

Form 990

## Return of Organization Exempt From Income Tax

2019

Department of the  
Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990) for instructions and the latest information.Open to Public  
Inspection

A For the 2019 calendar year, or tax year beginning 04-01-2019, and ending 03-31-2020

B Check if applicable:

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization SAVE MOUNT DIABLO		D Employer identification number 94-2681735
Doing business as		E Telephone number (925) 947-3535
Number and street (or P.O. box if mail is not delivered to street address) 1901 OLYMPIC BOULEVARD		Room/suite
City or town, state or province, country, and ZIP or foreign postal code WALNUT CREEK, CA 94596		
F Name and address of principal officer: EDWARD SORTWELL CLEMENT JR 1901 OLYMPIC BOULEVARD 320 WALNUT CREEK, CA 94596		G Gross receipts \$ 4,547,811

I Tax-exempt status:  501(c)(3)  501(c) ( ) ► (insert no.)  4947(a)(1) or  527J Website: ► [WWW.SAVEMOUNTDIABLO.ORG](http://WWW.SAVEMOUNTDIABLO.ORG)K Form of organization:  Corporation  Trust  Association  Other ►

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 ►

L Year of formation: 1971 M State of legal domicile: CA

## Part I Summary

1 Briefly describe the organization's mission or most significant activities:  
SEE SCHEDULE O

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2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	3	17
3 Number of voting members of the governing body (Part VI, line 1a)	4	17
4 Number of independent voting members of the governing body (Part VI, line 1b)	5	22
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	6	374
6 Total number of volunteers (estimate if necessary)	7a	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	7b	
b Net unrelated business taxable income from Form 990-T, line 39		

8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)	415,938	4,170,724
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	15,467	135,694
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,912	102,048
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	437,317	4,429,624

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,760	58,956
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	407,844	1,510,015
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ► 566,243		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	364,183	1,165,327
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	773,787	2,734,298
19 Revenue less expenses. Subtract line 18 from line 12	-336,470	1,695,326

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	20,686,103	22,522,201
21 Total liabilities (Part X, line 26)	714,404	604,454
22 Net assets or fund balances. Subtract line 21 from line 20	19,971,699	21,917,747

## 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	***** Signature of officer	2021-02-08 Date
	EDWARD SORTWELL CLEMENT JR Executive Dir. Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00054151
	Firm's name ► DAMORE HAMRIC & SCHNEIDER INC			Firm's EIN ► 94-2769017	
	Firm's address ► 1515 RIVER PARK DR STE 150 SACRAMENTO, CA 95815			Phone no. (916) 481-2856	

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2019)

## 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:

Preserve Land on and around Mount Diablo to ensure healthy ecosystems and continued access.

**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.

<b>4a</b>	(Code: ) (Expenses \$ 803,356 including grants of \$ ) (Revenue \$ 20,688 )
See Additional Data	
<b>4b</b>	(Code: ) (Expenses \$ 634,503 including grants of \$ 58,956 ) (Revenue \$ 115,006 )
See Additional Data	
<b>4c</b>	(Code: ) (Expenses \$ 80,000 including grants of \$ ) (Revenue \$ )
See Additional Data	
<b>4d</b>	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
<b>4e</b>	<b>Total program service expenses ► 1,517,859</b>

## Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 

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 

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 

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 

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 

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 

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 

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 

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 

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 

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 

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 

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 

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 

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 

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 

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 

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

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

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

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

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) 

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 

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 

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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 

	Yes	No
1	Yes	
2	Yes	
3		No
4	Yes	
5		No
6		No
7	Yes	
8		No
9		No
10	Yes	
11a	Yes	
11b	Yes	
11c		No
11d	Yes	
11e	Yes	
11f		No
12a	Yes	
12b		No
13		No
14a		No
14b		No
15		No
16		No
17		No
18	Yes	
19		No
20a		No
20b		
21		No

## Part IV Checklist of Required Schedules (continued)

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  
 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

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  
 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .  
 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? . . . . .  
 d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .

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  
 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

26 Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II . . . . . 26

27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III . . . . . 27

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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV . . . . .  
 b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV . . . . .  
 c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV . . . . . 28a  
 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . . . 28b  
 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M . . . . . 28c  
 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . . . . . 29  
 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . . . . . 30  
 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 . . . . . 31  
 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 . . . . . 32

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  
 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 . . . . . 33  
 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 . . . . . 34  
 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 . . . . . 35a  
 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. . . . . 35b

36 Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 . . . . . 36  
 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  
 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

## 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 . . . . . 

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . . 1a 22  
 1b 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

	Yes	No
22	Yes	
23	Yes	
24a		No
24b		
24c		
24d		
25a		No
25b		No
26		No
27		No
28a		No
28b		No
28c		No
29	Yes	
30		No
31		No
32		No
33		No
34		No
35a		No
35b		
36		No
37		No
38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance (continued)**

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	22		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> 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? <i>If "No" to line 3b, provide an explanation in Schedule O</i> . . . . .	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		No	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b			
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		7a	Yes		
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? . . . . .	7b	Yes		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7c		No	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7d	0		
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7e		No	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7f		No	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7g		No	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7h		No	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	8			
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .		9a			
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		9b			
<b>10 Section 501(c)(7) organizations.</b> Enter:		10a			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10b			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	11a			
<b>11 Section 501(c)(12) organizations.</b> Enter:		11b			
a	Gross income from members or shareholders . . . . .	12a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	12b			
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		13a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. ► 12b				
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		13b			
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . .	13c			
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 . . . . .	14a		No	
c	Enter the amount of reserves on hand . . . . .	14b			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	15		No	
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> . . . . .	16		No	
<b>15</b>	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.				
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . . . If "Yes," complete Form 4720, Schedule O.				

## 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

**1a** Enter the number of voting members of the governing body at the end of the tax year  
 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.

**1b** Enter the number of voting members included in line 1a, above, who are independent

**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?

**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?

**4** Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

**5** Did the organization become aware during the year of a significant diversion of the organization's assets?

**6** Did the organization have members or stockholders?

**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?

**b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

**8** Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

**a** The governing body

**b** Each committee with authority to act on behalf of the governing body

**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

	1a	17	Yes	No
<b>1b</b>		17		
<b>2</b>	Yes			
<b>3</b>		No		
<b>4</b>		No		
<b>5</b>		No		
<b>6</b>		No		
<b>7a</b>		No		
<b>7b</b>		No		
<b>8a</b>		Yes		
<b>8b</b>		Yes		
<b>9</b>		No		

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

**10a** Did the organization have local chapters, branches, or affiliates?

**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?

**11a** Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

**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

**b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

**c** Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done

**13** Did the organization have a written whistleblower policy?

**14** Did the organization have a written document retention and destruction policy?

**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

**b** Other officers or key employees of the organization

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?

**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?

	Yes	No
<b>10a</b>		No
<b>10b</b>		
<b>11a</b>	Yes	
<b>12a</b>	Yes	
<b>12b</b>	Yes	
<b>12c</b>	Yes	
<b>13</b>	Yes	
<b>14</b>	Yes	
<b>15a</b>	Yes	
<b>15b</b>	Yes	
<b>16a</b>		No
<b>16b</b>		

### Section C. Disclosure

**17** List the states with which a copy of this Form 990 is required to be filed ► CA

**18** Section 6104 requires an organization to make its Form 1023 (or 1024-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: ►MONICA OEI 1901 OLYMPIC BOULEVARD SUITE 320 WALNUT CREEK, CA 94596 (925) 947-3535

## 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.

See instructions for the order in which to list the persons above.

