Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
PENINSULA OPEN SPACE TRUST

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
222 HIGH STREET

City or town, state or province, country, and ZIP or foreign postal code
PALO ALTO, CA 94301

D Employer identification number
94-2392007

E Telephone number
(650) 854-7696

G Gross receipts $ 107,666,746

F Name and address of principal officer
WALTER T MOORE
222 HIGH STREET
PALO ALTO, CA 94301

H(a) Is this a group return for subordinates? ☐ Yes ☑ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ HTTP //WWW OPENSPACETRUST ORG/

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1977

M State of legal domicile CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
POST PROTECTS OPEN SPACE ON THE PENINSULA AND IN THE SOUTH BAY FOR THE BENEFIT OF ALL

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	18
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	56
6	Total number of volunteers (estimate if necessary)	6	233
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	17,973,205	21,080,133
	9	Program service revenue (Part VIII, line 2g)	379,723	326,297
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,326,601	9,669,314
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	48,271	609,256
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	31,727,800	31,685,000
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	290,872	1,195,957
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	5,512,399	6,576,655
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,873,227		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	7,707,920	19,351,615
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	13,511,191	27,124,227
	19	Revenue less expenses Subtract line 18 from line 12	18,216,609	4,560,773
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	313,798,609	315,775,082
	21	Total liabilities (Part X, line 26)	11,948,825	11,785,303
	22	Net assets or fund balances Subtract line 21 from line 20	301,849,784	303,989,779

Part II Signature Block

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

Sign Here

****** | 2019-11-25
Signature of officer | Date

WALTER T MOORE PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P01208759
Firm's name ▶ ROBERT LEE & ASSOCIATES LLP			Firm's EIN ▶ 27-1155496	
Firm's address ▶ 999 W TAYLOR STREET SAN JOSE, CA 95126			Phone no (408) 855-6770	

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

PENINSULA OPEN SPACE TRUST (POST) PROTECTS OPEN SPACE ON THE PENINSULA AND IN THE SOUTH BAY FOR THE BENEFIT OF ALL POST IS CREATING A NETWORK OF PROTECTED LANDS WHERE PEOPLE AND NATURE CONNECT AND THRIVE THESE LANDS ARE PRESERVED FOREVER SO PRESENT AND FUTURE GENERATIONS BENEFIT FROM THE CAREFUL BALANCE OF RURAL AND URBAN LANDSCAPES THAT MAKE OUR REGION EXTRAORDINARY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

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? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 $ 15,989,688 including grants of $ 1,002,638) (Revenue $)

See Additional Data

4b (Code) (Expenses $ 3,733,177 including grants of $ 193,319) (Revenue $ 241,235)

See Additional Data

4c (Code) (Expenses $ 1,916,446 including grants of $) (Revenue $ 85,062)

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses ▶** 21,639,311

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	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		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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 temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	Yes	
b	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*	11b		No
c	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*	11c		No
d	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*	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	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? *If "Yes," complete Schedule G, Part I*(see instructions)	17		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government 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 or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated 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 lines 24b through 24d and complete Schedule K If "No," go to line 25a*	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), 501(c)(4), and 501(c)(29) 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
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, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	86		
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	2a	56			
b 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 (see instructions)			2b	Yes	
3a Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, 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		No
b If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			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 as charitable contributions?			6a	Yes	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	Yes	
7 **Organizations that may receive deductible contributions under section 170(c).**					
a 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		No
d If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e Did the organization 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
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8 **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		No
9a Did the sponsoring organization make any taxable distributions under section 4966?			9a		No
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		No
10 **Section 501(c)(7) organizations.** Enter					
a Initiation fees and capital contributions included on Part VIII, line 12	10a				
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11 **Section 501(c)(12) organizations.** Enter					
a Gross income from members or shareholders	11a				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13 **Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c Enter the amount of reserves on hand	13c				
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.			15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			16		No

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*

Check if Schedule O contains a response or note to any line in this Part VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a** 18			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		**8a**	Yes	
b	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**		No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did 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?			
a	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 15a or 15b, 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**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶ CA , FL , GA , NM , NY , NC , OK , OR , TN , VA , MD , PA , CT , WI , IL , HI , CO , WA , MA , MI , MO , NJ

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶MARK STEVENS 222 HIGH STREET PALO ALTO, CA 94301 (650) 854-7696

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . ☐

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

	(D)	(E)	(F)
1b Sub-Total ▶			
c Total from continuation sheets to Part VII, **Section A** ▶			
d Total (add lines 1b and 1c) ▶	2,026,938	0	304,200

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 10

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		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 or individual for services rendered to the organization?*If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
BIG CREEK LUMBER 111 MAIN STREET HALF MOON BAY, CA 94019	ROAD MAINTENANCE	423,556
NORTH COAST REMEDIATION INC 340 WOODPECKER RDG SANTA CRUZ, CA 950609797	ROAD MAINTENANCE - AGGREGATE PRODUCTION	403,561
GO NATIVE INC PO BOX 370103 MONTARA, CA 94037	ROADWORK, INVASIVE SPECIES REMOVAL, MAIN	362,360
NADIA HAMEY 247 SUNLIT LANE SANTA CRUZ, CA 95060	FORESTRY SERVICES, SECURITY, INVASIVES C	244,358
SHUTE MIHALY & WEINBERGER LLP 396 HAYES STREET SAN FRANCISCO, CA 94102	LEGAL SERVICES	229,630

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 13

Part VIII **Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e 1,847,393				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 19,232,740				
	g Noncash contributions included in lines 1a - 1f $ 5,316,547					
	h **Total.** Add lines 1a-1f ▶		21,080,133			
Program Service Revenue		Business Code				
	2a RENTAL INCOME	900002	241,235	241,235		
	b LECTURE SERIES INCOME	611600	85,062	85,062		
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f ▶		326,297			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		4,302,881			4,302,881
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real / (ii) Personal				
	6a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ▶					
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	(i) 81,348,179				
	b Less cost or other basis and sales expenses	(i) 75,981,746				
	c Gain or (loss)	(i) 5,366,433				
	d Net gain or (loss) ▶		5,366,433			5,366,433
	8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events ▶					
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities ▶					
	10a Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory ▶					
	Miscellaneous Revenue	Business Code				
	11a OTHER INCOME	900099	609,256			609,256
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a–11d ▶		609,256			
	12 **Total revenue.** See Instructions ▶		31,685,000	326,297	0	10,278,570

