

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Department of the Treasury

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)

2009

OMB No 1545-0047

Open to Public

	2009 cale	ndar yea		7-01-2009 and ending 0	6-30-2010		D Employer id-	atification number		
Check if a	•	lease	C Name of organization Peninsula Open Space Trust	:	D Employer identification number					
Address c	nange	se IRS abel or	Doing Business As			94-2392007 E Telephone number				
Name cha		rint or ype. See	Doing Business As							
Initial retu	ırn S	pecific nstruc-		box if mail is not delivered to st	treet address)	Room/suite	(650) 854-7			
Terminate		ions.	222 HIGH STREET				G Gross receipts \$	71,772,921		
Amended	return		City or town, state or count	ry, and ZIP + 4		l				
Application	n pending		PALO ALTO, CA 94301							
		F Nan	ne and address of principa	al officer		H(a) Is the	l s a group return	for		
		AUDRE	Y RUST			affilia		⊤Yes ▼No		
			GH STREET ALTO,CA 94301					. – –		
			,				l affiliates include	·		
Tax-exen	npt status	✓ 501(c)) (3) ◀ (insert no)	7(a)(1) or 527			p," attach a list p exemption nur	(see instructions) nber ►		
Websit	e: ► HTTP	//www	OPENSPACETRUST OR	 G/		(0)				
			ion Trust Association			1 V 6 6	mation 1977 M	Chata of land dominio		
orm or or art I	Summ		ion Trust Association	Otner 🖛		L Year of for	mation 1977 M	State of legal domicile		
1		•	e organization's mission (or most significant activiti						
	•		_	DIVERSITY OF SAN FRAN		NINSULA 8	SANTA CRUZ	MOUNTAIN RANGI		
2	Check thi	s box 🛏	- if the organization disco	ontinued its operations or o	disposed of	more than :	25% of its net a	ssets		
3	Number o	f voting r	nembers of the governing	body (Part VI, line 1a)			3			
4		_		the governing body (Part V						
5			nployees (Part V , line 2a)		, ,					
6			lunteers (estimate if nec	•						
7a				m Part VIII, column (C), lı	ne 12 .	_				
	-			n Form 990-T, line 34 .		•	7b			
+-						Prio	r Year	Current Year		
8	Contribu	tions and	d arante (Part VIII line 1	lh)		- 110	14,082,464	4,031,4		
9			revenue (Part VIII, line 2			633,059	543,42			
10				29) • • • • • • • • • • • • • • • • • • •						
				s 5, 6d, 8c, 9c, 10c, and :			-828,207 -1,703			
11				ust equal Part VIII, colum			-35,536			
12				ust equal Fait VIII, Colum			13,851,780	2,871,04		
13				column (A), lines 1-3) .			6,652,295	1,595,00		
14	Benefits	paid to o	r for members (Part IX, c	column (A), line 4)						
15	Salaries	, other co	mpensation, employee b	enefits (Part IX, column (A	(), lines 5-					
16a	10)						2,781,712	2,499,51		
16a				umn (A), line 11e)						
Ь			enses (Part IX, column (D), line							
17				s 11a-11d, 11f-24f) .			5,637,911	3,608,45		
18				qual Part IX, column (A), l	_		15,071,918	7,702,97		
19	Revenue	less exp	enses Subtract line 18 f	from line 12			-1,220,138	-4,831,92		
§							of Current ear	End of Year		
20 22 21	Total ac	sate (Dar	t Y line 16\				29,505,139	231,823,47		
2 21										
5 21							8,875,627	4,492,52		
22 art II		ture Blo		21 from line 20			220,629,512	227,330,95		
al (II	_			amined this return, including acco	ompanying sc	hadulas and st	atomonts, and to th	no host of my knowledge		
				tion of preparer (other than offic						
	l 									
jn	*****					2011-	02-02			
re	Signatu	re of office	.г			Date				
		Y RUST PR								
	Type o	r print nam	e and title				_			
	Preparer's			Date		eck if	Preparer's identify	ring number		
		Nası R	aissian		self	- polyed ▶	(see instructions)			
d	signature	7		l l	I Citis	poi, ca - •				
			s 👠 Robert Lee & Associates L	LP						
id eparer's e Only	Firm's nam	e (or yours loyed),)				EIN Þ			
parer's	Firm's nam	e (or yours loyed),	226 Airport Parkway Suite		Cili		EIN Phone no (40)8) 855-6770		
parer's e Only	Firm's nam if self-emp address, ar	e (or yours loyed), nd ZIP + 4	226 Airport Parkway Suite San Jose, CA 95110				Phone no 🕨 (40	98) 855-6770		

Cat No 11282Y

(Expenses \$

Total program service expenses▶\$

Part III Statement of Program Service Accomplishments

4	Briefly	describe	the	organization's	mission

The purpose of Peninsula Open Space Trust (POST) is to give permanent protection to the beauty, character and diversity of the San Francisco Peninsula and Santa Cruz Mountain range POST encourages the use of these lands for natural resource protection, wildlife habitat, public recreation and agriculture for people here now and for future generations. Since its founding in 1977, POST has protected 63,000 acres of open space and parkland in San Mateo, Santa Clara and Santa Cruz counties.