 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)					(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
		Officer	Individual trustee	Key employee	Highest compensated	Former			
(1) EDWARD SORTWELL CLEMENT JR Executive Dir.	40.00 0.00		X				151,131	0	9,376
(2) Marcia Slackman Dev. Director	40.00 0.00						117,296	0	15,654
(3) SETH ADAMS LAND CONSERV. DIR.	40.00 0.00						106,355	0	18,394
(4) MEREDITH HENDRICKS LAND PROG. DIR.	40.00 0.00						114,545	0	6,064
(5) SCOTT HEIN Director	2.00 0.00	X					0	0	0
(6) Joe Garaventa Director	2.00 0.00	X					0	0	0
(7) BURT BASSLER Treasurer	4.00 0.00	X	X				0	0	0
(8) Carol Lane Director	2.00 0.00	X					0	0	0
(9) JIM FELTON Director	2.00 0.00	X					0	0	0
(10) JOHN GALLAGHER Director	2.00 0.00	X					0	0	0
(11) LIZ HARVEY Director	2.00 0.00	X					0	0	0
(12) CLAUDIA HEIN vp/secretary	4.00 0.00	X	X				0	0	0
(13) MARGARET KRUSE Director	2.00 0.00	X					0	0	0
(14) FRANK MARTENS Director	2.00 0.00	X					0	0	0
(15) BOB MARX Director	2.00 0.00	X					0	0	0
(16) ROBERT PHELPS Director	2.00 0.00	X					0	0	0
(17) MALCOLM SPROUL President	4.00 0.00	X	X				0	0	0

## Part VII

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

<b>1b Sub-Total . . . . .</b>	►			
<b>c Total from continuation sheets to Part VII, Section A . . . .</b>	►			
<b>d Total (add lines 1b and 1c) . . . . .</b>	►	489,327		49,488

**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 ► 4

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>	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
Shute Mihaly & Weinberger LLP 396 Hayes St San Francisco, CA 94102	LEGAL	110,803

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 ► 1

## Part VIII Statement of Revenue

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

Contributions, Gifts, Grants and Other Similar Amounts		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns . . .	1a				
b Membership dues . . .	1b				
c Fundraising events . . .	1c	376,056			
d Related organizations . . .	1d				
e Government grants (contributions) . . .	1e				
f All other contributions, gifts, grants, and similar amounts not included above . . .	1f	3,794,668			
g Noncash contributions included in lines 1a - 1f: \$ . . .	1g	141,959			
<b>h Total.</b> Add lines 1a-1f . . . ►		4,170,724			
Program Service Revenue					
2a LAND REVENUE & MGMT FEES . . .	Business Code				
	900099	20,688	20,688		
b PROGRAM EVENTS . . .	900099	115,006	115,006		
c . . .					
d . . .					
e . . .					
f All other program service revenue. . .					
<b>g Total.</b> Add lines 2a-2f. . . ►		135,694			
Other Revenue					
3 Investment income (including dividends, interest, and other similar amounts) . . . . .		102,048			102,048
4 Income from investment of tax-exempt bond proceeds . . . . .		0			
5 Royalties . . . . .		0			
6a Gross rents . . . . .	(i) Real				
b Less: rental expenses . . . . .	6a				
c Rental income or (loss) . . . . .	6b				
d Net rental income or (loss) . . . . . ►	6c	0			
7a Gross amount from sales of assets other than inventory . . . . .	(i) Securities				
b Less: cost or other basis and sales expenses . . . . .	7a				
c Gain or (loss) . . . . .	7b				
d Net gain or (loss) . . . . . ►	7c	0			
8a Gross income from fundraising events (not including \$ 376,056 of contributions reported on line 1c). See Part IV, line 18 . . . . .	8a	135,825			
b Less: direct expenses . . . . .	8b	118,187			
c Net income or (loss) from fundraising events . . . . . ►		17,638			17,638
9a Gross income from gaming activities. See Part IV, line 19 . . . . .	9a				
b Less: direct expenses . . . . .	9b				
c Net income or (loss) from gaming activities . . . . . ►		0			
10a Gross sales of inventory, less returns and allowances . . . . .	10a				
b Less: cost of goods sold . . . . .	10b				
c Net income or (loss) from sales of inventory . . . . . ►		0			
Miscellaneous Revenue	Business Code				
11a OTHER INCOME . . . . .	900099	3,520			3,520
b . . . . .					
c . . . . .					
d All other revenue . . . . .					
<b>e Total.</b> Add lines 11a-11d . . . . . ►		3,520			
<b>12 Total revenue.</b> See instructions . . . . . ►		4,429,624	135,694		123,206

**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 

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	58,956	58,956		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. . . . .	0			
4 Benefits paid to or for members . . . . .	0			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	160,507	28,089	48,152	84,266
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7 Other salaries and wages . . . . .	1,349,508	650,315	437,692	261,501
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . . .	0			
9 Other employee benefits . . . . .	0			
10 Payroll taxes . . . . .	0			
<b>11 Fees for services (non-employees):</b>				
a Management . . . . .	0			
b Legal . . . . .	0			
c Accounting . . . . .	0			
d Lobbying . . . . .	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees . . . . .	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	177,542	127,393	31,039	19,110
12 Advertising and promotion . . . . .	0			
13 Office expenses . . . . .	89,358	38,635	19,214	31,509
14 Information technology . . . . .	10,899	8,722	863	1,314
15 Royalties . . . . .	0			
16 Occupancy . . . . .	171,774	95,566	41,680	34,528
17 Travel . . . . .	51,737	39,280	2,958	9,499
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19 Conferences, conventions, and meetings . . . . .	0			
20 Interest . . . . .	0			
21 Payments to affiliates . . . . .	0			
22 Depreciation, depletion, and amortization . . . . .	113,905	108,210	5,695	
23 Insurance . . . . .	44,002	34,465	3,660	5,877
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 OUTSIDE SERVICES	115,349	59,675	1,884	53,790
b EQUIPMENT/MAINTENANCE/RENTAL	92,481	31,444	8,049	52,988
c ACQUISITION-CONSERVATION LAND	80,000	80,000		
d Printing and Publications	73,218	50,724	22,494	
e All other expenses	145,062	106,385	26,816	11,861
<b>25 Total functional expenses.</b> Add lines 1 through 24e	2,734,298	1,517,859	650,196	566,243
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here ► <input type="checkbox"/> 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	691,904	1	1,860,412
	2 Savings and temporary cash investments	902,858	2	0
	3 Pledges and grants receivable, net	187,211	3	602,931
	4 Accounts receivable, net	5	4	21,400
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	6		0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	7		0
	7 Notes and loans receivable, net	8		0
	8 Inventories for sale or use	9		0
	9 Prepaid expenses and deferred charges	39,085		67,688
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	303,070	
	b Less: accumulated depreciation	10b	233,948	90,497
			10c	69,122
	11 Investments—publicly traded securities		11	0
	12 Investments—other securities. See Part IV, line 11	3,544,110	12	3,767,393
	13 Investments—program-related. See Part IV, line 11		13	0
	14 Intangible assets		14	0
	15 Other assets. See Part IV, line 11	15,230,438	15	16,133,255
	<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	20,686,103	16	22,522,201
Liabilities	17 Accounts payable and accrued expenses	240,311	17	181,653
	18 Grants payable		18	
	19 Deferred revenue	76,400	19	53,780
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	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	397,693	25	369,021
	<b>26 Total liabilities.</b> Add lines 17 through 25	714,404	26	604,454
Net Assets or Fund Balances	<b>Organizations that follow FASB ASC 958, check here ► <input checked="" type="checkbox"/></b> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	17,050,751	27	18,796,033
	28 Net assets with donor restrictions	2,920,948	28	3,121,714
	<b>Organizations that do not follow FASB ASC 958, check here ► <input type="checkbox"/></b> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	19,971,699	32	21,917,747
	<b>33 Total liabilities and net assets/fund balances</b>	20,686,103	33	22,522,201