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☑

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,195,957	1,195,957		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,566,600	639,783	614,552	312,265
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,072,713	2,115,058	620,988	1,336,667
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	190,170	98,061	26,758	65,351
9 Other employee benefits	467,772	241,972	72,745	153,055
10 Payroll taxes	279,400	145,027	42,521	91,852
11 Fees for services (non-employees)				
a Management				
b Legal	395,962	386,120	9,842	
c Accounting	49,344		49,344	
d Lobbying	73,450	73,450		
e Professional fundraising services See Part IV, line 17				
f Investment management fees	402,937		402,937	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,992,233	2,046,982	570,316	374,935
12 Advertising and promotion				
13 Office expenses	363,233	113,256	24,156	225,821
14 Information technology	82,641	41,166	14,490	26,985
15 Royalties . .				
16 Occupancy	54,999	54,999		
17 Travel	33,356	15,599	14,227	3,530
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	131,531	66,257	35,703	29,571
20 Interest	45,358	9,727	35,631	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization . .	168,189	83,361	29,636	55,192
23 Insurance . . .	93,647	66,704	26,943	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a LAND/EASEMENT TRANSACTI	11,598,082	11,598,082		
b LAND MAINTENANCE	1,860,256	1,855,658	2,071	2,527
c PROPERTY TAXES	293,237	289,902		3,335
d LOSS ON LOAN	279,709	279,709		
e All other expenses	433,451	222,481	18,829	192,141
25 **Total functional expenses.** Add lines 1 through 24e	27,124,227	21,639,311	2,611,689	2,873,227
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing			1	
	2	Savings and temporary cash investments		821,366	2	769,161
	3	Pledges and grants receivable, net		6,870,559	3	2,738,009
	4	Accounts receivable, net		1,416,385	4	1,145,387
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		21,600,000	7	24,236,657
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		358,552	9	299,966
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 6,654,745			
	b	Less accumulated depreciation	10b 1,466,364	5,325,155	10c	5,188,381
	11	Investments—publicly traded securities		165,970,677	11	174,429,985
	12	Investments—other securities See Part IV, line 11		7,597,125	12	7,641,276
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		103,838,790	15	99,326,260
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		313,798,609	16	315,775,082
Liabilities	17	Accounts payable and accrued expenses		1,676,600	17	1,840,604
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		3,895,534	23	3,851,099
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		6,376,691	25	6,093,600
	26	**Total liabilities.** Add lines 17 through 25		11,948,825	26	11,785,303
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		289,451,830	27	295,084,270
	28	Temporarily restricted net assets		11,847,454	28	8,355,009
	29	Permanently restricted net assets		550,500	29	550,500
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	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 funds			32	
	33	Total net assets or fund balances		301,849,784	33	303,989,779
	34	Total liabilities and net assets/fund balances		313,798,609	34	315,775,082

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	31,685,000
2	Total expenses (must equal Part IX, column (A), line 25)	2	27,124,227
3	Revenue less expenses Subtract line 2 from line 1	3	4,560,773
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	301,849,784
5	Net unrealized gains (losses) on investments	5	-2,420,778
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	303,989,779

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		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		

Additional Data

Software ID:
Software Version:
EIN: 94-2392007
Name: PENINSULA OPEN SPACE TRUST

Form 990 (2018)

Form 990, Part III, Line 4a:

LAND ACQUISITION AND TRANSFER IN FISCAL YEAR 2019, POST CONTINUED TO ADDRESS URGENT CONSERVATION NEEDS BY COMPLETING EIGHT (8) LAND TRANSACTIONS, BRINGING OUR TOTAL PROTECTED ACRES TO 77,531 ACRES IN AUGUST 2018, POST TRANSFERRED THE APPROXIMATELY 10-ACRE PROPERTY, KNOWN AS VIDA VERDE, LOCATED IN SAN MATEO COUNTY, TO THE NON-PROFIT VIDA VERDE NATURE EDUCATION THE TWO HOUSES LOCATED ON THE PROPERTY WILL SERVE AS SUPPORT STAFF HOUSING FOR THE NON-PROFIT WHOSE MISSION IS "TO PROMOTE EDUCATIONAL EQUITY BY PROVIDING FREE, OVERNIGHT ENVIRONMENTAL LEARNING EXPERIENCES FOR STUDENTS WHO DON'T OTHERWISE GET THE OPPORTUNITY " THE PROPERTY CONTAINS A SEGMENT OF SAN GREGORIO CREEK WHICH IS PROTECTED BY A RIPARIAN CONSERVATION EASEMENT HELD BY MROSD IN NOVEMBER 2018, POST PARTNERED