

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR		
7. MERCHANDISE PURCHASED		
8. COST OF LABOR		
9. MATERIALS AND SUPPLIES		
10. OTHER COSTS	-15	
11. ADD LINES 6 THROUGH 10		-15
12. INVENTORY AT END OF YEAR		
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12).		-15

FORM 990	COST OF GOODS SOLD - OTHER COSTS	STATEMENT	3
DESCRIPTION		AMOUNT	
GOODS FOR SALE			-15.
TOTAL INCLUDED ON FORM 990, PART I, LINE 10B			-15.

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	4
DESCRIPTION		AMOUNT	
TO ADJUST BEGINNING NET ASSETS			-344,986.
UNREALIZED GAIN			235,324.
TOTAL TO FORM 990, PART I, LINE 20			-109,662.

FORM 990	OTHER EXPENSES				STATEMENT	5
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING		
FINES	113.	57.	28.	28.		
TAXES	80.	40.	20.	20.		
EVENTS	22,937.	11,467.	5,735.	5,735.		
BANK CHARGES	1,968.	984.	492.	492.		
INSURANCE	19,242.	9,621.	4,811.	4,810.		
DUES & SUBSCRIPTIONS	14,431.	7,216.	3,608.	3,607.		
OTHER PROFESSIONAL FEES	43,738.	21,869.	10,935.	10,934.		
CONTRACT LABOR	3,236.	1,618.	809.	809.		
REPAIRS & MAINTENANCE	22,833.	11,417.	5,708.	5,708.		
TECH SUPPORT	62,560.	31,280.	15,640.	15,640.		
MISCELLANEOUS	79.			79.		
TOTAL TO FM 990, LN 43	191,217.	95,569.	47,786.	47,862.		

FORM 990

OFFICER COMPENSATION ALLOCATION
PART II, LINE 25

STATEMENT 6

<u>NAME OF OFFICER, ETC.</u>	<u>COMPENSATION</u>	<u>EMPLOYEE BEN. PLANS</u>	<u>EXPENSE ACCOUNTS</u>	<u>TOTALS</u>
DANA BEACH	103,100.	0.	0.	103,100.
A. PROGRAM SERVICES	51,550.			51,550.
B. MANAGEMENT AND GENERAL	25,775.			25,775.
C. FUNDRAISING	25,775.			25,775.
TOTAL PROGRAM SERVICES				51,550.
TOTAL MANAGEMENT AND GENERAL				25,775.
TOTAL FUNDRAISING				25,775.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PARTS V-A AND V-B				<u>103,100.</u>

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 7

DESCRIPTION OF PROGRAM SERVICE THREE

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. THE WILDLIFE PROGRAM IS TO PROTECT NATIVE WILDLIFE AND RESTORE HABITAT, WHERE POSSIBLE, TO PROMOTE VIALBE POPULATIONS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE C		45,345.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 8
PART III

EXPLANATION

TO PROTECT THREATENED RESOURCES BY WORKING ON SOLUTIONS TO ENVIRONMENTAL CHALLENGES

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 9

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
SECURITIES	FMV			1,124,726.	1,124,726.
TO FORM 990, LINE 54, COL B				1,124,726.	1,124,726.

FORM 990	OTHER ASSETS	STATEMENT 10
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DESCRIPTION	AMOUNT
DUE FROM OTHER FUNDS	7,473.
INACTIVE INVESTMENTS ACCOUNTS	2,985,574.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	2,993,047.

FORM 990	PART V-A - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES	STATEMENT 11
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DANA BEACH EDWARD 485 EAST BAY STREET CHARLESTON, SC 29403	EXECUTIVE DIRECTOR 40.00	103,100.	0.	0.
FRANKLIN E AGNEW 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
VINCE GRAHAM 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
WILL CLEVELAND 485 EAST BAY STREET CHARLESTON, SC 29403	CHAIR 1.00	0.	0.	0.
DR ANGELA HALFACRE 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
ROBERT COFFEE 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
GEORGE JOHNSTON 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
TED DINTERSMITH 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.

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MARY KENNEMUR 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
DOTTIE FRANK 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
FRED LINCON 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
LAURA GATES 485 EAST BAY STREET CHARLESTON, SC 29403	CHAIR 1.00	0.	0.	0.
CARTTER LUPTON 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
BILL MARSCHER 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
FRAN MARSCHER 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
ROBERT PRIOLEAU 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
SARAH RAUCH 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
ROY RICHARDS 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
GILLIAN ROY 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
LIBBY SMITH 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.
TRENHOLM WALKER 485 EAST BAY STREET CHARLESTON, SC 29403	DIRECTOR 1.00	0.	0.	0.

TOTALS INCLUDED ON FORM 990, PART V-A

103,100.	0.	0.
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FORM 990

EXPLANATION OF RELATIONSHIP
PART V-A, LINE 75B

STATEMENT 12

INDIVIDUAL'S NAME

TITLE OR ROLE

BILL MARSCHER

DIRECTOR

INDIVIDUAL'S NAME

TITLE OR ROLE

FRAN MARSCHER

DORECTOR

EXPLANATION OF RELATIONSHIP

MARRIED

SCHEDULE A

OTHER INCOME

STATEMENT 13

DESCRIPTION	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT
OTHER INCOME	0.	-368,185.	-252,108.	-68,042.
TOTAL TO SCHEDULE A, LINE 22	0.	-368,185.	-252,108.	-68,042.