## Part XI

## Reconciliation 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	4,429,624
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	2,734,298
3	Revenue less expenses. Subtract line 2 from line 1 . . . . .	3	1,695,326
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	19,971,699
5	Net unrealized gains (losses) on investments . . . . .	5	10,356
6	Donated services and use of facilities . . . . .	6	
7	Investment expenses . . . . .	7	
8	Prior period adjustments . . . . .	8	151,815
9	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	9	88,551
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	21,917,747

## Part XII Financial Statements and Reporting

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

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?

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?

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?

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.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

## Additional Data

**Software ID:** 19009920

**Software Version:** 2019v5.0

**EIN:** 94-2681735

**Name:** SAVE MOUNT DIABLO

Form 990 (2019)

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### **Form 990, Part III, Line 4a:**

LAND USE PLANNING & STEWARDSHIP: LAND USE PLANNING: SAVE MOUNT DIABLO REGULARLY MONITORS THE AGENDAS OF 50 DIFFERENT PLANNING COMMITTEES AND PUBLIC AGENCIES. THIS WORK CAN TAKE TIME AS WE RESEARCH, WRITE LETTERS, TESTIFY AND COLLABORATE ON SOLUTIONS. WE RESPONDED TO 25 LAND USE PROJECTS IN 2019 AND ATTENDED NUMEROUS HEARINGS. (CONTINUED ON SUPPLEMENTAL SCHEDULE O) STEWARDSHIP: SAVE MOUNT DIABLO CURRENTLY OWNS AND/OR MANAGES 19 PROPERTIES TOTALING 1,800 ACRES. SAVE MOUNT DIABLO ALSO MONITORS PERPETUAL CONSERVATION EASEMENTS ON 2 PROPERTIES, TOTALING 22 ACRES. (CONTINUED ON SUPPLEMENTAL SCHEDULE O)

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**Form 990, Part III, Line 4b:**

EDUCATION & RECREATION: FROM OUTDOOR EDUCATION, LAND MANAGEMENT PROJECTS TO SUPPORTING OFFICE OPERATIONS, EVENTS, COMMUNITY OUTREACH AND RECREATION. (CONTINUED ON SUPPLEMENTAL SCHEDULE O)

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**Form 990, Part III, Line 4c:**

LAND ACQUISITION: SAVE MOUNT DIABLO CONTINUES LONG-TERM NEGOTIATIONS TO PROTECT IMPORTANT PROPERTIES. SAVE MOUNT DIABLO SECURED AN OPTION AGREEMENT FOR A 154 +/- ACRE CONSERVATION EASEMENT ON THE HIGHLY STRATEGIC CONCORD MT. DIABLO TRAIL RIDGE ASSOCIATION LANDS ON THE SLOPES OF MOUNT DIABLOS NORTH PEAK, CONTIGUOUS WITH MOUNT DIABLO STATE PARK. (CONTINUED ON SUPPLEMENTAL SCHEDULE O)

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**SCHEDULE A**  
(Form 990 or  
990EZ)**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](http://www.irs.gov/Form990) for instructions and the latest information.

2019

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue ServiceName of the organization  
SAVE MOUNT DIABLO

Employer identification number

94-2681735

**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 33 1/3% 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 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (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) and 170(b)(1)(A)(vi)**

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

**Section A. Public Support**

	<b>Calendar year (or fiscal year beginning in) ►</b>	<b>(a) 2015</b>	<b>(b) 2016</b>	<b>(c) 2017</b>	<b>(d) 2018</b>	<b>(e) 2019</b>	<b>(f) Total</b>
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	2,205,719	3,285,286	3,575,194	2,428,722	4,170,724	15,665,645
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge.. . .						0
4	<b>Total.</b> Add lines 1 through 3	2,205,719	3,285,286	3,575,194	2,428,722	4,170,724	15,665,645
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)						3,836,037
6	<b>Public support.</b> Subtract line 5 from line 4.						11,829,608

**Section B. Total Support**

	<b>Calendar year (or fiscal year beginning in) ►</b>	<b>(a) 2015</b>	<b>(b) 2016</b>	<b>(c) 2017</b>	<b>(d) 2018</b>	<b>(e) 2019</b>	<b>(f) Total</b>
7	Amounts from line 4. . .	2,205,719	3,285,286	3,575,194	2,428,722	4,170,724	15,665,645
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	29,691	15,911	23,780	59,208	102,048	230,638
9	Net income from unrelated business activities, whether or not the business is regularly carried on. . .	46,547	95,828				142,375
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .	175,530	142,039	184,430	52,347	17,638	571,984
11	<b>Total support.</b> Add lines 7 through 10						16,610,642
12	Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	744,811

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 2019 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	71.220 %
15	Public support percentage for 2018 Schedule A, Part II, line 14 . . . . .	<b>15</b>	76.640 %
16a	<b>33 1/3% support test—2019.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		► <input checked="" type="checkbox"/>
b	<b>33 1/3% support test—2018.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		► <input type="checkbox"/>
17a	<b>10%-facts-and-circumstances test—2019.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		► <input type="checkbox"/>
b	<b>10%-facts-and-circumstances test—2018.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		► <input type="checkbox"/>
18	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		► <input type="checkbox"/>

**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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</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. . . . .						
<b>c</b> Add lines 7a and 7b. . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6. . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. . . . .						
<b>c</b> Add lines 10a and 10b. . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.). . . . .						
<b>14 First five years.</b> 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 <b>stop here</b> . . . . . ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	
16 Public support percentage from 2018 Schedule A, Part III, line 15 . . . . .	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for <b>2019</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	
18 Investment income percentage from <b>2018</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	
<b>19a 33 1/3% support tests—2019.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
<b>b 33 1/3% support tests—2018.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . . ► <input type="checkbox"/>		

**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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> , 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	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c	<b>Substitutions only.</b> 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 <b>Part VI</b> .	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 <b>Part VI</b> .	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 <b>Part VI</b> .	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 <b>Part VI</b> .	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)**