WITH THE SANTA CLARA VALLEY OPEN SPACE AUTHORITY (OSA) AND ASSISTED IN THE PROTECTION OF APPROXIMATELY 159 ACRES OF OPEN SPACE, KNOWN AS THE GEIGER PUNCH BOWL, IN THE COUNTY OF SANTA CLARA POST ENTERED INTO THE PURCHASE AND SALE AGREEMENT WITH THE GEIGER FAMILY TRUST AND LATER TRANSFERRED THE PURCHASE AND SALE AGREEMENT TO THE OSA THE OSA CLOSED ON THE PROPERTY TAKING FEE TITLE TO THE LAND THE PROPERTY FEATURES DIVERSITY IN TOPOGRAPHY AND NATIVE HABITAT TYPES, INCLUDING SERPENTINE HARDWOODS, OAK WOODLAND, AND CALIFORNIA BAY LAUREL FORESTS THE PROTECTION OF THE PROPERTY SECURED CONNECTIVITY BETWEEN THE RANCHO CANADA DEL ORO OPEN SPACE PRESERVE AND THE SIERRA AZUL OPEN SPACE PRESERVE, AS WELL AS BEING DIRECTLY ADJACENT TO BARRETT CREEK CANYON AND TWIN CREEKS PROTECTED IN FY 2018 IN JANUARY 2019, POST TRANSFERRED THE APPROXIMATELY 326 ACRES, KNOWN AS BARRETT CANYON AND LOCATED IN SANTA CLARA COUNTY, TO THE SANTA CLARA VALLEY OPEN SPACE AUTHORITY BARRETT CANYON SERVES AS A LYNCHPIN FOR CONNECTING AND CLOSING THE GAP BETWEEN THREE PARKS, SIERRA AZUL OPEN SPACE PRESERVE, ALMADEN QUICKSILVER COUNTY PARK, AND RANCHO CANADA DEL ORO OPEN SPACE PRESERVE, FURTHER ENHANCING AN IMPORTANT EAST-WEST WILDLIFE TRAIL CORRIDOR IN MARCH 2019, POST ACQUIRED APPROXIMATELY 615 ACRES OF REDWOOD FOREST, KNOWN AS VALENCIA CREEK FOREST, LOCATED IN THE COUNTY OF SANTA CRUZ IDENTIFIED AS "HIGHLY SUITABLE FOR CONSERVATION" BY THE CONSERVATION LANDS NETWORK, THE PROPERTY IS ONE OF THE 10 LARGEST PRIVATELY-HELD TRACTS OF REDWOODS IN SANTA CRUZ COUNTY AND CONTAINS THE UPPER REACHES OF VALENCIA CREEK WHICH PROVIDES DRINKING WATER TO THE TOWN OF APTOS THE CREEK HAS THE POTENTIAL TO BE RESTORED AS STEELHEAD AND COHO SALMON HABITAT IN MARCH 2019, POST ACQUIRED APPROXIMATELY 320 ACRES OF REDWOOD FOREST, KNOWN AS GAZOS CREEK REDWOODS, LOCATED IN THE COUNTY OF SAN MATEO FROM VALENCIA CREEK FOREST, LLC, AN ENTITY AFFILIATED WITH BIG CREEK LUMBER GAZOS CREEK REDWOODS IS LOCATED WITHIN THE PRISTINE AND UNDEVELOPED GAZOS CREEK WATERSHED AND ABUTS BUTANO STATE PARK THE WATERSHED HAS BEEN IDENTIFIED BY THE STATE COASTAL CONSERVANCY AND THE CALIFORNIA DEPARTMENT OF FISH AND WILDLIFE AS AN IMPORTANT HABITAT FOR ENDANGERED COHO SALMON AND STEELHEAD TROUT THE PROPERTY CONTAINS SEVERAL ACRES OF OLD GROWTH REDWOODS WHICH PROVIDE SUITABLE HABITAT FOR THE FEDERALLY PROTECTED SPECIES MARBLED MURRELET, WHICH HAVE BEEN OBSERVED NESTING ON THE PROPERTY IN MARCH 2019, POST TRANSFERRED THE APPROXIMATELY 615-ACRE REDWOOD FOREST, KNOWN AS VALENCIA CREEK FOREST AND LOCATED IN THE COUNTY OF SANTA CRUZ, TO VALENCIA CREEK FOREST, LLC, AN ENTITY AFFILIATED WITH BIG CREEK LUMBER IN CONJUNCTION WITH THIS TRANSFER, POST RECORDED A WORKING FOREST CONSERVATION EASEMENT (WFCE), THE FIRST OF ITS KIND OVER LAND OWNED BY A TIMBER COMPANY IN THE SANTA CRUZ MOUNTAINS THE WFCE REMOVES THE POTENTIAL FOR DEVELOPMENT OF UP TO 11 HOMES, REQUIRES SUSTAINABLE TIMBER HARVEST BELOW ALLOWABLE LEVELS UNDER CA STATE LAWS, AND SETS ASIDE A 13-ACRE OLD GROWTH RESERVE AREA CONTAINING 100-YEAR OLD REDWOOD TREES WHERE NO HARVESTING IS ALLOWED IN MAY 2019, POST, IN PARTNERSHIP WITH SEMPERVIRENS FUND, ACQUIRED APPROXIMATELY 320 ACRES OF REDWOOD FORESTS IN THE SANTA CRUZ MOUNTAINS, KNOWN AS THE FILICE RANCH, AND FILLED IN A SIGNIFICANT INHOLDING OF SAN VICENTE REDWOODS THE PROPERTY IS NOW JOINTLY HELD BETWEEN SEMPERVIRENS FUND AND POST THE PROPERTY IS AT THE HEADWATERS OF SCOTT CREEK AND CONTAINS A DIVERSITY OF HABITAT TYPES RANGING FROM REDWOODS, GRASSLAND, TO OAK TREES IN MAY 2019, POST TRANSFERRED THE APPROXIMATELY 32 ACRES OF FARMLAND ADJACENT TO THE ANDREOTTI FAMILY FARM LOCATED IN SAN MATEO COUNTY SIMULTANEOUSLY, WITH THE TRANSFER TO THE ANDREOTTI FAMILY FARM, POST RECORDED AN AGRICULTURAL CONSERVATION EASEMENT THAT ENCUMBERED THE TRANSFERRED LAND ALONG WITH AN ADDITIONAL 37 ACRES OWNED BY THE ANDREOTTI'S THIS PROTECTION OF FARMLAND ENSURES THAT THE ANDREOTTI FAMILY FARM, AND FUTURE FARMERS, CAN CONTINUE AGRICULTURAL ACTIVITIES AT THIS UNIQUE LOCATION WITHIN THE CITY LIMITS OF HALF MOON BAY IN JUNE 2019, POST PARTNERED WITH THE SANTA CLARA VALLEY OPEN SPACE AUTHORITY (OSA) AND ASSISTED IN THE PROTECTION OF APPROXIMATELY 242 ACRES IN SANTA CLARA COUNTY, CONTRIBUTING FUNDS TO THE ACQUISITION BY THE OSA THE PROPERTY IS ADJACENT TO THE GEIGER PUNCH BOWL PROPERTY ACQUIRED IN 2018 BY THE OSA THE PROTECTION OF THE PROPERTY FURTHER SECURES THE CONNECTION BETWEEN RANCHO CANADA DEL ORO OSP AND THE SIERRA AZUL OSP AS WELL AS CONTAINS PRIORITY FOCAL GEOGRAPHIES KEY FOR THE WILDLIFE LINKAGES PROGRAM THE PROPERTY FEATURES DIVERSITY OF TOPOGRAPHY AND NATIVE HABITAT TYPES INCLUDING, SERPENTINE, OAK WOODLAND AND CALIFORNIA BAY LAUREL FOREST