2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
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 amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 3,124,086 including grants of \$ 1,595,000) (Revenue \$ 79,059)
	As part of POST's work to address urgent conservation needs on the San Francisco Peninsula and along the Santa Cruz Mountain range, POST protected three more properties in the region in FY10 In November 2009, POST took title to a tiny (07-acre) but steptically located parcel in the Mirada Sunf neighborhood of the Coastade so as to assist San Mateo County Parks in its Coastal Trail plans (1n May 2010, POST addrested parcel in the Mirada Sunf neighborhood of the Coastade so as to assist San Mateo County Parks in its Coastal Trail plans (1n May 2010, POST donated the land to the public agency for use as a restroom location along the developing trail of an addition to the preserve In October 2009, POST took title to a 21-acre former nursery property along Highway 92 in Half Moon Bay In 2004, POST had assisted the City of Half Moon Bay in acquiring the land for a possible crity park, providing a \$3.1 million interest-free loan to the City towards the purchase However, five years later, officials transferred title to the land to POST since the City was unable to pay back the loan 4 the end of FY10, the fair market value of the property was adjusted downward by \$674,200. POST is currently working to dentify what options for the land are possible moving forward Working with its conservation partners toward permanent land protection, POST also completed several large and important property transfers in FY10. As part of its increasing efforts to protect threatened open space in south Santa Clara County, PoST transferred 966-acre Rancho San Vicente, a major property at the edge of Almaden Valley in south San Jose, to Santa Clara County Parks in Cotober 2009 for permanent protection as part of adjoining Calero County Parks in November 2009. The 408-acre ranch located west of downtown Gilroy is a critical link in a chain of open space lands along the southernmost portion of the Santa Cruz Mountain range including neighboring Mount Madonna County Park Clark Canyon Ranch was onginally acquired by PoST from private owners in A
4b	(Code) (Expenses \$ 1,590,913 including grants of \$) (Revenue \$ 427,014)
	POST currently holds 28,280 acres in fee or under easement. The organization has an established stewardship program for the lands it owns that includes resource planning, water management, conservation grazing and agricultural considerations. POST works to protect and manage lands in its possession through individualized stewardship of the natural resources on each property. POST staff and volunteers actively monitor the acreage on which POST holds easements or restrictions. Volunteers also assist with stewardship projects on POST-owned land, contributing an impressive 1,130 hours of work time in FY10. Due to the state budget crisis in California and resulting bond freeze, POSTs work to install the Cowell-Punsima Trail along the San Mateo Coast, a project funded by the California Coastal Conservancy, was put on temporary hold in FY10. However, as of September 2010, the final phase of construction has resumed including installation of three bridges this fall, and the trail is due to be completed and opened to the public by the end of 2010. POST also continues to play a leadership role as part of a working group of organizations and agencies addressing the threat posed by Hypericum canariensis, a highly damaging and aggressive invasive exotic plant that is spreading along the San Mateo Coast. The group succeeded in petitioning the California Department of Food and Agriculture to upgrade hypericum's rating as a Class B noxious weed, triggering additional requirements for landowners with properties impacted by Hypericum to take steps to control and/or eliminate the weed POST continues to hold and manage Cloverdale Coastal Ranches, a 6,391-acre land complex acquired by POST in 1997. A resident ranch manager is on site to manage erosion control, coordinate fuels reduction projects, perform habitat restoration activities, manage non-native plant species removal projects, and operate a public trail. In the past fiscal year, POST secured federal stimulus funds from the U.S. Fish and Wildlife Service as well as funding f
4c	(Code) (Expenses \$ 384,085 including grants of \$) (Revenue \$ 37,352)
	To further its community outreach and education efforts, in FY '10 the organization hosted three speakers as part of its 17th annual Wallace Stegner Lecture Series, which is open to the public. This year's series featured author and farmer David Mas Masumoto, travel writer and novelist Paul Theroux, and venture capitalist and "green" entrepreneur Vinod Khosla. Attendance for all three lectures totaled 1,490 people, an increase of 290 attendees as compared to the 2009 series. POST also developed and mailed three issues of its donor newsletter, "Landscapes," to approximately 10,000 families and other interested people. In addition, POST continued its participation in the California Council of Land Trusts, an association of land conservancies throughout California. Also, as part of the GoMindego Campaign, POST established a donor recognition site on the Mindego Hill property as a gathering place for hikers and to commemorate the lead donors that made protection of the property possible. Construction of this installation was completed during FY10.
4d	Other program services (Describe in Schedule O)

including grants of \$

5,099,084

) (Revenue \$

Part IV	Checklis	t of	Red	uire	d 9	Sche	dules
---------	----------	------	-----	------	------------	------	-------

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any 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		Νο
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
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	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? 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 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	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A No			
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If</i> " <i>Yes," complete Schedule F, Part II</i>	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		N o
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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 with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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 "Yes," complete Schedule L, Part III	27		No
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	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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 owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
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	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

	990 (2009)			Page
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νo
Ь	If "Yes," enter the name of the foreign country 🕨			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding 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		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		110
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	- 9		
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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?	•		
9	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	70		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
_	facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	vear 12b			

year

222 HIGH STREET PALO ALTO,CA 94301 (650) 854-7696

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

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 13			
Ь	Enter the number of voting members that are independent 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	103	No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	100		110
11	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed CA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. 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 See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	nızatıor	n 🕨
	HEATHER KANTOR			

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

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

Check this box if the organization did i	not compen	r, dırector, trustee	or key employee							
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

For	n 990 (2009)			Page 8
1 b	Total	0		111,804
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►5			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
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	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No
S	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address (B) Description of services		Compe	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization \(\mathbb{E}\)0			
		F	orm 99	0 (2009)