**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?

**b** A family member of a person described in (a) above?

**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**.

	Yes	No
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

**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.

**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.

	Yes	No
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

**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).

	Yes	No
<b>1</b>		

**Section D. All Type III Supporting Organizations**

**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?

**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).

**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.

	Yes	No
<b>1</b>		
<b>2</b>		
<b>3</b>		

**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)

**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.

**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.

**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**.

**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.

	Yes	No
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

**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)

<b>1</b> Net short-term capital gain	<b>1</b>	
<b>2</b> Recoveries of prior-year distributions	<b>2</b>	
<b>3</b> Other gross income (see instructions)	<b>3</b>	
<b>4</b> Add lines 1 through 3	<b>4</b>	
<b>5</b> Depreciation and depletion	<b>5</b>	
<b>6</b> 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)	<b>6</b>	
<b>7</b> Other expenses (see instructions)	<b>7</b>	
<b>8</b> <b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	

**Section B - Minimum Asset Amount**

(A) Prior Year

(B) Current Year  
(optional)

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

**Section C - Distributable Amount**

Current Year

<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	
<b>2</b> Enter 85% of line 1	<b>2</b>	
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>	
<b>5</b> Income tax imposed in prior year	<b>5</b>	
<b>6</b> <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	
<b>7</b> <input type="checkbox"/> 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)**

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b>	Amounts paid to acquire exempt-use assets	
<b>5</b>	Qualified set-aside amounts (prior IRS approval required)	
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions	
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
<b>9</b>	Distributable amount for 2019 from Section C, line 6	
<b>10</b>	Line 8 amount divided by Line 9 amount	
<b>Section E - Distribution Allocations</b> (see instructions)		<b>(i) Excess Distributions</b>
		<b>(ii) Underdistributions Pre-2019</b>
		<b>(iii) Distributable Amount for 2019</b>
<b>1</b>	Distributable amount for 2019 from Section C, line 6	
<b>2</b>	Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in <b>Part VI</b> ). See instructions.	
<b>3</b>	Excess distributions carryover, if any, to 2019:	
<b>a</b>	From 2014. . . . .	
<b>b</b>	From 2015. . . . .	
<b>c</b>	From 2016. . . . .	
<b>d</b>	From 2017. . . . .	
<b>e</b>	From 2018. . . . .	
<b>f</b>	<b>Total</b> of lines 3a through e	
<b>g</b>	Applied to underdistributions of prior years	
<b>h</b>	Applied to 2019 distributable amount	
<b>i</b>	Carryover from 2014 not applied (see instructions)	
<b>j</b>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	
<b>4</b>	Distributions for 2019 from Section D, line 7: \$	
<b>a</b>	Applied to underdistributions of prior years	
<b>b</b>	Applied to 2019 distributable amount	
<b>c</b>	Remainder. Subtract lines 4a and 4b from 4.	
<b>5</b>	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.	
<b>6</b>	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.	
<b>7</b>	<b>Excess distributions carryover to 2020.</b> Add lines 3j and 4c.	
<b>8</b>	Breakdown of line 7:	
<b>a</b>	Excess from 2015. . . . .	
<b>b</b>	Excess from 2016. . . . .	
<b>c</b>	Excess from 2017. . . . .	
<b>d</b>	Excess from 2018. . . . .	
<b>e</b>	Excess from 2019. . . . .	

# Additional Data

**Software ID:** 19009920

**Software Version:** 2019v5.0

**EIN:** 94-2681735

**Name:** SAVE MOUNT DIABLO

**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)**Political Campaign and Lobbying Activities****2019****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](http://www.irs.gov/Form990) for instructions and the latest information.

**Open to Public Inspection**Department of the Treasury  
Internal Revenue Service**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  
SAVE MOUNT DIABLOEmployer identification number  
94-2681735**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.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) .....		
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....		
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) .....		
<b>d</b>	Other exempt purpose expenditures .....		
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) .....		
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
<b>If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:</b>			
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.		
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) .....		
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- .....		
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- .....		
<b>j</b>	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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)**

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> 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		
a	Yes	
b	Yes	
c	Yes	
d	Yes	
e	Yes	
f	Yes	
g	Yes	
h	Yes	
i	Yes	78,962
j		78,962
2a		
b		
c		
d		

**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	1	
2	2	
3	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).	2a	
a	Current year .....	2b	
b	Carryover from last year .....	2c	
c	Total .....	3	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	4	
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? .....	5	
5	Taxable amount of lobbying and political expenditures (see instructions) .....		

**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
Part II-B, Line 1i - Other Activities Description	SMD helped support Measure Y in Danville to increase protected open space in the city, but was not a leader in the campaign. We continued to prepare for the upcoming election in Antioch as well as defend legal challenges to our Let Antioch Voters Decide Initiative, but were not engaged nearly as much as we had been the previous year due to the success of our previous signature gathering effort and that no campaign was scheduled.

**SCHEDULE D**  
(Form 990)Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**

OMB No. 1545-0047

**2019****Open to Public  
Inspection**

► 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](http://www.irs.gov/Form990) for instructions and the latest information.**Name of the organization**  
SAVE MOUNT DIABLO**Employer identification number**

94-2681735

**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	
2a	3
2b	18
2c	
2d	

a Total number of conservation easements . . . . .

b Total acreage restricted by conservation easements . . . . .

c Number of conservation easements on a certified historic structure included in (a) . . . . .

d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . . .

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  
► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  
► \$ \_\_\_\_\_

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  
 b  Scholarly research  
 c  Preservation for future generations  
 d  Loan or exchange programs  
 e  Other .....

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:

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

	Amount
1c	
1d	
1e	
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 . . . . .	918,260	897,176	752,370		
b Contributions . . . . .	1,050,479		172,872	752,202	
c Net investment earnings, gains, and losses	-29,019	21,084	-28,066	168	
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .					
g End of year balance . . . . .	1,939,720	918,260	897,176	752,370	

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

a Board designated or quasi-endowment ► 83.000 %

b Permanent endowment ► 17.000 %

c Temporarily restricted endowment ► .....

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
3a(i)		No
3a(ii)		No
3b		No

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

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 . . . . .				
b Buildings . . . . .				
c Leasehold improvements				
d Equipment . . . . .		283,838	214,716	69,122
e Other . . . . .		19,232	19,232	
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ►				69,122

**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)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	► 3,767,393	

(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)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 13.)	►	

**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.

**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) CHARITABLE REMAINDER TRUST	927,906
(2) CONSERVATION LAND	12,978,014
(3) CONSERVATION LAND HELD FOR SALE	10,600
(4) CONSERVATION LAND STRUCTURES	1,147,520
(5) DEED OF CONSERVATION EASEMENT	3
(6) DEPOSIT	8,892
(7) LAND PURCHASE IN ESCROW	659,421
(8) LAND PURCHASE OPTION	400,899
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 15.)	► 16,133,255

**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.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)	► 369,021

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	4,595,825
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments . . . . .	2a	10,356
b	Donated services and use of facilities . . . . .	2b	29,107
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIII.) . . . . .	2d	126,738
e	Add lines 2a through 2d . . . . .	2e	166,201
3	Subtract line 2e from line 1 . . . . .	3	4,429,624
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	
b	Other (Describe in Part XIII.) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . .	5	4,429,624

**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	2,881,592
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities . . . . .	2a	29,107
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIII.) . . . . .	2d	118,187
e	Add lines 2a through 2d . . . . .	2e	147,294
3	Subtract line 2e from line 1 . . . . .	3	2,734,298
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	
b	Other (Describe in Part XIII.) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . .	5	2,734,298