Form 990, Part III, Line 4b:

LAND MANAGEMENT POST CURRENTLY HOLDS 19,429 ACRES IN FEE OWNERSHIP AND HOLDS CONSERVATION EASEMENTS AND DEED RESTRICTIONS ON 14,458 ACRES THE ORGANIZATION HAS AN ESTABLISHED STEWARDSHIP PROGRAM FOR THE LANDS IT OWNS THAT INCLUDES RESOURCE CONSERVATION PLANNING AND MANAGEMENT, ALONG WITH ACTIVE USES OF LAND FOR CONSERVATION GRAZING AND AGRICULTURE, SUSTAINABLE FOREST MANAGEMENT AND RESTORATION WHERE APPROPRIATE, AND DEVELOPMENT OF COMPATIBLE RECREATIONAL OPPORTUNITIES POST WORKS TO PROTECT AND MANAGE LANDS IN ITS POSSESSION THROUGH SITE-SPECIFIC STEWARDSHIP PLANS FOR 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 IN TOTAL, POST STEWARDSHIP VOLUNTEERS CONTRIBUTED AN IMPRESSIVE 1,314 HOURS OF WORK TIME IN 2019 MONITORING POST-OWNED LANDS, PARTICIPATING IN HIGHWAY CLEAN-UPS, AND MAPPING AND TREATING INVASIVE PLANTS THAT DEGRADE NATURAL SYSTEMS THROUGHOUT OUR WORKING AREA OTHER LAND MANAGEMENT ACCOMPLISHMENTS ACROSS PROGRAMS INCLUDE THE FOLLOWING - FARMLAND- FARMWORKER HOUSING IN CONJUNCTION WITH THE SAN MATEO COUNTY FARMWORKER HOUSING PILOT PROGRAM AND FARMERS, POST BEGAN PLANNING AND PERMITTING FARMWORKER HOUSING PROJECTS ON TWO POST-OWNED FARMS THIS SUPPORTS OUR GOAL OF PRESERVING AGRICULTURAL LAND WHILE ALSO PROVIDING THE NECESSARY INFRASTRUCTURE ON THOSE LANDS FOR FARMING OPERATIONS CONFINED TO A SMALL FOOTPRINT WITHIN THE PROPERTY, THE HOUSING PROJECTS HELP ENSURE THAT FARMERS CAN RETAIN TRAINED FARMWORKERS CRITICAL TO THEIR ONGOING OPERATIONS IN A REGION WHERE THERE IS A SIGNIFICANT SHORTAGE OF FARM LABOR HOUSING - AGRICULTURAL WATER SUPPLY SUSTAINABILITY IN PARTNERSHIP WITH THE SAN MATEO COUNTY RESOURCE CONSERVATION DISTRICT (RCD), POST COMPLETED EXPANSION OF AN AGRICULTURAL RESERVOIR ON SAN GREGORIO FARMS THIS PROJECT NOT ONLY ENHANCES THE RESILIENCY OF THE FARMING OPERATION TO DROUGHT, IT ALSO IMPROVES CONDITIONS FOR ANADROMOUS FISH IN THE ADJACENT CREEK BY REQUIRING THE FARMER TO STOP WITHDRAWALS FROM THE CREEK FOR THREE MONTHS IN THE DRY SUMMER SEASON, SOMETHING THAT IS ONLY POSSIBLE WITH THE EXPANDED CAPACITY OF THE NEW RESERVOIR PLANNING AND PERMITTING WERE COMPLETED FOR A SECOND AGRICULTURAL POND AT POST'S BUTANO FARMS, CONSTRUCTION IS UNDERWAY AND COMPLETED IN THE SUMMER OF 2019 IN ADDITION TO INCREASING THE SUSTAINABILITY OF THE ORGANIC FARMING OPERATION AT BUTANO FARMS, THIS POND WILL ALSO PROVIDE MUCH NEEDED WATER FOR CATTLE ON ADJACENT GRAZING LAND ON POST'S PROPERTY - ADDITIONAL AGRICULTURAL INFRASTRUCTURE POST PARTNERED WITH FARMERS AND RANCHERS ON POST LANDS TO RESTORE TWO BARNS (ONE WAS COMPLETED AND A SECOND IS UNDERWAY) AND PERMIT TWO FARM STANDS THESE STRUCTURES ARE ESSENTIAL FOR ENSURING LONG-TERM SUSTAINABILITY OF AGRICULTURAL OPERATIONS ON THE COAST, BY ALLOWING TENANTS TO GROW THEIR OPERATIONS AND DIVERSIFY THEIR BUSINESSES WITH MORE CUSTOMER-ORIENTED SERVICES - PUBLIC ACCESS - TUNITAS CREEK BEACH IN PARTNERSHIP WITH SAN MATEO COUNTY, POST CONTINUED PLANNING FOR SAFE AND SUSTAINABLE PUBLIC ACCESS AT TUNITAS CREEK BEACH THE COUNTY CONTINUES TO MANAGE THE BEACH, SIGNIFICANTLY REDUCING ILLEGAL ACTIVITIES THAT WERE DEGRADING THE COASTAL BLUFFS, TUNITAS CREEK, AND HABITAT ON THE BEACH FOR ENDANGERED SNOWY PLOVER WE ALSO CONVENED A COMMUNITY ADVISORY COMMITTEE COMPRISED OF 14 COMMUNITY MEMBERS REPRESENTING A BROAD SPECTRUM OF STAKEHOLDERS ON THE SAN MATEO COAST THE COMMITTEE MET MONTHLY OVER SIX MONTHS AND PROVIDED VALUABLE INPUT ON PRIORITY ISSUES TO ADDRESS IN OUR PLANNING PROCESS AT TUNITAS CREEK BEACH THE COUNTY, WITH INPUT FROM POST AND THE STATE COASTAL CONSERVANCY, HIRED A CONSULTING FIRM TO LEAD THIS PLANNING PROCESS, WHICH WILL LAUNCH EARLY IN FY20 - BAY TO SEA TRAIL POST INITIATED THE DEVELOPMENT OF A BAY TO SEA TRAIL PLANNING COALITION TO BRING TOGETHER THE CRITICAL PARTNERS NEEDED TO TURN THIS PROJECT'S CONCEPT INTO AN ORGANIZED PLANNING EFFORT POST FACILITATED REGULAR MEETINGS OF THE PLANNING COALITION WHICH IS MADE UP OF TEN (10) LAND MANAGEMENT AGENCY AND ORGANIZATION PARTNERS TOGETHER WE DEVELOPED A PROJECT CHARTER DOCUMENTING A SHARED PROJECT VISION AND A LETTER OF INTENT DOCUMENTING A SHARED (NON-BINDING) AGREEMENT TO COLLABORATE ON THE PLANNING, DESIGN AND DEVELOPMENT OF THIS MULTI-DECADE TRAIL PROJECT - REDWOODS - SAN VICENTE REDWOODS RESTORATION PROJECTS POST COMPLETED RESTORATION FORESTRY TREATMENTS ON ABOUT 200-ACRES IN THE DEADMAN GULCH THIS TREATMENT WILL HELP ACCELERATE THE DEVELOPMENT OF OLD-GROWTH FOREST CONDITIONS ON THE PROPERTY THAT PROVIDE CRITICAL HABITAT FOR ENDANGERED MARBLED MURRELET, A RARE SEABIRD THAT NESTS ON THE LIMBS OF LARGE OLD TREES OTHER RESTORATION EFFORTS INCLUDE IMPLEMENTATION OF THE SECOND YEAR (OF THREE) OF A MAJOR INVASIVE SPECIES ERADICATION EFFORT TO ELIMINATE CLEMATIS VITALBA, A PERNICIOUS WEEDY VINE THAT FORMS DENSE MATS AND BLANKETS TREES AND IS KNOWN ONLY TO BE PRESENT ONLY IN THIS WATERSHED AND ONE OTHER IN CALIFORNIA UPGRADES TO IMPROVE ACCESS AND REDUCE SEDIMENTATION IN STREAMS WERE MADE TO OVER SIX MILES OF ROADS USING RECYCLED WASTE ROCK FROM AN OLD QUARRY ON THE PROPERTY, SIGNIFICANTLY REDUCING BOTH COSTS AND CARBON EMISSIONS ASSOCIATED WITH THE PROJECT - WILDLIFE LINKAGES- BARRETT CANYON INITIATED RESTORATION OF THE BARRETT CREEK WATERSHED THROUGH THE REMOVAL OF 4 ABANDONED AND DEGRADED UNPERMITTED CABINS ALONG THE CREEK REMOVAL OF THESE STRUCTURES REDUCES MAJOR SOURCES OF POTENTIAL CONTAMINATION TO THE PERENNIAL STREAM ADJACENT TO RANCHO CANADA DEL ORO - WILDLIFE STUDIES POST COMPLETED ITS TWO-YEAR STUDY WITH THE UC-SANTA CRUZ PUMA PROJECT AND PATHWAYS FOR WILDLIFE TO TRACK THE MOVEMENT OF BOBCATS IN AND AROUND COYOTE VALLEY USING TELEMETRY AND CAMERA TRACKING IN ADDITION, POST LAUNCHED A SECOND MULTI-YEAR WILDLIFE CONNECTIVITY STUDY WITH NUMEROUS PARTNERS TO BETTER UNDERSTAND WILDLIFE MOVEMENT WITHIN AND TO/FROM THE SOUTHERN SANTA CRUZ MOUNTAINS THE INFORMATION GATHERED THROUGH THESE STUDIES IS PROVIDING ESSENTIAL DATA TO DRIVE OUR CONSERVATION STRATEGIES AND INVESTMENTS IN THIS AREA FINALLY, WE INSTALLED A WILDLIFE CAMERA ARRAY AS WELL AS A SERIES OF ACOUSTIC MONITORING STATIONS AT SAN VICENTE REDWOODS IN ORDER TO PROVIDE US WITH BASELINE DATA ABOUT WILDLIFE POPULATIONS ON THE PROPERTY IN ADVANCE OF THE INTRODUCTION OF PUBLIC ACCESS WITHIN THE NEXT COUPLE OF YEARS THE MONITORING WILL CONTINUE FOR SEVERAL YEARS ALLOWING US TO MONITOR CHANGES OVER TIME AND ADAPTIVELY MANAGE PUBLIC ACCESS ON THE PROPERTY TO MINIMIZE IMPACTS ON LOCAL WILDLIFE POPULATIONS - MONTEREY ROAD WILDLIFE CONNECTIVITY ASSESSMENT POST COMPLETED A REPORT ASSESSING THE IMPACT A REGIONAL HIGHWAY HAS ON WILDLIFE RESEARCH HAS ILLUSTRATED THAT MONTEREY ROAD, A FOUR-LANE ROAD RUNNING PARALLEL TO HIGHWAY 101, IS THE GREATEST THREAT TO WILDLIFE THE REPORTPROVIDES DATA-DRIVEN RECOMMENDATIONS TO REDUCE WILDLIFE-VEHICLE COLLISIONS AND BOLSTER THE ECOLOGICAL HEALTH OF OUR REGION

Form 990, Part III, Line 4c:

COMMUNITY OUTREACH AND EDUCATION TO FURTHER OUR COMMUNITY GROWTH AND ENGAGEMENT EFFORTS, IN FISCAL YEAR 2019 THE ORGANIZATION CONTINUED OUR CONTENT MARKETING PROGRAMS AND COMMUNITY ENGAGEMENT PROGRAMS IN ORDER TO GROW OUR COMMUNITY AND ENGAGE PROSPECTIVE DONORS BETWEEN NEW PIECES, AND REVISIONS TO EXISTING CONTENT, WE CIRCULATED OVER 40+ INFORMATIONAL PIECES INCLUDING GUIDES, BLOG POSTS, AND PRESS RELEASES IN THIS WAY, WE ATTRACTED OVER 33,000 NEW COMMUNITY MEMBERS TO OUR EMAIL LIST ADDITIONALLY, WE IMPLEMENTED TWO ALL-DIGITAL DONOR CONVERSION CAMPAIGNS USING OUR NEW SALESFORCE AND PARDOT MARKETING AUTOMATION PLATFORM OUR AUGUST 2019 ALL DIGITAL 100 DONOR CHALLENGE CAMPAIGN WAS TARGETED AT 42,000 NAMES IN OUR DATABASE AND DELIVERED A 55% DONOR CONVERSION RATE NEARLY DOUBLE THE RATE WE SAW IN FY 18 THE CAMPAIGN GENERATED 233 GIFTS A SMALL DIGITAL CAMPAIGN WAS INCLUDED IN OUR FISCAL YEAR END MATCH CAMPAIGN WHICH CONTRIBUTED 9 NEW DONORS AND $1,635 IN GIFTS COMMUNITY MEMBERS AND DONORS CONTINUED TO BENEFIT AND STAY CONNECTED TO POST THROUGHOUT THE YEAR VIA OUR MONTHLY NEWSLETTERS AND OUTREACH EVENTS WE HOSTED OVER 50 OUTREACH EVENTS OF VARIOUS TYPES (SPONSORED EVENTS, HIKES, FAMILY EVENTS AND OTHERS) AT WHICH WE MET OVER 6,300 COMMUNITY MEMBERS AND DONORS, 4,900 OF WHICH WERE BRAND NEW TO POST THIS INCLUDES OUR ANNUAL WALLACE STEGNER LECTURE SERIES WHICH IN 2019 INCLUDED PRIZE WINNING AUTHOR VANDANA SHIVA, NATIONAL GEOGRAPHIC PHOTOGRAPHER AND FOUNDER OF THE PHOTO ARC PROJECT, JOEL SARTORE, AND CNN COMMENTATOR AND AUTHOR VAN JONES WE MET OVER 1,600 INDIVIDUALS AT THESE LECTURES OUR PUBLIC RELATIONS EFFORTS RESULTING IN POST APPEARING ON THE FRONT PAGE OF 3 LOCAL PAPERS (SAN JOSE MERCURY NEWS, SAN MATEO DAILY JOURNAL, AND HALF MOON BAY REVIEW) 6 TIMES IN FY 2019 WITH OUR ANNOUNCEMENTS OF THE VALENCIA AND GAZOS CREEK PROPERTIES, FARM LABOR HOUSING AND THE ANDREOTTI FARM TRANSACTION WE BENEFITED FROM 7 DIFFERENT TELEVISION STORIES ABOUT THE SAME STORIES POST ALSO PRODUCED AND DELIVERED THREE ISSUES OF OUR LANDSCAPES MAGAZINE THIS YEAR AND DISTRIBUTED EACH TO OVER 9,200 DONORS

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
DENNIS DEBROECK CHAIRMAN & DIRECTOR	5 00	X		X				0	0	0
KIM YOUNG DIRECTOR	3 00	X						0	0	0
ANDREW BOSWORTH VICE CHAIRMAN & DIRECTOR	3 00	X		X				0	0	0
BRAD O'BRIEN DIRECTOR	4 00	X						0	0	0
CHRISTY HOLLOWAY DIRECTOR	2 00	X						0	0	0
JOHN CHAMBERLAIN DIRECTOR	3 00	X						0	0	0
JAN GARROD DIRECTOR	4 00	X						0	0	0
JEN LYNCH DIRECTOR	3 00	X						0	0	0
MATT MILLER DIRECTOR	4 00	X						0	0	0
RAJ MASHRUWALA DIRECTOR	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
ROD FERGUSON DIRECTOR	2 00	X						0	0	0
SANJAY VASWANI DIRECTOR	2 00	X						0	0	0
SANDI THOMPSON DIRECTOR	3 00	X						0	0	0
EMERICK WOODS DIRECTOR	2 00	X						0	0	0
SEAN DEMPSEY DIRECTOR	3 00	X						0	0	0
SUZANNE SULLIVAN DIRECTOR	3 00	X						0	0	0
WENDE HUTTON DIRECTOR	2 00	X						0	0	0
KARIE THOMSON SECRETARY	1 00			X				0	0	0
WALTER T MOORE PRESIDENT	40 00			X				320,002	0	53,134
HEATHER KANTOR TREASURER & CFO (TO JULY '18)	40 00			X				372,505	0	45,037

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
CURTIS RIFFLE VICE PRESIDENT, LAND STEWA	40 00			X				240,854	0	13,515
MARTHA TEDESCO VICE PRESIDENT OF MARKETIN	40 00			X				178,442	0	52,100
GORDON CLARK SENIOR DIRECTOR OF DEVELOP	40 00			X				175,853	0	29,745
MARK STEVENS TREASURER & CFO (FROM OCT '18)	40 00			X				52,948	0	2,502
DIANE CORDOVA CHIEF TALENT OFFICER	34 00					X		151,868	0	22,425
DAN OLSTEIN DIRECTOR OF LAND PROGRAMS	40 00					X		129,231	0	20,941
NOELLE THURLOW DIRECTOR OF LAND PROGRAMS	40 00					X		136,241	0	25,261
JEANINE CRIDER DIRECTOR OF PLANNED GIVING	40 00					X		136,225	0	24,735
JENNIFER KOEPCKE DIRECTOR OF INSTITUTIONAL ENGAGEMENT	40 00					X		132,769	0	14,805

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170 (b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university

10 ☐ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

12 ☐ 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations

g Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 10 above (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170 (b)(1)(A)(ix)**

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	**(a)** 2014	**(b)** 2015	**(c)** 2016	**(d)** 2017	**(e)** 2018	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	6,067,462	16,588,517	8,893,966	18,040,772	21,080,133	70,670,850
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	6,067,462	16,588,517	8,893,966	18,040,772	21,080,133	70,670,850
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,631,002
6 **Public support.** Subtract line 5 from line 4						64,039,848

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	**(a)**2014	**(b)**2015	**(c)**2016	**(d)**2017	**(e)**2018	**(f)**Total
7 Amounts from line 4	6,067,462	16,588,517	8,893,966	18,040,772	21,080,133	70,670,850
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,067,889	3,349,902	3,959,129	4,707,962	4,629,178	19,714,060
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support.** Add lines 7 through 10						90,384,910

12 Gross receipts from related activities, etc (see instructions) | **12** |

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	**14**	70 850 %
15 Public support percentage for 2017 Schedule A, Part II, line 14	**15**	68 760 %

16a **33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33 1/3% support test—2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2018** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2017** Schedule A, Part III, line 17	18	

19a **331/3% support tests—2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in **Part VI** how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization made the determination*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI,** including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in **Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in **Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)*	10b		

Part IV **Supporting Organizations** (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI*	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s)*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