Form 99								Page 9
Part V	<u> </u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
nts otc	1a	Federated camp	paigns 1a					
gra our	ь	Membership du	es					
<u>چ</u> ر	С		ents 1c					
<u>=</u>	d	Related organiz Government grants	eations 1d					
Sign Sim	e	_		4,031,452				
Contributions, gifts, grants and other similar amounts	g	sımılar amounts no						
nt o	9	lines 1a-1f \$ _						
္မ	h		s 1a-1f	►	4,031,452			
<u> </u>				Business Code				
ven	2a	Rental Income		531,390	401,291	401,291		
\$2	b	misc program incor		900,099	104,782	104,782		
MCe	С	lecture series incon	ne	611,600	37,352	37,352		
Š	d							
ian.	e f	All other progra	am service revenue					
Program Serwce Revenue	'							
	g 3		s 2a-2f		543,425			
	3		ome (including dividend ar amounts)	. F	3,493,354			3,493,354
	4		tment of tax-exempt bond p	F				
	5	Royalties		▶				
			(ı) Real	(II) Personal				
	6a	Gross Rents Less rental						
	Ь	expenses Rental income						
	C	or (loss)						
	d	Net rental incor	me or (loss) (i) Securities					
	7a	Gross amount from sales of assets other than inventory	63,704,690	(II) O ther				
	ь	Less cost or other basis and	68,901,874					
	c	sales expenses Gain or (loss)	-5,197,184					
	d		s)		-5,197,184			-5,197,184
4.	8a	Gross income f						
Other Revenue		sof contributions See Part IV , lin	reported on line 1c)					
jer Ter	ь	Less direct ex	penses b					
ŏ	с	Net income or (loss) from fundraising e	events 🟲				
	9a	Gross income fi See Part IV, lin	rom gaming activities le 19 a					
	Ь		penses b [(loss) from gaming activ					
	10a	Gross sales of returns and allo	inventory, less	Airles				
	ь	less cost of a	a oods sold b					
	c		loss) from sales of inve	entory 📂				
		Miscellaneous		Business Code				
	11a							
	ь							
	С							
	d	All other revenu	L					
	e	Total. Add lines	s 11a-11d					
	12	Total revenue.	See Instructions	▶	2,871,047	543,425	0	-1,703,830

	990 (2009)				Page 10
Par	IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
Do no	other organizations must complete column (A) but are not required to bot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	1,595,000		3	
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, trustees, and	672.070	205 024	102.011	102 247
6	key employees Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	672,979	295,921	183,811	193,247
7	Other salaries and wages	1,523,050	616,805	136,437	769,808
8	Pension plan contributions (include section 401(k) and section	1,323,030	010,003	130,437	709,008
0	403(b) employer contributions)	86,998	37,450	5,526	44,022
9	Other employee benefits	116,781	61,401		55,380
10	Payroll taxes	99,710	40,652	9,127	49,931
11	Fees for services (non-employees)				
а	Management				
ь	Legal	23,393	21,462	493	1,438
с	Accounting	42,118		42,118	
d	Lobbying	400,000	400,000		
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	307,921		307,921	
g	Other	638,831	279,734	32,285	326,812
12	Advertising and promotion	,	,	,	
13	Office expenses	208,990	75,995	38,035	94,960
14	Information technology	,	,	,	·
15	Royalties				
16	Occupancy	8,477	8,477		
17	Travel	18,123	9,100	1,549	7,474
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	14,294	6,024	3,968	4,302
20	Interest	81,365		81,365	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	115,528	65,285	10,282	39,961
23	Insurance	79,997	57,596	4,584	17,817
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	Loss on property	674,200	674,200		
b	Land Maintenance	321,675	321,675		
c	Donor/V olunteer Recogni	232,011	166,103		65,908
d	land easements	185,365	185,365		
e	Property Taxes	128,264	127,082	1,182	
f	All other expenses	127,905	53,757	27,099	47,049
25	Total functional expenses. Add lines 1 through 24f	7,702,975	5,099,084	885,782	1,718,109
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			-	· · ·
		•	•		

		(2009)				Page 11
<u>Pa</u>	rt X	Balance Sheet		(A)		(B)
				Beginning of year		End of year
	1	Cash—non-interest-bearing			1	· · · · · · · · · · · · · · · · · · ·
	2	Savings and temporary cash investments	•	11,035,224	2	711,237
	3	Pledges and grants receivable, net		1,717,432	3	1,790,598
	4	Accounts receivable, net		7,702,045	4	7,599,902
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	s, key employees, and			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under sopersons described in section 4958(c)(3)(B) Complete Part II of				
Asse		Schedule L			6	
	7	Notes and loans receivable, net		15,685,211	7	13,622,500
	8	Inventories for sale or use	sale or use			
	9	Prepaid expenses and deferred charges	203,322	9	93,939	
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	6,170,923			
	ь	Less accumulated depreciation	10b 498,827	5,780,330	10c	5,672,096
	11	Investments—publicly traded securities		30,338,927	11	85,992,240
11 11 11 11 11 11 11 11 11 11 11 11 11	12	Investments—other securities See Part IV, line 11	27,540,153	12	14,280,823	
	13	Investments—program-related See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11		129,502,495	15	102,060,135
	16	Total assets. Add lines 1 through 15 (must equal line 34)		229,505,139	16	231,823,470
	17	Accounts payable and accrued expenses .		617,972	17	510,745
	18	Grants payable			18	
	19	Deferred revenue			19	
ties	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedul	e D		21	
"iabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
ä		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		4,418,860	23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		3,838,795	25	3,981,775
	26	Total liabilities. Add lines 17 through 25		8,875,627	26	4,492,520
ces		Organizations that follow SFAS 117, check here ▶ ↓ and comp through 29, and lines 33 and 34.	lete lines 27			
Fund Balances	27	Unrestricted net assets		214,487,366	27	221,252,930
	28	Temporarily restricted net assets		5,591,646	28	5,502,520
	29	Permanently restricted net assets		550,500	29	575,500
Ē		Organizations that do not follow SFAS 117, check here ▶ ┌ an	d complete			
ĕ		lines 30 through 34.				
Assets or	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds		32	
Net	33	Total net assets or fund balances		220,629,512	33	227,330,950
	34	Total liabilities and net assets/fund balances		229,505,139	34	231,823,470