**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:** 19009920  
**Software Version:** 2019v5.0  
**EIN:** 94-2681735  
**Name:** SAVE MOUNT DIABLO

### Form 990, Schedule D, Part IX, - Other Assets

(a) Description	(b) Book value
CHARITABLE REMAINDER TRUST	927,906
CONSERVATION LAND	12,978,014
CONSERVATION LAND HELD FOR SALE	10,600
CONSERVATION LAND STRUCTURES	1,147,520
DEED OF CONSERVATION EASEMENT	3
DEPOSIT	8,892
LAND PURCHASE IN ESCROW	659,421
LAND PURCHASE OPTION	400,899

## Supplemental Information

Return Reference	Explanation
Part II, Line 5: Summarized Policy	Save Mount Diablo has an SMD Board and Land Trust Accreditation Commission-approved Conservation Easement Enforcement Policy which outlines annual monitoring, land owner relationships, violation protocols and enforcement guidelines. Save Mount Diablo also maintains a legal defense fund and holds Terra Firma conservation insurance.

## Supplemental Information

Return Reference	Explanation
Part II, Line 9: Organization Reporting of conservation easements.	Deed of Conservation Easement: A perpetual conservation easement is a voluntary legal agreement between a landowner and a qualified organization, such as a land trust, to protect the natural or cultural resources of that land forever. The conservation easement will protect the resources SMD purchased the property to save, by having the landowner help steward the land while also allowing them to live on the land they love when applicable. The agreement limits the landowners rights on the property in order to protect the lands conservation values. In 2016, the Organization acquired its first conservation easement in connection with the sale of the Curry Creek 2 property, totaling 4.9 acres. The easement has no financial value since zoning permits a minimum parcel size of 5 acres, limiting development value to the existing, single home site. In 2017, the Organization acquire second conservation easement Marsh Creek 2, totaling 16 acres. The Organization has valued the easement as \$1 in the financial statements.

## Supplemental Information

Return Reference	Explanation
Part V, Line 4: Intended uses of the endowment fund.	The long-term goal of Save Mount Diablos (SMD) Stewardship Endowment Fund is to financially support, in perpetuity, SMDs stewardship obligations for its conserved lands and other properties under its care. To fulfill its stewardship obligations, SMD must have the resources to perform activities such as the following:periodically monitor and visit each protected property;maintain SMD Fee Simple owned property infrastructure;preserve natural and cultural resources through adaptive management;address safety risks and reduce liability;respond to landowner inquiries on SMD Conservation Easement lands;maintain relations with neighbors of SMD Fee Simple owned properties, and participate in landowner collaborations such as road associations;maintain relations with landowners of SMD Conservation Easement lands;respond to requests for approval of permitted activities on SMD Conservation Easement lands;respond to requests to amend a Conservation Easement;respond to Conservation Easement violations to address problems and avoid litigation;conduct habitat restoration and climate resiliency work on Fee Simple owned lands;conduct fire abatement activities on SMD Fee Simple lands; numerous other stewardship activities such as managing conservation grazing programs and other outside services on SMD conserved lands; respond to natural disasters such as floods and fires;pay applicable taxes and fees associated with the property or property interest ownership; andany other stewardship matters and costs that come up for SMDs conserved lands and properties under its care.

## Supplemental Information

Return Reference	Explanation
Part XI, Line 2d: Other revenue amounts included in F/S but not included on form 990	UNREALIZED GAIN ON CHARITABLE REMAINDER \$8551 DIRECT FUNDRAISING EXPENSE \$118187

## Supplemental Information

Return Reference		Explanation
Part XII, Line 2d: Other expenses and losses per audited F/S	DIRECT FUNDRAISING EXPENSE \$118187	

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

## **Supplemental Information Regarding Fundraising or Gaming Activities**

**Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.**

► Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2019

## **Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
SAVE MOUNT DIABLO

**Employer identification number**

94-2681735

**Part I** **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

CA, AR, GA, MA, MD, MO, NC, NJ, NY, OH, OR, TN, WA, WI, PA, NM

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a) Event #1 <b>MOONLIGHT MOUNTAIN</b> (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
<b>Revenue</b>				
1 Gross receipts . . . . .	511,881			511,881
2 Less: Contributions . . . . .	376,056			376,056
3 Gross income (line 1 minus line 2) . . . . .	135,825			135,825
<b>Direct Expenses</b>				
4 Cash prizes . . . . .				
5 Noncash prizes . . . . .				
6 Rent/facility costs . . . . .	34,095			34,095
7 Food and beverages . . . . .	60,311			60,311
8 Entertainment . . . . .	23,781			23,781
9 Other direct expenses . . . . .				
10 Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ►				118,187
11 Net income summary. Subtract line 10 from line 3, column (d) . . . . . ►				17,638

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
<b>Revenue</b>				
1 Gross revenue . . . . .				
2 Cash prizes . . . . .				
3 Noncash prizes . . . . .				
4 Rent/facility costs . . . . .				
5 Other direct expenses . . . . .				
<b>Direct Expenses</b>				
6 Volunteer labor . . . . .	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ►				
8 Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ►				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? . . . . .  Yes  No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No

b If "Yes," explain: \_\_\_\_\_

**11** Does the organization conduct gaming activities with nonmembers?  Yes  No

**12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

**13** Indicate the percentage of gaming activity conducted in:

<b>a</b> The organization's facility	<b>13a</b>	%
<b>b</b> An outside facility	<b>13b</b>	%

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► .....  
 Address ► .....

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

**b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_.

**c** If "Yes," enter name and address of the third party:

Name ► .....

Address ► .....

**16** Gaming manager information:

Name ► .....

Gaming manager compensation ► \$ .....

Description of services provided ► .....

Director/officer  Employee  Independent contractor

**17** Mandatory distributions:

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ .....

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
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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 ServiceName of the organization  
SAVE MOUNT DIABLO

OMB No. 1545-0047

**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](http://www.irs.gov/Form990) for the latest information.**2019****Open to Public  
Inspection**Employer identification number  
94-2681735**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)							
(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 . . . . . ► 0

3 Enter total number of other organizations listed in the line 1 table . . . . . ► 0

**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
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**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
Grantmaker's Description of How Grants are Used	Save Mount Diablo's Stewardship and Outreach Coordinator staffs the Mary Bowerman Science and Research Program. The coordinator is responsible for overseeing that all of the grant requirements are met. As a condition of the funding, awardees are responsible for presenting at the annual Mary Bowerman Science and Research Colloquium in December. Staff coordinates this event and tracks what awardees present in the given year. If there is a conflict with Colloquium scheduling, awardees can submit a written report by the end of the calendar year.

## Additional Data

**Software ID:** 19009920

**Software Version:** 2019v5.0

**EIN:** 94-2681735

**Name:** SAVE MOUNT DIABLO

### Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

MARY BOWERMAN SCIENCE RESEARCH	7	11,606		
MARY BOWERMAN SCIENCE RESEARCH	7	11,606		
Joseph, Stephen	1	20,000		
NBCUniversal Media, LLC	1	20,000		
Regional Parks Foundation	1	5,000		
Rainforest Trust	1	1,000		

**Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.**

Bay Nature Institute	1	1,000
Bay Nature Institute	1	1,000
East bay Climate Action Network	1	250
Contra Costa Resource Recovery Dist	1	100

**Schedule J**  
(Form 990)**Compensation Information**

OMB No. 1545-0047

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](http://www.irs.gov/Form990) for instructions and the latest information.