- **a** ☐ The organization satisfied the Activities Test Complete **line 2** below
- **b** ☐ The organization is the parent of each of its supported organizations Complete **line 3** below
- **c** ☐ The organization supported a governmental entity Describe in **Part VI** how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	**2b**		
3	Parent of Supported Organizations **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in **Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in **Part VI.** the role played by the organization in this regard*	**3b**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in **Part VI**) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 $			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 **Excess distributions carryover to 2019.** Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:
Software Version:
EIN: 94-2392007
Name: PENINSULA OPEN SPACE TRUST

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

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.
▶Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No 1545-0047

2018

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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization
PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ $

3 Volunteer hours for political campaign activities (see instructions)

Part 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 ▶ $

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

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

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 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments 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)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	73,450	
c	Total lobbying expenditures (add lines 1a and 1b)	73,450	
d	Other exempt purpose expenditures	27,050,777	
e	Total exempt purpose expenditures (add lines 1c and 1d)	27,124,227	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	

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

		(a)	(b)
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, enter -0-	0	
i	Subtract line 1f from line 1c If zero or less, enter -0-	0	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)** 2015	**(b)** 2016	**(c)** 2017	**(d)** 2018	**(e)** Total
2a	Lobbying nontaxable amount	790,107	894,073	825,560	1,000,000	3,509,740
b	Lobbying ceiling amount (150% of line 2a, column(e))					5,264,610
c	Total lobbying expenditures	62,000	62,000	262,000	73,450	459,450
d	Grassroots nontaxable amount	197,527	223,518	206,390	250,000	877,435
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,316,153
f	Grassroots lobbying expenditures					

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

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

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

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

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

Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
FORM 990, SCHEDULE C, PART II-A	$49,950 FOR SAN JOSE MEASURE T - SAFER SAN JOSE, $5,000 FOR CONSERVATION ACTION FUND POLLING ON SB45 FRAMING LANGUAGE AND $18,500 PAYMENT TO LOBBYING CONSULTANTS

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☑ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☑ Protection of natural habitat
☐ Preservation of a certified historic structure
☑ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	35
b	Total acreage restricted by conservation easements	2b	14,371 60
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶ 1

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☑ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 1354 00

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ 69,703

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $

(ii) Assets included in Form 990, Part X ▶ $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $

b Assets included in Form 990, Part X ▶ $

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
d ☐ Loan or exchange programs
b ☐ Scholarly research
e ☐ Other
c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ **Yes** ☐ **No**

Part IV Escrow and Custodial Arrangements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	758,252	717,950	676,966	697,739	705,715
b Contributions					
c Net investment earnings, gains, and losses	33,030	61,902	63,058	164	17,414
d Grants or scholarships					
e Other expenditures for facilities and programs	23,787	21,600	22,074	20,937	25,390
f Administrative expenses					
g End of year balance	767,495	758,252	717,950	676,966	697,739

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶ 72 000 %

c Temporarily restricted endowment ▶ 28 000 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,351,899		2,351,899
b Buildings		3,953,265	1,190,600	2,762,665
c Leasehold improvements				
d Equipment		332,045	275,764	56,281
e Other		17,536		17,536
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				5,188,381

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3)Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) OTHER RECEIVABLE	39,553
(2) ASSET OBLIGATION	1,603,780
(3) LAND HELD FOR CONSERVATION	97,682,927
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* . . . . ▶	99,326,260

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
AGENCY TRUST FUNDS	279,984
LIABILITY UNDER CRUT	3,053,790
ASSET RETIREMENT OBLIGATIONS	2,288,635
STEWARDSHIP LIABILITIES	471,191
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	6,093,600

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	28,993,434
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	-2,420,778		
b	Donated services and use of facilities	2b	132,149		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	-2,288,629
3	Subtract line **2e** from line **1**			3	31,282,063
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	402,937		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	402,937
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	31,685,000

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	26,853,439
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	132,149		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	132,149
3	Subtract line **2e** from line **1**			3	26,721,290
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	402,937		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	402,937
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	27,124,227

Part XIII Supplemental Information

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, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information *(continued)***

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 94-2392007
Name: PENINSULA OPEN SPACE TRUST

Supplemental Information

Return Reference	Explanation
PART II, LINE 5	POST MONITORS ALL OF ITS CONSERVATION EASEMENTS AT LEAST ANNUALLY IN ORDER TO 1) OBSERVE THE CONDITION OF THE PROPERTY IN ORDER TO DETERMINE WHETHER IT IS IN COMPLIANCE WITH EASEMENT TERMS, 2) CREATE A RECORD OF EASEMENT STEWARDSHIP AND PROPERTY CONDITION OVER TIME, AND 3) MAINTAIN A WORKING RELATIONSHIP WITH THE LANDOWNER IT IS POST'S POLICY TO UPHOLD ITS CONSERVATION EASEMENTS AS WRITTEN AND TO IDENTIFY, INVESTIGATE, EVALUATE AND RESPOND TO ANY POTENTIAL VIOLATIONS AS QUICKLY AS POSSIBLE IN THE CASE OF A MATERIAL VIOLATION, POST WILL REQUIRE CESSATION, REPAIR, AND/OR MITIGATION OF ANY DAMAGE TO PROTECTED CONSERVATION VALUES POST IS PREPARED TO TAKE LEGAL ACTION TO DEFEND ITS RIGHTS AS EASEMENT HOLDER IF NECESSARY POST HAS A CONSERVATION EASEMENT STEWARDSHIP FUND TO PROVIDE RESOURCES FOR LEGAL DEFENSE AND MAINTAINS CONSERVATION DEFENSE INSURANCE THROUGH TERRAFIRMA RRG LLC CONSERVAT ION EASEMENT DOCUMENTS CLEARLY DESCRIBE THE PROCESS FOR ENFORCING THE TERMS OF THE EASEMENT SHOULD ANY VIOLATION BE IDENTIFIED TO ENSURE THAT CORRECTIVE ACTIONS ARE TAKEN TO CURE THE VIOLATION

Supplemental Information

Return Reference	Explanation
PART II, LINE 9	THE ORGANIZATION PERIODICALLY RECEIVES OR PURCHASES CONSERVATION EASEMENTS WHICH LIMIT THE ALLOWABLE USES OF THE RELATED PROPERTY TO OPEN SPACE USES CONSISTENT WITH THE ORGANIZATIO N'S MISSION CONTRIBUTED CONSERVATION EASEMENTS RECEIVED ARE RECORDED AS LAND CONTRIBUTION S BASED ON THE ESTIMATED VALUE GIVEN UP BY THE LAND OWNER BY RESTRICTING THE USE OF THE PR OPERTY WITH AN EASEMENT CONSERVATION EASEMENTS PURCHASED BEAR NO FUTURE BENEFIT TO THE OR GANIZATION AND ARE THEREFORE INCLUDED AS PART OF LAND AND EASEMENT TRANSACTIONS EXPENSE IN THE YEAR THEY ARE ACQUIRED IN CONNECTION WITH THE TRANSFER OR SALE OF LAND, THE ORGANIZA TION MAY RETAIN A CONSERVATION EASEMENT ON THE LAND BECAUSE THESE EASEMENTS BEAR NO POSSI BLE FUTURE FINANCIAL BENEFIT TO THE ORGANIZATION, THEY ARE NOT RECORDED ON THE ORGANIZATIO N'S STATEMENT OF FINANCIAL POSITION SOMETIMES, THE ORGANIZATION MAY SELL A CONSERVATION E ASEMENT TO A NONPROFIT OR PUBLIC AGENCY PARTNER WHILE RETAINING OWNERSHIP OF THE PROPERTY