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
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 separated basis			
3а	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		No
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		

Form **990** (2009)

Employer identification number

OMB No 1545-0047

OMB No 1545-004

2009

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section

Public Charity Status and Public Support

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

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

Peninsula Open Space Trust
94-2392007

Pai	tΙ	Reas	on for Pub	olic Charity Stat	us (All orga	anizations r	nust comple	ete this par	t.) See inst	ructions	
he o	rganız	zation is	not a private	foundation because	ıtıs (Forlır	nes 1 throug	h 11, check d	only one box)		
1	Γ	A churc	h, conventio	on of churches, or as:	sociation of c	hurches se	ction 170(b)(1)(A)(i).			
2	Γ	A schoo	ol described	ın section 170(b)(1)	(A)(ii). (Atta	ach Schedule	≘ E)				
3	Γ	A hospi	hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	Γ		cal research l's name, cit	•	ed in conjunc	tion with a h	ospital descri	ıbed ın secti	on 170(b)(1)((A)(iii). Ente	er the
5	Г	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		section	170(b)(1)(A	A)(iv). (Complete Pa	rt II)						
6	\sqcap	A feder	al, state, or l	ocal government or	governmenta	l unit descri	bed in sectio i	n 170(b)(1)(A)(v).		
7	굣	describ	ed ın	t normally receives a		part of its su	upport from a	government	al unit or fron	n the genera	l public
8	\sqcap			described in section)(vi) (Comp	lete Part II)				
9									tıons, membe	rship fees, a	nd gross
		receipts	from activit	ties related to its ex	empt function	ns—subject t	o certain exc	eptions, and	l (2) no more	than 331/3%	of
		ıts supp	ort from gro	ss investment incom	ne and unrela	ted business	taxable inco	ome (less se	ction 511 tax	() from busin	esses
		acquire	d by the orga	anızatıon after June 3	30,1975 Se	e section 50	9(a)(2). (Cor	mplete Part I	II)		
LO	\sqcap	An orga	ınızatıon org	anızed and operated	exclusively t	to test for pu	blic safety S	ee section 5 0	09(a)(4).		
l 1	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type III c Type III - Functionally integrated d Type III - Other									
e f	Γ	other th	ian foundatio 509(a)(2)	on managers and oth	er than one o	r more public	cly supported	l organizatio	ns described	in section 5	09(a)(1) or
g		check t Sınce A followın	his box ugust 17, 2 g persons?	006, has the organiz	ation accept	ed any gıft o	r contributior	n from any of	(b)(1)(A)(iii). In section 170(b)(1)(A)(iii). Enter and the section 170(b)(1)(A)(iii). Enter and the section 170(b)(1)(A)(iii). Enter and the section 170(b)(1)(A)(v). In section 170(b)(1)(A)(v). In section 170(b)(A)(v). In section 170(b)(A)(a)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)	Γ	
				•	•	_		ersons descr	ibea in (ii)	44-4:>	Yes No
			_	overning body of the		=	ion?				
			•	r of a person describ	` ,						
L				ed entity of a person						119(111)	
h		Piovide	the following	g information about t	.ne supported	i organizacio	11(5)				
s	(i) Name uppoi ganiza	of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gover docume	on in ed in rning	(v) Did you not organizati col (i) of suppor	on in your t?	Is the organizati col (i) orga in the U	on in anized S ?	(vii) A mount of support?
				ınstructions))	163	110	163	110	163	140	1
											1
											<u> </u>

Total

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

	ection A. Public Support	u checked the	box on line 5,	7, 01 8 01 PART 1.)		
	endar year (or fiscal year beginning in)	(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")	9,535,669	5 18,849,946	21,630,648	14,082,464	4,031,452	68,130,175
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	9,535,66	5 18,849,946	21,630,648	14,082,464	4,031,452	68,130,175
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)						17,210,844
6	Public Support. Subtract line 5 from line 4						50,919,331
	ection B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	A mounts from line 4	9,535,665	7,909,358	21,630,648	14,082,464	4,031,452	68,130,175
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,426,948	7,909,358	5,577,256	4,948,168	3,999,427	26,861,157
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11	Total support (Add lines 7 through 10)						94,991,332
12	Gross receipts from related activities	es, etc (See ins	tructions)			12	
13	First Five Years If the Form 990 is f check this box and stop here			, thırd, fourth, or fı	fth tax year as a	501(c)(3) organiz	zation,
	ection C. Computation of Pub			11 (0)		T T	
14 	Public Support Percentage for 2009	•		II column (f))		14	53 600 %
15 16	Public Support Percentage for 2008	•	,		44	15	56 870 %
b	33 1/3% support test—2009. If the and stop here. The organization qua 33 1/3% support test—2008. If the box and stop here. The organization 10%-facts-and-circumstances test—is 10% or more, and if the organization Part IV how the organization mee organization	lifies as a public organization did qualifies as a p - 2009. If the org	tly supported orgal not check the bot ublicly supported panization did not of facts and circums	nization x on line 13 or 16: organization check a box on line tances" test, chec	a, and line 15 is 3 e 13, 16a, or 16b k this box and st	33 1/3% or more, and line 14 op here. Explain	►/▽ check this ►/
b 18	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organizat supported organization Private Foundation If the organizati	ization meets th ion meets the "f	ne "facts and circu facts and circums	mstances" test, c tances" test The	heck this box and organization qual	d stop here. ıfıes as a publıcly	·