**2019****Open to Public Inspection**Department of the Treasury  
Internal Revenue ServiceName of the organization  
SAVE MOUNT DIABLO

Employer identification number

94-2681735

**Part I Questions Regarding Compensation**

**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.

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

**b** If any of the boxes on 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

**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 on Line 1a?

**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.

<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> 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? . . . . .  
**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .  
**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.

**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? . . . . .  
**b** Any related organization? . . . . .

If "Yes," on line 5a or 5b, describe in Part III.

**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? . . . . .  
**b** Any related organization? . . . . .

If "Yes," on line 6a or 6b, describe in Part III.

**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 . . . . .

**8** Were any amounts reported on Form 990, Part VII, paid or accrued 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 . . . . .

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		No
<b>5b</b>		No
<b>6a</b>		No
<b>6b</b>		No
<b>7</b>		No
<b>8</b>		No
<b>9</b>		

**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.

<b>Part III Supplemental Information</b>	
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.	
<b>Return Reference</b>	<b>Explanation</b>

SCHEDULE M  
(Form 990)

## Noncash Contributions

OMB No. 1545-0047

2019

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue ServiceName of the organization  
SAVE MOUNT DIABLO

Employer identification number

94-2681735

## 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	3	118,546	
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 . . . . .				
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	2	175	FMV
26 Other ► ( FOOD ) . . . . .	X	10	23,238	FMV
27 Other ► ( _____ ) . . . . .				
28 Other ► ( _____ ) . . . . .				

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 isn't required to be used for exempt  
purposes for the entire holding period? . . . . .

	Yes	No
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	No

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? . . . . .

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

**Part III**

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

Department of the Treasury

Internal Revenue Service  
SAVE MOUNT DIABLO**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](http://www.irs.gov/Form990) for the latest information.

**2019****Open to Public  
Inspection****Employer identification number**

94-2681735

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Line 2: Description of Business or Family Relationship of Officers, Directors, Et	BOARD MEMBERS, SCOTT HEIN AND CLAUDIA HEIN, ARE HUSBAND AND WIFE.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b: Form 990 Review Process	Form 990 is reviewed and approved by the Audit Committee. The board receives a complete copy before the form is filed.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c: Explanation of Monitoring and Enforcement of Conflicts	All key employees and all board & committee members are required to fill out a form annually. If there is a conflict with any staff, the Executive Director shall determine whether a conflict of interest exists. If it is a board or committee member, the board shall determine if a conflict of interest exists. The person(s) involved with the transaction shall not be present during the board or committee's discussion. Any recusal of a board or committee member from the meeting is also noted in the minutes.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a: Compensation Review & Approval Process - CEO, Top Management	The Executive Director reviews compensation with the Executive Committee (composed of elected board members) based on other non-profit comparisons; the Executive Committee reviews the compensation for the Executive Director. This is an annual review prior to year end.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15b:  Compensation Review and Approval Process for Officers and Key Employees	The Executive Director reviews compensation with the Executive Committee (composed of elected board members) based on other non-profit comparisons; the Executive Committee reviews the compensation for the Executive Director. This is an annual review prior to year end.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 18: Explanation of Other Means Forms Available For Public Inspection	THE FORM 990 IS POSTED ON THE ORGANIZATION'S WEBSITE AND IS ALSO AVAILABLE UPON REQUEST.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19: Other Organization Documents Publicly Available	AVAILABLE UPON REQUEST.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Changes In Net Assets Or Fund Balances - Other Increases	ACQUISITIONS OF CONSERVATION LAND = \$80000

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Changes In Net Assets Or Fund Balances - Other Increases	UNREALIZED GAIN ON CHARITABLE REMAINDER TRUST = \$8551

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 1	ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES:OUR MISSION IS TO FOREVER PRESERVE THE REMAINING 70,000 ACRES OF NATURAL LANDS AROUND MOUNT DIABLO THROUGH A CONSERVATION APPROACH THAT INTEGRATES PERPETUAL LAND PRESERVATION, ADVOCACY, STEWARDSHIP, LAND USE PLANNING, AND EDUCATION PROGRAMS. WE WORK TO PRESERVE MOUNT DIABLOS PEAKS, SURROUNDING FOOTHILLS, AND WATERSHEDS THROUGH LAND ACQUISITION AND PRESERVATION STRATEGIES DESIGNED TO PROTECT THE MOUNTAINS NATURAL BEAUTY, BIOLOGICAL DIVERSITY, AND HISTORICAL AND AGRICULTURAL HERITAGE; ENHANCE OUR AREAS QUALITY OF LIFE AND PROVIDE RECREATIONAL OPPORTUNITIES CONSISTENT WITH THE PROTECTION OF NATURAL RESOURCES.

Return Reference	Explanation
FORM 990, PART III, LINE 4A (CONTINUED)	<p>LAND USE PLANNING (CONTINUED): CONCORD NAVAL WEAPONS STATION REUSE PLAN AFTER ALMOST TWO DECADES OF ADVOCACY WORK BY SAVE MOUNT DIABLO, WE CELEBRATED THE HAND-OVER OF OVER 2,000 ACRES OF LAND FOR THE NEW REGIONAL PARK TO THE EAST BAY REGIONAL PARK DISTRICT AND ENCOURAGED PARTIES TO WORK TOGETHER TO ACHIEVE COMMON GOALS ON THE SPECIFIC PLAN AND CITY DEVELOPMENT PART OF THE PROJECT. ANTIOCH COALITION WAS SUCCESSFUL IN BUILDING CITY OF ANTIOCH SUPPORT FOR OUR INITIATIVE TO ADD MORE PROTECTIONS TO THE SAND CREEK FOCUS AREA, RICH IN CONSERVATION VALUES. WE BUILT A SUCCESSFUL FOUNDATION SO THAT WE CAN BRING OUR INITIATIVE TO THE VOTERS IN THE NEXT FISCAL YEAR. COALITIONS WE CONTINUED COALITION WORK IN RESPONSE TO ONGOING EFFORTS AT THE CONCORD NAVAL WEAPONS STATION AND STRENGTHENED OUR COALITION IN ANTIOCH FOR A 2020 CAMPAIGN FOR OUR INITIATIVE TO BETTER PROTECT THE SAND CREEK FOCUS AREA WHICH INCLUDES THOUSANDS OF ACRES OF IMPORTANT OPEN SPACE. URBAN LIMIT LINES WE CONTINUED TO WATCH FOR THREATS TO THE URBAN LIMIT LINE (ULL). LEGAL REVIEW WE SUCCESSFULLY FENDED OFF LEGAL CHALLENGES TO OUR INITIATIVE IN ANTIOCH. EAST CONTRA COSTA COUNTY HABITAT CONSERVANCY PLAN WE PARTICIPATED IN THE PUBLIC ADVISORY COMMITTEE OF THE HCP/NCCP AND ENCOURAGED CREATION OF A NEW HCP/NCCP IN ANTIOCH. STEWARDSHIP (CONTINUED): MORE THAN 350 VOLUNTEERS COMPLETED OVER 7,400 HOURS OF SERVICE IN 2019. THEY HAVE SUPPORTED LAND MANAGEMENT AND EDUCATION ACTIVITIES THROUGHOUT THE YEAR. RECURRENT VOLUNTEERS INCLUDE: 35 PROPERTY MONITORS AND 90 VOLUNTEER STEWARDS. VOLUNTEERS OUR VOLUNTEERS ARE THE HEROES AND HEROINES OF LAND PRESERVATION. THEY HELP MAKE OUR WORK POSSIBLE, WHETHER IT BE BY HELPING RESTORE ECOLOGICAL SYSTEMS, BECOMING A HIKE LEADER, ASSISTING WITH EVENT REGISTRATION, STAFFING AID STATIONS, TAKING PHOTOS OR SETTING UP EQUIPMENT. THEIR HARD WORK AND GENEROSITY ARE WHAT MAKE THIS ORGANIZATION'S EFFORT SO SUCCESSFUL. RESULTS: OVERSEEN BY OUR SKILLED STAFF, OVER 7,400 VOLUNTEER HOURS WERE SPENT ON OVER 52 WORK PROJECTS INCLUDING ECOLOGICAL RESTORATION, MONITORING AND MAINTENANCE; AND OVER 13 BIG EVENTS LIKE MOONLIGHT ON THE MOUNTAIN, FOUR DAYS DIABLO AND BIOBLITZ. THE DIABLO RESTORATION TEAM (DIRT) COMPLETED 21 WORKDAYS NURTURING FIVE CREEK RESTORATION PROJECTS, INCLUDING 11 SITES SPREAD ACROSS SIX PROPERTIES. WE RESPONDED TO WILDFIRE DAMAGE FROM THE 2018 MARSH FIRE THAT BURNED THREE OF OUR PROPERTIES. WE REPLACED SPLIT RAIL FENCE, REOPENED RESTORATION SITES TO OUR DIRT WORKDAYS, AND REPLACED OUR WATER PUMP SYSTEM, WHICH IS USED TO WATER PLANTING SITES IN THE DRY MONTHS. STEWARDS DESIGNED AND BUILT AN UPGRADED, ECO-FRIENDLY, SOLAR-POWERED WATER PUMP SYSTEM THAT AUTOMATICALLY REFILLS THE WATER TANK AT THE TOP OF THE HILL. WE NO LONGER NEED TO RELY ON GAS-POWERED GENERATORS TO PROVIDE ENOUGH ENERGY TO PUSH THE WATER UPHILL. AMIDST WORKDAY CANCELLATIONS BECAUSE OF CLIMATE CHANGE (WHICH IS CAUSING EXTREME HEAT, HAZARDOUS AIR QUALITY, AND HIGH FIRE-DANGER RISKS) AND COVID-19, WE HAVE FOCUSED OUR WORK</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A (CONTINUED)	RKDAYS ON SAFETY TRAININGS AS WELL AS MORE FIRE ABATEMENT YEAR-ROUND. WE COMPLETED 18 STEWARDSHIP WORKDAYS, INCLUDING EXTRA FIRE ABATEMENT. WE ACCOMPLISHED 12 INTEGRATED PEST MANAGEMENT WORKDAYS TO REMOVE NON-NATIVE AND INVASIVE SPECIES ON OUR PROPERTIES AND MANAGE THE SPREAD OF SUDDEN OAK DEATH. WE FINISHED MAJOR CAPITAL PROJECTS ON SEVERAL OF OUR PROPERTIES. WE REPAIRED THE COMPROMISED ROOF AT WRIGHT CANYON. WE REPLACED THOUSANDS OF FEET OF DEGRADED FENCING WITH WILDLIFE-FRIENDLY FENCING AT CURRY CANYON RANCH, MANGINI RANCH, AND ANDERSON RANCH. ALL PLANNED IMPROVEMENTS WERE FINALLY COMPLETED AT THE CURRY CANYON RANCH FIELD STATION, INCLUDING A DECK AND PERGOLA FOR SHADE NEXT TO THE CREEK, AND SAFETY FEATURES LIKE HAND RAILING AT STEPS AND RAMPS TO MAJOR ENTRANCES INTO THE FIELD STATION. WE HOSTED A COASTAL CLEANUP WORKDAY IN KIRKER CREEK. STUDENTS FROM PITTSBURG HIGH SCHOOL AND OTHER COMMUNITY MEMBERS REMOVED ALL SORTS OF TRASH, FINDING MOSTLY MICRO-SIZED TRASH THIS YEAR. IN TOTAL, 507 PLASTIC PIECES SMALLER THAN 2.5 CM WERE REMOVED; 165 PLASTIC BAGS AND 160 CIGARETTE BUTTS WERE ALSO TAKEN OUT. RIPARIAN RESTORATION PROJECTS WITH THE SUPPORT OF THE EAST CONTRA COSTA HABITAT CONSERVANCY, SAVE MOUNT DIABLO STAFF AND VOLUNTEERS CONTINUED A RIPARIAN RESTORATION PROJECT IN THE IRISH CREEK CORRIDOR, DOWNSTREAM FROM THE IRISH CANYON PLANTING SITES. VALLEY OAK ACORNS AND BUCKEYE NUTS WERE COLLECTED AND OVER 140 PLANTINGS WERE ESTABLISHED AND MAINTAINED ACROSS 5 PLANTING AREAS. IN ADDITION, STAFF AND VOLUNTEERS.

Return Reference	Explanation
FORM 990, PART III, LINE 4B (CONTINUED)	EDUCATION & RECREATION (CONTINUED): DR. MARY BOWERMAN SCIENCE & RESEARCH PROGRAM THE DR. MARY BOWERMAN SCIENCE AND RESEARCH PROGRAM PROVIDES GRANTS FOR RESEARCH PROJECTS ON SAVE MOUNT DIABLO PROPERTIES AND THE NETWORK OF PROTECTED LANDS IN THE DIABLO RANGE. IN 2019, SEVEN GRANTS WERE AWARDED TO RESEARCHERS FROM ACADEMIC INSTITUTIONS AROUND THE BAY AREA. ALL OF THE STUDIES WILL ENHANCE THE ECOLOGICAL UNDERSTANDING OF THE DIABLO REGION AND INFORM CONSERVATION AND LAND MANAGEMENT PRACTICES. CONSERVATION COLLABORATION AGREEMENT PROGRAM SAVE MOUNT DIABLO STAFF AND VOLUNTEERS COMPLETED FOUR CONSERVATION COLLABORATION AGREEMENTS WITH LOCAL SCHOOLS AND BUSINESSES IN 2019-2020. THE FIRST AGREEMENT WAS WITH CAMPOLINDO HIGH SCHOOL (SPONSORED BY COMPASS REALTY), THE SECOND WAS WITH PITTSBURG HIGH SCHOOL (SPONSORED BY MOUNT DIABLO RESOURCE AND RECOVERY), THE THIRD WAS WITH ANTIOCH HIGH SCHOOL (SPONSORED BY DIAMOND CONSTRUCTION) AND THE FOURTH WAS WITH JOAQUIN MORAGA INTERMEDIATE SCHOOL (SPONSORED BY BEDELL FRAZIER). WITH ALL AGREEMENTS, STUDENTS, INSTRUCTORS, AND SPONSORING BUSINESS EMPLOYEES ALIKE RECEIVED IN-CLASS/IN-OFFICE EDUCATIONAL INSTRUCTION IN LAND CONSERVATION AND THEN HAD THE OPPORTUNITY TO PARTICIPATE IN HANDS ON OUTDOOR FIELD EXPERIENCES ALL FOUR TOOK PART IN IDENTIFYING AND PULLING INVASIVE PLANT SPECIES AT MARSH CREEK 8 (ALSO KNOWN AS BIG BEND), A SAVE MOUNT DIABLO OWNED PROPERTY. AFTER THE SERVICE PROJECTS, STUDENTS AND EMPLOYEES WENT ON INTERPRETIVE NATURE HIKES. FOLLOWING THE HIKES, PARTICIPANTS DID CONTEMPLATIVE SOLOS IN NATURE WITH JOURNALING EXERCISES REFLECTING ON THE MEANING OF NATURE AND THEIR RESPECTIVE ROLES IN IT. A TOTAL OF 150 STUDENTS AND SPONSORING BUSINESS EMPLOYEES PARTICIPATED IN THE FOUR AGREEMENTS. DIABLO TRAILS CHALLENGE SAVE MOUNT DIABLO AND BRAZEN RACING PARTNERED AGAIN TO HOST A 50K, HALF MARATHON, 10K AND 5K. MORE THAN 1,000 PEOPLE ENJOYED A BEAUTIFUL DAY OUT ON THE TRAILS. FOUR DAYS DIABLO14 PARTICIPANTS ENJOYED LEARNING MORE ABOUT MOUNT DIABLO'S TREASURES WHILE HIKING AND CAMPING ALONG THE DIABLO TRAIL. DEDICATED VOLUNTEERS SET UP THE CAMPSITES AND LOCAL RESTAURANTS INCLUDING PRIMA RISTORANTE, ESINORE RESTAURANT AND SUNRISE BISTRO & CATERING PREPARED DELICIOUS MEALS FOR THE ADVENTURERS. MOUNT DIABLO CHALLENGE NOW IN ITS 38TH YEAR, THIS EVENT IS NOW HOSTED BY THE VALLEY SPOKESMEN. OVER 520 CYCLISTS RODE 11.2 MILES, CLIMBING 3,249 FEET IN ELEVATION, TO THE SUMMIT OF DIABLO. THANKS TO THE SUPPORT OF THE NATHAN M. OHRBACH FOUNDATION, SMD ADDED 145 NEW AND RENEWED MEMBERS TO OUR ORGANIZATION FROM THIS EVENT. "DISCOVER DIABLO" HIKES 313 HIKERS ATTENDED 17 FREE PUBLIC EDUCATIONAL HIKE OUTINGS ON SAVE MOUNT DIABLO PROPERTIES AND COLLABORATING AGENCIES LAND. STAFF AND VOLUNTEER HIKE LEADERS HOSTED THIS SERIES AS PART OF SAVE MOUNT DIABLO DISCOVER DIABLO PROGRAM SPONSORED BY MARTINEZ REFINING COMPANY. EDUCATION & OUTREACH EFFORTS STAFF AND VOLUNTEERS TABLED AT 9 EVENTS AND PARTICIPATED IN NUMEROUS SPEAKING ENGAGEMENTS ACROSS 8 CITIES IN THE

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B (CONTINUED)	BAY AREA.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4C (CONTINUED)	LAND ACQUISITION (CONTINUED): SAVE MOUNT DIABLO ALSO SECURED A PURCHASE AGREEMENT FOR THE STRATEGIC 28.73 ACRE SMITH CANYON IN THE MORGAN TERRITORY AREA, CONTIGUOUS WITH OTHER CONSERVED SAVE MOUNT DIABLO LANDS. FURTHER, SAVE MOUNT DIABLO ADVANCED OTHER LAND ACQUISITION OPPORTUNITIES IN AND AROUND THE MT DIABLO AREA. THIS FISCAL YEAR WAS A YEAR OF ENHANCING HOW WE MANAGE OUR PROPERTIES WHILE CONTINUING LONG-TERM, COMPLEX NEGOTIATIONS TO PROTECT SEVERAL VERY HIGH-PRIORITY AREAS OF LAND. FOR DECADES, SMD WAS ABLE TO BUY PROPERTIES AND THEN QUICKLY TRANSFER THEM TO A PUBLIC PARK AGENCY. THAT MODEL KEPT OUR LAND MANAGEMENT RESPONSIBILITIES VERY LIMITED, AND THE PROJECTS WE UNDERTOOK WERE MAINLY FOCUSED ON TRASH REMOVAL, FIRE ABATEMENT, AND SOME RESTORATION WORK. ABOUT A DECADE AGO, THE TRANSFER TIME STARTED TO SLOW DOWN. IN PART, THE SLOWDOWN IN TRANSFER TIME WAS BECAUSE CALIFORNIA STATE PARKS STOPPED ACQUIRING NEW LAND IN ORDER TO FOCUS ON MAINTAINING THE PARKS IT ALREADY OWNED. IT HAS BEEN MORE THAN 15 YEARS SINCE A PROPERTY WAS ADDED TO MOUNT DIABLO STATE PARK, SOMETHING WE HAVE BEEN WORKING DILIGENTLY TO CHANGE. HOWEVER, AS OUR AMBITIONS ABOUT PRESERVING THE DIABLO WILD LANDS GREW, WE BEGAN TO BUY MORE LAND FURTHER AWAY FROM EXISTING PARKS WITH A STRATEGY TO CONNECT THEM IN THE FUTURE. WE CONTINUE TO NEGOTIATE COMPLEX PROPERTY TRANSACTIONS, THE FRUITS OF WHICH WILL BE BROUGHT TO BEAR IN THE COMING YEAR. OUR PARTNERS, ESPECIALLY THE EAST CONTRA COSTA HABITAT CONSERVANCY AND EAST BAY REGIONAL PARK DISTRICT, HAVE CONTINUED THE WORK TO ENCIRCLE THE MARSH CREEK AND MORGAN TERRITORY AREAS IN OPEN SPACE AND PLACE CRITICAL PROTECTIONS OVER ESSENTIAL HABITAT CORRIDORS. WE MEET WITH LANDOWNERS AND DEVELOPERS ALIKE TO PUSH FOR HIGH-QUALITY MITIGATION ASSOCIATED WITH NEW DEVELOPMENTS. WE COORDINATE CLOSELY WITH OUR PARTNERS ON STRATEGIC ADDITIONS TO THE OVERALL NETWORK OF PRESERVED LANDS ON AND AROUND MOUNT DIABLO. AS PART OF OUR FOREVER WILD CAPITAL CAMPAIGN, WE ARE WORKING TO RAISE ACQUISITION FUNDS TO ENSURE WE ARE READY AND ABLE TO ACT ON TRANSACTIONS QUICKLY. FOR NOW, WE CONTINUE TO BUILD A STRONG FOUNDATION FOR FUTURE LAND CONSERVATION.