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	LANE STEWARDSHIP ENDOWMENT THESE FUNDS MAY BE USED FOR EXPENSES TO MAINTAIN TRAILS, REMOV E INVASIVE AND EXOTIC SPECIES, UNDERTAKE EROSION PREVENTION AND REPAIR, AND RESTORE PLANT AND ANIMAL HABITATS WILBUR'S WATCH ENDOWMENT THIS GRANT IS RESTRICTED TO ACTIVITIES RELAT ED TO THE MAINTENANCE OF THE TRAIL AT WILBUR'S WATCH ON POST'S CLOVERDALE PROPERTY THIS I NCLUDES SUCH ITEMS AS ANNUAL STEWARDSHIP SUCH AS MOWING, PAMPAS GRASS REMOVAL, AND MONITOR ING, REPLACEMENT OF ITEMS SUCH AS THE BENCH, TELESCOPE, AND SIGNAGE, AND REPAIR OF THE TRA IL

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE ORGANIZATION EVALUATES ITS UNCERTAIN TAX POSITIONS AND WILL RECOGNIZE A LOSS CONTINGEN CY 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 I S SUBJECT TO ESTIMATE AND MANAGEMENT JUDGMENT WITH RESPECT TO THE LIKELY OUTCOME OF EACH U NCERTAIN 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 AMOUN T RECOGNIZED AS OF JUNE 30, 2019 MANAGEMENT DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section (if applicable)	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of noncash assistance	**(h)** Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 12

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 1

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	POST MONITORS THE USE OF GRANTS AND OTHER ASSISTANCE THROUGH CLOSE COORDINATION WITH THE GRANTEE TO ENSURE FUNDS ARE UTILIZED FOR THE INTENDED PURPOSE AS AGREED UPON BETWEEN THE ORGANIZATIONS IN SOME CASES, A GRANT AGREEMENT IS SIGNED BY BOTH PARTIES IN WHICH WE MAY REQUIRE THE GRANTEE TO SUBMIT UPDATES ON THE USE OF FUNDS BY SPECIFIC DATES IF A THIRD PARTY IS INVOLVED AS THE GRANTOR, AND POST SERVES AS THE PASS-THROUGH ENTITY, WE WILL MANAGE AND BE HELD RESPONSIBLE FOR THE REPORTING REQUIREMENTS SET BY THE GRANTOR

Additional Data

Software ID:
Software Version:
EIN: 94-2392007
Name: PENINSULA OPEN SPACE TRUST

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUENTE DE LA COSTA SUR PO BOX 554 PESCADERO, CA 94060	37-1484262	501C3	5,000				SUPPORT FOR PESCADERO GROWN FARMER'S MARKET AND 20TH ANNIVERSARY CELEBRATION
TRUST FOR CONSERVATION INNOVATION 405 14TH STREET SUITE 164 OAKLAND, CA 94612	91-2166435	501C3	5,000				SUPPORT FOR KITCHEN TABLE ADVISORS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PIE RANCH PO BOX 363 PESCADERO, CA 94060	26-1631976	501C3	5,000				SPONSORSHIP OF PIE ON THE RISE AND IN SUPPORT OF PUBLIC EDUCATION EFFORTS
SAN MATEO RESOURCE CONSERVATION DISTRICT 80 STONE PINE ROAD SUITE 100 HALF MOON BAY, CA 94019		GOVERMENT	43,000				SANTA CRUZ MOUNTAINS STEWARDSHIP NETWORK MEMBERSHIP/SUPPORT AND GENERAL OPERATIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA COUNCIL OF LAND TRUSTS 1029 J STREET SUITE 120 SACRAMENTO, CA 95814	01-0826246	501C3	5,000				SPONSORSHIP OF THE 2019 CALIFORNIA LAND CONSERVATION CONFERENCE
AMAH MUTSUN LAND TRUST 419 S SAN ANTONIO ROAD SUITE 211 LOS ALTOS, CA 94022	32-0447436	501C3	25,000				SUPPORTING THE PROTECTION OF JURISTAC

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LA HONDA PESCADERO UNIFIED SCHOOL DISTRICT PO BOX 189 PESCADERO, CA 94060	94-3138629	GOVERNMENT	55,319				SUPPORT FOR SCHOOLS IN LIEU OF PROPERTY TAXES
COMMITTEE FOR GREEN FOOTHILLS 3921 EAST BAYSHORE ROAD PALO ALTO, CA 94303	94-2223302	501C4	97,500				SPONSORSHIP NATURE'S INSPIRATION AND GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SILICON VALLEY BICYCLE COALITION PO BOX 1927 SAN JOSE, CA 95109	77-0338658	501C3	5,000				SPONSORSHIP OF THE 2019 BIKE SUMMIT
BAY AREA OPEN SPACE COUNCIL 2150 ALLSTON WAY STE 320 BERKELEY, CA 94704	46-1573954	501C3	25,000				GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOLDEN GATE NATIONAL PARKS CONSERVANCY 201 FORT MASON SAN FRANCISCO, CA 94123	94-2781708	501C3	25,000				SUPPORT FOR SAN MATEO COUNTYWIDE FINE SCALE VEGETATION MAP PROJECT
COASTSIDE LAND TRUST PO BOX 3205 HALF MOON BAY, CA 94019	94-3290067	501C3	90,000				SUPPORT FOR THE CA COASTAL TRAIL PLANNING EFFORTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SANTA CLARA VALLEY OPEN SPACE AUTHORITY 33 LAS COLINAS LANE SAN JOSE, CA 95119		GOVERNMENT	520,000	260,888	FMV PER APPRAISAL	GIFT OF LAND THROUGH BARGAIN SALE OF BARRETT CANYON PROPERTY	FINANCIAL SUPPORT FOR PROTECTION OF GEIGER PUNCH BOWL AND MARTINEZ PROPERTIES, SUPPORT FOR COYOTE VALLEY CONSERVATION EFFORTS

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☑ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," on line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 WALTER T MOORE PRESIDENT	(i)	301,038	0	18,964	16,200	36,934	373,136	0
	(ii)	0	0	0	0	0	0	0
2 HEATHER KANTOR TREASURER & CFO (TO JULY '18)	(i)	210,609	0	161,896	13,937	31,100	417,542	0
	(ii)	0	0	0	0	0	0	0
3 CURTIS RIFFLE VICE PRESIDENT, LAND STEWA	(i)	221,641	0	19,213	10,400	3,115	254,369	0
	(ii)	0	0	0	0	0	0	0
4 MARTHA TEDESCO VICE PRESIDENT OF MARKETIN	(i)	177,978	0	464	11,185	40,915	230,542	0
	(ii)	0	0	0	0	0	0	0
5 GORDON CLARK SENIOR DIRECTOR OF DEVELOP	(i)	157,256	0	18,597	9,500	20,245	205,598	0
	(ii)	0	0	0	0	0	0	0
6 DIANE CORDOVA CHIEF TALENT OFFICER	(i)	151,479	0	389	9,270	13,155	174,293	0
	(ii)	0	0	0	0	0	0	0
7 DAN OLSTEIN DIRECTOR OF LAND PROGRAMS	(i)	129,127	0	104	7,934	13,007	150,172	0
	(ii)	0	0	0	0	0	0	0
8 NOELLE THURLOW DIRECTOR OF LAND PROGRAMS	(i)	136,133	0	108	8,357	16,904	161,502	0
	(ii)	0	0	0	0	0	0	0
9 JEANINE CRIDER DIRECTOR OF PLANNED GIVING	(i)	136,128	0	97	7,916	16,819	160,960	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 1A	DIANE CORDOVA RESIDES IN A RESIDENCE, THE USE OF WHICH HAS BEEN DONATED TO POST FOR THIS PURPOSE THE IN-KIND VALUE OF HER HOUSING IS REPORTED AS TAXABLE INCOME POST HAS A WELLNESS REIMBURSEMENT PROGRAM WHICH PROVIDES REIMBURSEMENT OF GYM MEMBERSHIPS THESE REIMBURSEMENTS ARE TREATED AS TAXABLE INCOME