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(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						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 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,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493035009001

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

Open to Public Inspection

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

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

	ction 50 f(c) (other than section 50 f(c)(3)) organizations. Complete Parts FA and C below. Do not cor ction 527 organizations. Complete Part I-A only	npiete Pa	art FB			
If the Se Se If the	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 4 ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, lirection 501(c)(4), (5), or (6) organizations Complete Part III	II-A Do e Part II-E	not con	nplete ot co	e Part II-B mplete Part	: II-A
		Employe	er ident	:ıfıc a	tion numbe	er
Pen	ıınsula Open Space Trust	94-239	2007			
Par	t I-A Complete if the organization is exempt under section 501(c) or is a s			ora	anizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Par					
2	Political expenditures			_		
3	Volunteer hours	,	. -	\$		
•	v ofuniteer flours			_		
Par	t I-B Complete if the organization is exempt under section 501(c)(3).					
1	Enter the amount of any excise tax incurred by the organization under section 4955		►	\$ <u></u>		
2	Enter the amount of any excise tax incurred by organization managers under section 4955		►	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				☐ Yes	┌ No
4a	Was a correction made?				☐ Yes	∏ No
ь	If "Yes," describe in Part IV					
Par	t I-C Complete if the organization is exempt under section 501(c) except	sectio	n 501	(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function ac	tivities	>	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section	527				
	exempt funtion activities		Þ	\$		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line	17b	►	\$		
4	Did the filing organization file Form 1120-POL for this year?				☐ Yes	┌ No
5	State the names, addresses and employer identification number (EIN) of all section 527 politica were made. For each organization listed, enter the amount paid from the filing organization's fund contributions received that were promptly and directly delivered to a separate political organization or a political action committee (PAC). If additional space is needed, provide information in F	s Also e ion, suc	enter th	ne an	nount of po	litical

5	State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments
	were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political
	contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated
	fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

section 4911 tax for this year?

┌ Yes ┌ No

Р	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
A R	Check If the filing organization belongs to	an affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means a	Expenditures	(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	400,000	
c	Total lobbying expenditures (add lines 1a and 1	b)	400,000	
d	Other exempt purpose expenditures		7,227,975	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	7,627,975	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	531,399	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of li	ne 1f)	132,850	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0	
	Subtract line 1 ffrom line 1 c If zero or less ente	ar - 0 -		

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.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	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	1,000,000	1,000,000	903,596	531,399	3,434,995			
b	Lobbying ceiling amount (150% of line 2a, column(e))					5,152,493			
c	Total lobbying expenditures	88,000	318,000	200,000	400,000	1,006,000			
_d	Grassroots non-taxable amount	250,000	250,000	225,899	132,850	858,749			
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,288,124			
f	Grassroots lobbying expenditures								

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	a)	(b)
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	neır staffs, government officials, or a l	egislative body?				
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, c	rany sımılar means?				
i	Other activities? If "Yes," descri	ibe in Part IV					
j	Total lines 1c through 1:						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	=	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
26H	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
a	Current year	(. , para).		2a			
ь	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493035009001

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization

enınsula O	pen Space Trust					
Part I	Organizations Maintaining Donor A	dvised Funds or Other Similar Fo		392007	Complet	e if the
aiti	organization answered "Yes" to Form 99		ilius o	n Accounts.	Complet	e ii uie
		(a) Donor advised funds	(l) Funds and ot	ner accour	nts
Total	number at end of year					
Aggre	egate contributions to (during year)					
Aggre	egate grants from (durıng year)					
Aggre	egate value at end of year					
	he organization inform all donors and donor advi s are the organization's property, subject to the		or advis	ed	☐ Yes	┌ No
used	he organization inform all grantees, donors, and only for charitable purposes and not for the berering impermissible private benefit		•		☐ Yes	┌ No
art II		if the organization answered "Yes" to	Form	990, Part IV,	line 7.	
다 다 다 다 다 Comp	ose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space plete lines 2a-2d if the organization held a qual	on or pleasure) Preservation of an Preservation of a c	ertified	historic struct		a
ease	ment on the last day of the tax year	Г	T			<u> </u>
Total	I number of conservation easements		7-	Held at the E	na or the	теаг 28
	l acreage restricted by conservation easements		2a 2b			
	ber of conservation easements on a certified his	-	+		11.	,670 0
	ber of conservation easements included in (c) a	` '	2c			
	ber of conservation easements modified, transfe		2d			
	axable year - 1 ber of states where property subject to conserve	ation easement is located 🛌 👤 1				
	s the organization have a written policy regarding cement of the conservation easements it holds		lling of v	violations, and	✓ Yes	┌ No
Staff	and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents du	rıng the year ►	2180	00
A mo	unt of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during	the year ► \$ _	2,153	3
	s each conservation easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2 (d) above satisfy the requirements of sec	tion		☐ Yes	√ No
balar	art XIV, describe how the organization reports c nce sheet, and include, if applicable, the text of organization's accounting for conservation easer	the footnote to the organization's financial nents	statem	ents that descr	ıbes	
rt III	Organizations Maintaining Collection Complete if the organization answered		or Oth	er Similar A	ssets.	
art, h	e organization elected, as permitted under SFAS nistorical treasures, or other similar assets held ide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or research	h in fur			,
hısto	e organization elected, as permitted under SFAS rical treasures, or other similar assets held for ide the following amounts relating to these items	public exhibition, education, or research in				
(i) _R	evenues included in Form 990, Part VIII, line 1			► \$		
(ii) _A	ssets included in Form 990, Part X			► \$		
Ifthe	e organization received or held works of art, hist wing amounts required to be reported under SFA		r financ			
Reve	nues included in Form 990, Part VIII, line 1			► \$		
•				T		

Cat No 52283D

Schedule D (Form 990) 2009

b Assets included in Form 990, Part X

ar	Organizations Maintaining Co	<u>llections of Art, </u>	<u>, His</u>	tori	<u>cal Tre</u>	<u>easu</u>	res, or C	<u>)the</u>	<u>r Simila</u>	r Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	ne foll	lowing th	hat are	a signific	ant u	se of its co	ollectio	n	
а	Public exhibition		d	\sqcap	Loan o	rexch	nange prog	rams				
ь	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
•	Provide a description of the organization's co	ollections and explai	ın hov	w the	y further	r the o	rganızatıor	ı's ex	empt purp	ose in		
i	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					nılar	Г	Yes	┌ No
a۱	rt IV Escrow and Custodial Arrang						answere	d "Y	es" to Fo	rm 990),	
	Part IV, line 9, or reported an ar											
a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ions o	rotherass	etsı	not	Γ	Yes	Г No
b	If "Yes," explain the arrangement in Part XI	√ and complete the f	follow	ing ta	able		г			_		
_							-	_		A mou	ınt	
С 	Beginning balance							1c				
d	Additions during the year						-	1d				
e	Distributions during the year						-	1e				
f	Ending balance							1f				
а	Did the organization include an amount on Fo	orm 990, Part X, line	21?							Γ	Yes	☐ No
	If "Yes," explain the arrangement in Part XI\											
a	rt V Endowment Funds. Complete										1	
	Dagunung af wash balanca	(a)Current Year 470,118	(b)	Prior \	Year	(c)Iwo	o Years Back	(a)	Three Years	Back (e	Hour Ye	ears Back
•	Beginning of year balance	25,000										
b	Contributions	60,916										
c d	Grants or scholarships	00,510										
u e												
_	and programs											
f	Administrative expenses											
g	End of year balance	556,034										
	Provide the estimated percentage of the yea	r end balance held a	ıs									
а	Board designated or quasi-endowment 🕨	%										
ь	Permanent endowment 🕨 100 000 % %	,										
c	Term endowment ► %											
a	Are there endowment funds not in the posse	ssion of the organiza	ation t	that a	are held	and a	dmınıstere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations			•				•		3a(i)		No
	(ii) related organizations					•		•		3a(ii)	1	No
D	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the							•		3b		
	t VI Investments—Land, Building)() Da	rt V line	10				
Q	Description of investment	s, and Equipmen	iit. <u>J</u>	(a)	Cost or one of the contract of	other	(b)Cost or o	other	(c) Accum		(d) Bo	ok value
 a	Land						2 35	L,899				2,351,899
_	Buildings							2,523		293,544		3,228,979
	Leasehold improvements						5,52	-,525				-,,,,,,,,
	Equipment						152	2,789		139,364		13,425
	Other							3,712		65,919		77,793
				1								,

5,672,096

Part VII Investments—Other Securities. See I	Form 990, Part X, line 1		
(a) Description of security or category (including name of security)	(b) Book value		od of valuation f-year market value
Financial derivatives		Cost of cha o	year market value
Closely-held equity interests			
Other			
Investment in alternative investments	10,023,188		F
Investments held in CRT	4,257,635		F
	.,,		<u> </u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	14,280,823		
Part VIII Investments—Program Related. See			
(a) Description of investment type	(b) Book value		od of valuation
(a) Description of investment type	(b) Book value	Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) ▶			
Part IX Other Assets. See Form 990, Part X, lin	e 15.	4	
(a) Descrip			(b) Book value
O ther receivable			38,156
Asset O bligation			433,304
Land held for conservation			101,176,675
Property held for sale			412,000
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:		<u> </u>	102,060,135
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(b) A mount		
Federal Income Taxes	(b) Amount		
	570,734		
Agency Trust Funds Liability under CRUT	2,505,149		
Conditional asset retirement Obligations	905,892		
Conditional asset retirement obligations	303,032		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	3,981,775		

	tx1 Reconcination of change in Net Assets from Form 330 to Financial Statemen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,871,047
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,702,975
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-4,831,928
4	Net unrealized gains (losses) on investments	4	11,533,366
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	11,533,366
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	6,701,438
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	14,142,745
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	11,271,698
3	Subtract line 2e from line 1	3	2,871,047
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	2,871,047
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	7,441,307
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-261,668
3	Subtract line 2e from line 1	3	7,702,975
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	7,702,975
Pai	t XIV Supplemental Information		

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

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

Ident if ier	Return Reference	Explanation
Part X	Description of Uncertain Tax Positions Under FIN 48	The Organization evaluates its uncertain tax positions and will recognize a loss contingency when it is probable that a liability has been incurred as of the date of the financial statements and the amount of the loss can be reasonably estimated. The amount recognized is subject to estimate and management judgment with respect to the likely outcome of each uncertain tax position. The amount that is ultimately sustained for an individual uncertain tax position for all uncertain tax positions in the aggregate could differ from the amount recognized. As of June 30, 2010 management did not identify any uncertain tax positions.
Part XII, Line 2d - Other Adjustments		Investment Management Fees -307921
Part XIII, Line 2d - Other Adjustments		Investment Management fees -307921

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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

OMB No 1545-0047

DLN: 93493035009001

Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization Peninsula Open Space Trust

sacramento, CA 95814

Employer identification number

94-2392007

Part I General Inform	mation on Grants	and Assistance					
Does the organization mathe selection criteria useDescribe in Part IV the organization	d to award the grants o	orassistance?				•	▽ Yes
Form 990, Part 1	IV, line 21 for any r	Governments and recipient that received of additional space	d more than \$5,000	. Check this box if r	no one recipient rece	ived more than \$5,0	000. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Land trust of santa cruZ countY617 Water STreet santa cruz, CA 95062	942431856			1,500,000	APPRAISAL	LAND	PROTECTION OF OPEN SPACE
San mateo county department of parks455 County center 4th floor redwood city, CA 94063	946000532			20,000	fM∨	LAND	PROTECTION OF OPEN SPACE
california council of land trustS1029 K street Suite	010826246		75,000				TRAIN AND SUPPORT LAND

	· · · · · · · · · · · · · · · · · · ·	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 9	90, Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Ident if ier	Return Reference	Explanation	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493035009001

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23.

Compensation Information

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name o	fthe	organizat i	OI
eninsula	Open	Space Trust	

Employer identification number

94-2392007

Рa	Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropiate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the oreimbursement orprovision of all the expenses desc	-		1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2		
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t Compensation committee					
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	l paymen	nt?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described i					
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	ie rebutti	able presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

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

(A) Name	(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MI (ii) Bonus & incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
A udrey Rust (1)	284,061 0	0 0	_ ·	17,150 0	13,095 0		
Walter T Moore (1)	219,487 0	0	_	15,352 0	0	234,839 0	0 0
Anne Trela (1)	143,840	0		10,395 0	10,273 0	164,508 0	

Part III Supplemental Information

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

]	Ident if ier	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

DLN: 93493035009001

Schedule L

(Form 990 or 990-EZ)

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

Transactions with Interested Persons

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Internal Revenue Service Name of the organization

Employer identification number

Peninsula	Open Space Trust					
		94-2392007				
Part I		c)(3) and section 501 (c)(4) organizations only). 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V,	lıne 40b			
1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?			
	(a) italie of all qualified polooi.	(b) Description of transaction	Yes	No		

	section 4958			\$
3	3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization			\$

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

2. Enter the amount of tax imposed on the organization managers or disqualified persons during the year under

(a) Name of interested person and purpose	or fr	oan to om the ization?	(c)O riginal principal amount	(d)Balance due	(e) I defaul		(f) Approv by boar committ	d or	(g) Writ agreeme	
	То	From			Yes	No	Yes	No	Yes	No

Grants or Assistance Benefitting Interested Persons. Part III

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(b)Relationship between interested person

(a) Name of interested person and the organization (c)A mount of grant or type of assistance

Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organı	aring of zation's nues?
	organization			Yes	No
Larry Jacobs	Director of PO ST	15,600	See Sch O Contract between director Larry Jacobs of Jacobs Farms and POST to lease 52 acres in FY 2010 for organic farming		No
Audrey Rust	President of POST	75,000	See Sch O AUDREY RUST SERVED AS A DIRECTOR OF THE CALIFORNIA COUNCIL OF LAND TRUSTS TO WHICH POST MADE GRANTS TO DURING FY 2010		No

94-2392007

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Internal Revenue Service **Employer identification number** Name of the organization Peninsula Open Space Trust

Pa	Types of Property		,					
		(a) Check ıf	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d Method of de reven	etermı	nıng	
		applicable		1 g				
	Art—Works of art							
2	Art—Historical treasures .							
3								
4	Books and publications							
5	Clothing and household							
_	goods							
7	Intellectual property							
9	Securities—Publicly traded .							
	·							
	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other	Х	1	412,000	fmv			
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
25	O ther ▶ ()							
	O ther ▶()							
	O ther ▶()							
28	O ther ► ()							
29	Number of Forms 8283 received				29			
	for which the organization comp	ietea Formi	5265, Part IV, Donee Ackr	iowiedgement			Yes	
302	During the year, did the organiza	ation receiv	e by contribution any prope	arty reported in Part I lines	1 - 28 that it		res	No
504	must hold for at least three year							
	for exempt purposes for the enti			on, and winch is not require	u to be useu	20		No
						30a		
	If "Yes," describe the arrangem					,		
31	Does the organization have a gi					31	Yes	
32a	Does the organization hire or us contributions?	e third part • • •	ies or related organizations	to solicit, process, or sell i	non-cash	32a		Νο
Ь	If "Yes," describe in Part II							
	If the organization did not report	t revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			
	describe in Part II				•			

Page 2

Part II

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

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493035009001

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990

2009

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Open to Public Inspection

Name of the organization
Peninsula Open Space Trust

Employer identification number

94-2392007

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		Each year, prior to submission, the Audit Committee shall ensure that POST'S FORM 990 IS REVIEWED BY A MEMBER OF THE COMMITTEE OR A DESIGNEE OF THE COMMITTEE WITH APPROPRIATE QUALIFICATIONS IN ADDITION, THE DRAFT SUBMISSION will be MADE AVaiLABLE TO THE BOARD FOR REVIEW AND COMMENT
Form 990, Part VI, Section B, line 12c		When joining the organization's board or staff, and on an annual basis, board members, members of the finance and audit committee not currently serving on the Board, and top staff fill out a conflict of interest statement. If a change in a person's material interest in a matter that could affect POST occurs, that person must amend the conflict of interest statement. All disclosure statements shall be submitted to the President and filed with the minutes. The Chair of the Board Governance Committee and President shall review these statements within a month of their submission date.
Form 990, Part VI, Section B, line 15		THE BOARD OF DIRECTORS COMPENSATION COMMITTEE IS CHARGED WITH RECOMMENDING TO THE BOARD OF DIRECTORS A COMPENSATION PACKAGE, INCLUDING BASE SALARY, BENEFITS, AND RETIREMENT CONTRIBUTIONS, FOR THE PRESIDENT WHEN CONSIDERING THE COMPENSATION PACKAGE, THE COMMITTEE REVIEWS COMPENSATION OF EXECUTIVES OF COMPARABLE NON-PROFIT ORGANIZATIONS LOCALLY AND THROUGHOUT THE UNITED STATES THE BOARD OF DIRECTORS APPROVES THE RECOMMENDED COMPENSATION PACKAGE ON AN ANNUAL BASIS BEFORE THE START OF THE FISCAL YEAR OR BEFORE THE EFFECTIVE DATE OF ANY CHANGE IN COMPENSATION
Form 990, Part VI, Section C, line 19		FORM 990 IS AVAILABLE UPON REQUEST AND ON GUIDESTAR ORG ALL OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST
Form 990 Part XI Line 2c	Audit committee oversight	The Organization has and audit committee that has oversight of the audit and the independent auditors. This process has not changed from prior year.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493035009001

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

Name of the organization **Employer identification number** Peninsula Open Space Trust 94-2392007

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

Name, address, and EIN of disregarded entity

(b) Primary activity

(c) Legal domicile (state or foreign country)

Total income

(e) End-of-year assets

(f) Direct controlling entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity

(c) Legal domicile (state or foreign country)

(d) Exempt Code section

Public charity status (if section 501(c)(3)) Direct controlling entity

LAKE LUCERNE MUTUAL WATER COMPANY

222 HIGH STREET

PALO ALTO, CA 94601 94-2689518

DISTRIBUTION OF WATER

CA

501(C)(12)

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

Cat No 50135Y

2009

(j)

General or

managing

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990,	Part IV, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

al (d)
cile Direct controlling
or entity
gn

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations? ai

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

hedule K-1 partner? form 1065)

Yes No

Yes

No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f) Share of total income

(g) Share of end-of-year assets (h) Percentage ownership

(3)

(4)

(5)

(6)

Schedule R (Form 990) 2009			Рa	age 3
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990	0, Part IV, line 34, 35, or 36.)			
Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in	n Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No
b Gift, grant, or capital contribution to other organization(s)		1b		No
c Gift, grant, or capital contribution from other organization(s)		1 c		No
d Loans or loan guarantees to or for other organization(s)		1d		No
e Loans or loan guarantees by other organization(s)		1e	Yes	1
f Sale of assets to other organization(s)		1f		No
g Purchase of assets from other organization(s)		1 g		No
h Exchange of assets		1h		No
i Lease of facilities, equipment, or other assets to other organization(s)		1 i		No
j Lease of facilities, equipment, or other assets from other organization(s)		1 j		No
k Performance of services or membership or fundraising solicitations for other organization(s)		1k		No
l Performance of services or membership or fundraising solicitations by other organization(s)		11		No
m Sharing of facilities, equipment, mailing lists, or other assets		1m	1	No
n Sharing of paid employees		1n		No
• Reimbursement paid to other organization for expenses		10		No
p Reimbursement paid by other organization for expenses		1р		No
q O ther transfer of cash or property to other organization(s)		1 q		No
r Other transfer of cash or property from other organization(s)		1 r		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered		esholds		
(a) Name of other organization	(b) Transaction type(a-r)		(c) t involve	ed
(1) LAKE LUCERNE MUTUAL WATER COMPANY	туре(а-т) D		3	38,156
(1) See Additional Data Table (2)				

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Software ID: Software Version:

EIN: 94-2392007

Name: Peninsula Open Space Trust

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours		tion (che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Mark Wan Chairman & Director	3 50	X		Χ				0	0	0
Norman E Matteoni SECRETARY/Director	1 20	X		X				0	0	0
Steve Blank Director	1 90	Х						0	0	0
Donna Dubinsky Director	2 10	X						0	0	0
Jan Garrod Director	1 80	X						0	0	0
Larry Jacobs Director	2 20	X						0	0	0
Charlene Kabcenell Director	1 80	X						0	0	0
Robert C Kirkwood Director	2 20	X						0	0	0
Dianne McKenna Director	1 80	X						0	0	0
Paul Newhagen Director	2 50	X						0	0	0
Brad O'Brien Director	2 50	X						0	0	0
Sandra Thompson Director	2 20	X						0	0	0
Karıe Thomson Dırector	1 80	X						0	0	0
Audrey Rust President	40 00			X	Х			284,061	0	30,245
Walter T Moore Executive Vice President	40 00			X	Х			219,487	0	15,352
Karen Douglas Chief Financial Officer	15 00			X				44,984	0	19,678
Anne Trela Vice President, Advancem	40 00					X		143,840	0	20,668
Marc Landgraf Director of Conservation	40 00					Х		102,266	0	12,882
Daphne Muehle Senior Major Gifts Offic	40 00					Х		100,847	0	12,979

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Loss on property	674,200	674,200		
Land Maintenance	321,675	321,675		
Donor/Volunteer Recogni	232,011	166,103		65,908
land easements	185,365	185,365		
Property Taxes	128,264	127,082	1,182	