Additional Data

Software ID:
Software Version:
EIN: 94-2392007
Name: PENINSULA OPEN SPACE TRUST

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
WALTER T MOORE PRESIDENT	(i)	301,038	0	18,964	16,200	36,934	373,136	0
	(ii)	0	0	0	0	0	0	0
HEATHER KANTOR TREASURER & CFO (TO JULY '18)	(i)	210,609	0	161,896	13,937	31,100	417,542	0
	(ii)	0	0	0	0	0	0	0
CURTIS RIFFLE VICE PRESIDENT, LAND STEWA	(i)	221,641	0	19,213	10,400	3,115	254,369	0
	(ii)	0	0	0	0	0	0	0
MARTHA TEDESCO VICE PRESIDENT OF MARKETIN	(i)	177,978	0	464	11,185	40,915	230,542	0
	(ii)	0	0	0	0	0	0	0
GORDON CLARK SENIOR DIRECTOR OF DEVELOP	(i)	157,256	0	18,597	9,500	20,245	205,598	0
	(ii)	0	0	0	0	0	0	0
DIANE CORDOVA CHIEF TALENT OFFICER	(i)	151,479	0	389	9,270	13,155	174,293	0
	(ii)	0	0	0	0	0	0	0
DAN OLSTEIN DIRECTOR OF LAND PROGRAMS	(i)	129,127	0	104	7,934	13,007	150,172	0
	(ii)	0	0	0	0	0	0	0
NOELLE THURLOW DIRECTOR OF LAND PROGRAMS	(i)	136,133	0	108	8,357	16,904	161,502	0
	(ii)	0	0	0	0	0	0	0
JEANINE CRIDER DIRECTOR OF PLANNED GIVING	(i)	136,128	0	97	7,916	16,819	160,960	0
	(ii)	0	0	0	0	0	0	0

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Go to *www.irs.gov/Form990* for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	49	1,572,484	AVG HI/LOW GIFT DATE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other	X	3	3,740,000	APPRAISAL
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SUPPLIES)	X	4	4,063	MARKET VALUE
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	Yes	
b	If "Yes," describe in Part II			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	THREE PEOPLE DONATED WINE FOR EVENTS ONE PERSON DONATED A PIECE OF FURNITURE
PART I, LINE 32B	ALL MARKETABLE SECURITIES WILL BE SOLD UPON RECEIPT UNLESS OTHERWISE DIRECTED BY POST'S FINANCIAL ADVISORS OR THE INVESTMENT COMMITTEE OF POST'S BOARD OF DIRECTORS

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	JAN GARROD, DIRECTOR, IS THE UNCLE OF ANDREW BOSWORTH WHO IS ALSO A DIRECTOR

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	EACH YEAR, PRIOR TO SUBMISSION, THE AUDIT COMMITTEE SHALL ENSURE THAT POST'S FORM 990 IS R EVIEWED BY A MEMBER OF THE COMMITTEE OR A DESIGNEE OF THE COMMITTEE WITH APPROPRIATE QUALI FICATIONS IN ADDITION, THE DRAFT SUBMISSION WILL BE MADE AVAILABLE TO THE BOARD PRIOR TO FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	WHEN JOINING THE ORGANIZATION, AND ON AN ANNUAL BASIS, BOARD MEMBERS, MEMBERS OF THE INVES TMENT AND AUDIT COMMITTEES, AND ALL 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 PER SON MUST AMEND THE CONFLICT OF INTEREST STATEMENT ALL DISCLOSURE STATEMENTS SHALL BE REVI EWED BY THE CHAIR OF THE BOARD GOVERNANCE COMMITTEE AND PRESIDENT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	IT IS THE POLICY OF THE BUDGET & COMPENSATION COMMITTEE TO ANNUALLY REVIEW THE COMPENSATIO N OF ALL OFFICERS UTILIZING A COMPENSATION STUDY WITH MARKET DATA FROM BAY AREA COMPANIES THE COMMITTEE ALSO REVIEWS PUBLICLY REPORTED COMPENSATION INFORMATION FROM FORM 990 OF RE LEVANT NON-PROFITS THE COMMITTEE CONSIDERS MULTIPLE FACTORS THAT AFFECT COMPENSATION COMP ARISONS SUCH AS GEOGRAPHICAL COST OF LIVING, EXPERIENCE, QUALIFICATIONS, AND PERFORMANCE A CHIEVEMENTS THIS REVIEW IS CONTEMPORANEOUSLY DOCUMENTED IN THE COMMITTEE MINUTES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY AVAILABLE T O THE PUBLIC UPON REQUEST THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS AND FORM 990 AR E MADE AVAILABLE VIA THE ORGANIZATION'S WEBSITE EACH YEAR

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	OTHER PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 2,046,982 MANAGEMENT AND GENERAL EXPENSES 570,316 FUNDRAISING EXPENSES 374,935 TOTAL EXPENSES 2,992,233

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART XII, LINE 2C	THE ORGANIZATION MAINTAINS AN AUDIT COMMITTEE THAT ASSUMES OVERSIGHT OF THE AUDIT OF THE F INANCIAL STATEMENTS AND SELECTION OVER THE INDEPENDENT ACCOUNTANTS NO CHANGE TO THE PROCE SS OCCURRED FOR THE FYE 6/30/2019

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt 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	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) LAKE LUCERNE MUTUAL WATER COMPANY 222 HIGH STREET PALO ALTO, CA 94301 94-2689518	DEVELOP, DISTRIBUTE, SUPPLY, AND DELIVER WATER FOR IRRIGATION USE ONLY	CA	501(C)(12)				No

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)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							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	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

			Yes	No
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest, **(ii)**annuities, **(iii)** royalties, or**(iv)** rent from a controlled entity	**1a**		No
b	Gift, grant, or capital contribution to related organization(s)	**1b**		No
c	Gift, grant, or capital contribution from related organization(s)	**1c**		No
d	Loans or loan guarantees to or for related organization(s)	**1d**	Yes	
e	Loans or loan guarantees by related organization(s)	**1e**		No
f	Dividends from related organization(s)	**1f**		No
g	Sale of assets to related organization(s)	**1g**		No
h	Purchase of assets from related organization(s)	**1h**		No
i	Exchange of assets with related organization(s)	**1i**		No
j	Lease of facilities, equipment, or other assets to related organization(s)	**1j**		No
k	Lease of facilities, equipment, or other assets from related organization(s)	**1k**		No
l	Performance of services or membership or fundraising solicitations for related organization(s)	**1l**		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	**1m**		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1n**		No
o	Sharing of paid employees with related organization(s)	**1o**		No
p	Reimbursement paid to related organization(s) for expenses	**1p**		No
q	Reimbursement paid by related organization(s) for expenses	**1q**		No
r	Other transfer of cash or property to related organization(s)	**1r**		No
s	Other transfer of cash or property from related organization(s)	**1s**		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 relationships and transaction thresholds

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1)LAKE LUCERNE MUTUAL WATER COMPANY	D	39,553	FMV

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) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	**No**			**Yes**	**No**		**Yes**	**No**	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation