

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No. 1545-0047

2011**Open to Public Inspection****A** For the **2011** calendar year, or tax year beginning **JUL 1, 2011** and ending **JUN 30, 2012**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PENINSULA OPEN SPACE TRUST Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 222 HIGH STREET City or town, state or country, and ZIP + 4 PALO ALTO, CA 94301 F Name and address of principal officer: WALTER T. MOORE SAME AS C ABOVE	D Employer identification number 94-2392007 E Telephone number 650-854-7696 G Gross receipts \$ 131,522,180. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: ▶ HTTP://WWW.OPENSPECETRUST.ORG/ K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ L Year of formation: 1977 M State of legal domicile: CA		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROTECT AND CARE FOR OPEN SPACE, FARMS AND PARKLAND IN AND AROUND SILICON VALLEY. 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 36 6 Total number of volunteers (estimate if necessary) 180 7a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 0.	3	14	4	14	5	36	6	180	7a	0.	7b	0.												
Revenue	8 Contributions and grants (Part VIII, line 1h) 6,735,175. 9 Program service revenue (Part VIII, line 2g) 433,060. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5,228,210. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12,396,445.	Prior Year	Current Year																						
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4,125,578. 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) 2,980,909. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,847,584. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,796,600. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 10,903,087. 19 Revenue less expenses. Subtract line 18 from line 12 1,493,358.	6,735,175.	15,003,663.	433,060.	353,929.	5,228,210.	7,852,802.	0.	0.	12,396,445.	23,210,394.	4,125,578.	18,816,193.	0.	0.	2,980,909.	2,886,795.	0.	0.	3,796,600.	2,726,436.	10,903,087.	24,429,424.	1,493,358.	-1,219,030.
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 246,168,356. 21 Total liabilities (Part X, line 26) 6,954,147. 22 Net assets or fund balances. Subtract line 21 from line 20 239,214,209.	Beginning of Current Year	End of Year																						
		246,168,356.	238,471,093.	6,954,147.	6,806,091.	239,214,209.	231,665,002.																		

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 WALTER T. MOORE, PRESIDENT Type or print name and title	Date			
Paid Preparer Use Only	Print/Type preparer's name NASI RAISSIAN Firm's name ▶ ROBERT LEE & ASSOCIATES, LLP Firm's address ▶ 226 AIRPORT PARKWAY, SUITE 350 SAN JOSE, CA 95110	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P01023106
				Firm's EIN ▶ 27-1155496	Phone no. 408.855.6770

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☒ **X**

- 1** Briefly describe the organization's mission:
PENINSULA OPEN SPACE TRUST (POST) PROTECTS AND CARES FOR OPEN SPACE, FARMS AND PARKLAND IN AND AROUND SILICON VALLEY. SINCE ITS FOUNDING IN 1977, POST HAS PROTECTED MORE THAN 70,000 ACRES OF LAND IN SAN MATEO, SANTA CLARA AND SANTA CRUZ COUNTIES.
- 2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ 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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
- 4a** (Code:) (Expenses \$ **19,023,022.** including grants of \$ **18,738,196.**) (Revenue \$)
AS PART OF POST'S WORK TO ADDRESS URGENT CONSERVATION NEEDS IN AND AROUND SILICON VALLEY, POST PROTECTED A TOTAL OF 9,199 NEW ACRES THROUGH FEE TITLE ACQUISITION OR UNDER CONSERVATION EASEMENT IN FISCAL YEAR 2012. WE ALSO TRANSFERRED A TOTAL OF 5,219 ACRES TO PUBLIC AGENCIES FOR PERMANENT PROTECTION. PROJECT HIGHLIGHTS ARE LISTED BELOW:
IN AUGUST, 2011, POST TRANSFERRED 140 ACRES AT PILLAR POINT BLUFF NEAR MOSS BEACH TO SAN MATEO COUNTY. THE HABITAT-RICH BLUFF TOP WAS ADDED TO THE COUNTY'S JAMES V. FITZGERALD MARINE RESERVE FOR PERMANENT PROTECTION. THE PROPERTY INCLUDES A PORTION OF THE CALIFORNIA COASTAL TRAIL AND IS A POPULAR SPOT WITH HIKERS AS WELL AS WITH A WIDE VARIETY OF WILDLIFE, INCLUDING BIRDS AND SEA CREATURES.
- 4b** (Code:) (Expenses \$ **1,999,704.** including grants of \$ **78,000.**) (Revenue \$ **321,548.**)
POST CURRENTLY HOLDS 30,098 ACRES IN FEE OR UNDER EASEMENT. THE ORGANIZATION HAS AN ESTABLISHED STEWARDSHIP PROGRAM FOR THE LANDS IT OWNS THAT INCLUDES RESOURCE CONSERVATION PLANNING AND MANAGEMENT, ALONG WITH ACTIVE USES OF LAND FOR CONSERVATION GRAZING AND AGRICULTURE WHERE APPROPRIATE. POST WORKS TO PROTECT AND MANAGE LANDS IN ITS POSSESSION THROUGH SITE SPECIFIC STEWARDSHIP PLANS FOR THE NATURAL RESOURCES ON EACH PROPERTY. POST STAFF AND VOLUNTEERS ACTIVELY MONITOR THE ACREAGE ON WHICH POST HOLDS EASEMENTS OR RESTRICTIONS. VOLUNTEERS ALSO ASSIST WITH STEWARDSHIP PROJECTS ON POST OWNED LAND. IN TOTAL, POST VOLUNTEERS CONTRIBUTED AN IMPRESSIVE 3,847 HOURS OF WORK TIME IN THE PAST FISCAL YEAR. POST ALSO CONTINUES TO PLAY A LEADERSHIP ROLE AS PART OF A WORKING GROUP OF ORGANIZATIONS AND AGENCIES ADDRESSING THE
- 4c** (Code:) (Expenses \$ **571,648.** including grants of \$) (Revenue \$ **32,381.**)
TO FURTHER ITS COMMUNITY OUTREACH AND EDUCATION EFFORTS, IN FISCAL YEAR 2012 THE ORGANIZATION HOSTED FOUR SPEAKERS AS PART OF ITS 19TH ANNUAL WALLACE STEGNER LECTURE SERIES, WHICH IS OPEN TO THE PUBLIC. THIS YEAR'S SERIES FEATURED FOUR SPEAKERS: AUTHOR AND SUSTAINABLE FARMER JOEL SALATIN, ETHNOBOTANIST AND AUTHOR WADE DAVIS, SCIENCE JOURNALIST AND AUTHOR ELIZABETH KOLBERT, AND WILDLIFE PHOTOGRAPHER FRANS LANTING. POST ALSO DEVELOPED AND MAILED THREE ISSUES OF ITS DONOR NEWSLETTER, "LANDSCAPES," TO APPROXIMATELY 8,000 FAMILIES AND OTHER INTERESTED PEOPLE. THE NEWSLETTER REPORTED ON POST'S LAND CONSERVATION WORK THROUGHOUT THE YEAR, INCLUDING ACQUISITIONS OF LAND AND CONSERVATION EASEMENTS AS WELL AS PROPERTY TRANSFERS AND LAND STEWARDSHIP PROJECTS (AS REPORTED ABOVE). POST ALSO CONTINUED ITS PARTICIPATION IN THE
- 4d** Other program services (Describe in Schedule O.)
 (Expenses \$ including grants of \$) (Revenue \$)
- 4e Total program service expenses** **21,594,374.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
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? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
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? <i>If "Yes," complete Schedule C, Part III</i>	5	X
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? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7 X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
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? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e 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)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
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? <i>If "Yes," complete Schedule J</i>	23 X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a X	
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
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? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36 X	
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 66		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
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 36		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response to any question in this Part VI ☒**Section A. Governing Body and Management**

	1a	1b	Yes	No
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.	14			
b Enter the number of voting members included in line 1a, above, who are independent		14		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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

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, physical address, and telephone number of the person who possesses the books and records of the organization: **HEATHER KANTOR - 650-854-7696**
222 HIGH STREET, PALO ALTO, CA 94301

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

Check if Schedule O contains a response to any question 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRAD O'BRIEN CHAIRMAN & DIRECTOR	5.00	X		X				0.	0.	0.
(2) ANDY CUNNINGHAM DIRECTOR	1.00	X						0.	0.	0.
(3) DENNIS DEBROECK DIRECTOR	1.00	X						0.	0.	0.
(4) DIANE GREENE DIRECTOR	2.00	X						0.	0.	0.
(5) DONNA DUBINSKY DIRECTOR	2.00	X						0.	0.	0.
(6) F. WARD PAINE DIRECTOR	2.00	X						0.	0.	0.
(7) JAN GARROD DIRECTOR	2.00	X						0.	0.	0.
(8) JOHN CHAMBERLAIN DIRECTOR	1.00	X						0.	0.	0.
(9) LARRY JACOBS DIRECTOR	2.00	X						0.	0.	0.
(10) MARK WAN DIRECTOR	3.00	X						0.	0.	0.
(11) MATT MILLER DIRECTOR	2.00	X						0.	0.	0.
(12) PAUL NEWHAGEN DIRECTOR	3.00	X						0.	0.	0.
(13) ROBERT C. KIRKWOOD DIRECTOR	2.00	X						0.	0.	0.
(14) SANDRA THOMPSON DIRECTOR	1.00	X						0.	0.	0.
(15) WALTER T. MOORE PRESIDENT	40.00			X				229,733.	0.	32,797.
(16) KARIE THOMSON SECRETARY	1.00			X				0.	0.	0.
(17) HEATHER KANTOR TREASURER	40.00			X				175,880.	0.	23,486.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) PATRICIA SUVARI VICE PRESIDENT, ACQUISITION & GENERA	40.00			X				0.	0.	0.
(19) ANNE TRELA VICE PRESIDENT ADVANCEMENT	40.00			X				155,450.	0.	22,047.
(20) PAUL RINGGOLD VICE PRESIDENT, STEWARDSHIP	40.00			X				102,116.	0.	15,553.
(21) MARK DAWSON FORMER DIRECTOR, CAPITAL GIFTS	40.00					X		117,927.	0.	17,410.
(22) AUDREY C. RUST FORMER PRESIDENT	40.00						X	362,943.	0.	20,379.
1b Sub-total								1,144,049.	0.	131,672.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,144,049.	0.	131,672.

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 **6**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

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
NONE		
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 0		

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	15,003,663.			
	g	Noncash contributions included in lines 1a-1f: \$		2,674,028.			
	h	Total. Add lines 1a-1f		15,003,663.			
Program Service Revenue	2 a	RENTAL INCOME	Business Code 531390	309,263.	309,263.		
	b	LECTURE SERIES INCOME	611600	32,381.	32,381.		
	c	MISC PROGRAM INCOME	900099	12,285.	12,285.		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		353,929.			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		4580945.		
4		Income from investment of tax-exempt bond proceeds					
5		Royalties					
6 a		Gross rents	(i) Real (ii) Personal				
b		Less: rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7 a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
b		Less: cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss)		3271857.		3,271,857.	
8 a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
b		Less: direct expenses	b				
c		Net income or (loss) from fundraising events					
9 a		Gross income from gaming activities. See Part IV, line 19	a				
b		Less: direct expenses	b				
c		Net income or (loss) from gaming activities					
10 a		Gross sales of inventory, less returns and allowances	a				
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions.		23,210,394.	353,929.	0.	7,852,802.	

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) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	18,816,193.	18,816,193.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	945,506.	441,819.	232,367.	271,320.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,573,035.	750,391.	227,634.	595,010.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	85,578.	41,964.	10,978.	32,636.
9 Other employee benefits	167,944.	75,102.	23,354.	69,488.
10 Payroll taxes	114,732.	53,274.	17,496.	43,962.
11 Fees for services (non-employees):				
a Management				
b Legal	58,129.	42,271.	15,858.	
c Accounting	32,421.		32,421.	
d Lobbying	12,000.	12,000.		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	356,490.		356,490.	
g Other	1,152,716.	636,238.	16,932.	499,546.
12 Advertising and promotion				
13 Office expenses	214,713.	76,022.	9,292.	129,399.
14 Information technology	5,602.	2,788.	581.	2,233.
15 Royalties				
16 Occupancy	13,467.	13,467.		
17 Travel	28,266.	21,751.	1,761.	4,754.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	61,913.	20,954.	14,302.	26,657.
20 Interest	230.		230.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	134,615.	53,590.	16,733.	64,292.
23 Insurance	77,893.	55,990.	4,522.	17,381.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LAND MAINTENANCE	265,034.	265,034.		
b EVENTS/DONOR RECOG.	89,068.	6,053.	2,055.	80,960.
c PROPERTY TAXES	86,325.	86,325.		
d AMORTIZATION ASSET OBLI	57,029.	57,029.		
e All other expenses	80,525.	66,119.	4,460.	9,946.
25 Total functional expenses. Add lines 1 through 24e	24,429,424.	21,594,374.	987,466.	1,847,584.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	886,741.	2	848,913.
	3 Pledges and grants receivable, net	1,109,336.	3	2,121,384.
	4 Accounts receivable, net	8,244,097.	4	9,727,342.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net	13,622,500.	7	13,289,167.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	43,253.	9	58,139.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 6,258,314.		
	b Less: accumulated depreciation	10b 696,833.		
		5,619,215.	10c	5,561,481.
	11 Investments - publicly traded securities	108,904,234.	11	114,616,397.
	12 Investments - other securities. See Part IV, line 11	10,871,617.	12	10,850,319.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	96,867,363.	15	81,397,951.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	246,168,356.	16	238,471,093.	
Liabilities	17 Accounts payable and accrued expenses	544,738.	17	557,087.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	12,180.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	6,409,409.	25	6,236,824.
	26 Total liabilities. Add lines 17 through 25	6,954,147.	26	6,806,091.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	232,736,851.	27	224,742,187.
	28 Temporarily restricted net assets	5,841,828.	28	6,312,215.
	29 Permanently restricted net assets	635,530.	29	610,600.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	239,214,209.	33	231,665,002.	
34 Total liabilities and net assets/fund balances	246,168,356.	34	238,471,093.	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	23,210,394.
2	Total expenses (must equal Part IX, column (A), line 25)	2	24,429,424.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,219,030.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	239,214,209.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-6,330,177.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	231,665,002.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
b Were the organization's financial statements audited by an independent accountant?	X	
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.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
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?		X
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.		

Form 990 (2011)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

PENINSULA OPEN SPACE TRUST

Employer identification number

94-2392007

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

The organization is not a private foundation because it is: (For lines 1 through 11, 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.)

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 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.)

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

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box _____

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____

(ii) A family member of a person described in (i) above? _____

(iii) A 35% controlled entity of a person described in (i) or (ii) above? _____

h Provide the following information about the supported organization(s).

[illegible]

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

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 fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	21,630,267.	13,682,464.	3,941,686.	6,735,175.	15,003,663.	60,993,255.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	21,630,267.	13,682,464.	3,941,686.	6,735,175.	15,003,663.	60,993,255.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,865,849.
6 Public support. Subtract line 5 from line 4.						54,127,406.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	21,630,267.	13,682,464.	3,941,686.	6,735,175.	15,003,663.	60,993,255.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	5,577,256.	4,948,168.	3,999,427.	4,744,897.	4,902,493.	24,172,241.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						85,165,496.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	63.56 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	54.98 %
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 9 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15		%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17		%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		%

19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2011

**Open to Public
Inspection**

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

If the organization answered "Yes" to 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" to 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" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization PENINSULA OPEN SPACE TRUST	Employer identification number 94-2392007
---	---

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$

3 Volunteer hours ▶

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-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

LHA

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		12,000.													
c Total lobbying expenditures (add lines 1a and 1b)		12,000.													
d Other exempt purpose expenditures		24336566.													
e Total exempt purpose expenditures (add lines 1c and 1d)		24348566.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<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 instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount	903,596.	531,399.	695,154.	1,000,000.	3,130,149.
b Lobbying ceiling amount (150% of line 2a, column(e))					4,695,224.
c Total lobbying expenditures	200,000.	400,000.	325,500.	12,000.	937,500.
d Grassroots nontaxable amount	225,899.	132,850.	173,789.	250,000.	782,538.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,173,807.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

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 to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

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

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**

▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

PENINSULA OPEN SPACE TRUST

Employer identification number

94-2392007

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate 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? <input type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

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

<input checked="" type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input checked="" type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input checked="" type="checkbox"/> 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 Tax Year
a Total number of conservation easements	2a 33
b Total acreage restricted by conservation easements	2b 11,715.00
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 0

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, and enforcing conservation easements during the year ▶ 2309

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 89,165.

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 XIV, 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" to 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 XIV, 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) Revenues included in 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 Revenues included in 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 XIV.

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" to 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 XIV and complete the following table:

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

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	711,826.	556,034.	470,118.		
b Contributions	-24,930.	60,030.	25,000.		
c Net investment earnings, gains, and losses	-644.	112,310.	60,916.		
d Grants or scholarships					
e Other expenditures for facilities and programs	26,489.	16,548.			
f Administrative expenses					
g End of year balance	659,763.	711,826.	556,034.		

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

- a Board designated or quasi-endowment ☐ .00 %
 b Permanent endowment ☐ 92.50 %
 c Temporarily restricted endowment ☐ 7.50 %

The percentages in 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:

- (i) unrelated organizations
 (ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,351,899.		2,351,899.
b Buildings		3,522,523.	469,670.	3,052,853.
c Leasehold improvements				
d Equipment		383,892.	227,163.	156,729.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				5,561,481.

Part VII Investments - Other Securities. 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)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description		(b) Book value
(1)	OTHER RECEIVABLE	42,301.
(2)	ASSET OBLIGATION	865,728.
(3)	LAND HELD FOR CONSERVATION	80,325,422.
(4)	PROPERTY HELD FOR SALE	164,500.
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)		81,397,951.

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) AGENCY TRUST FUNDS	582,521.	
(3) LIABILITY UNDER CRUT	2,926,217.	
(4) CONDITIONAL ASSET RETIREMENT		
(5) OBLIGATIONS	1,807,247.	
(6) STEWARDSHIP FUND	920,839.	
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶		6,236,824.

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	23,210,394.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	24,429,424.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-1,219,030.
4	Net unrealized gains (losses) on investments	4	-6,330,177.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	-6,330,177.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-7,549,207.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	16,858,627.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-6,330,177.
b	Donated services and use of facilities	2b	334,900.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	-356,490.
e	Add lines 2a through 2d	2e	-6,351,767.
3	Subtract line 2e from line 1	3	23,210,394.
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 XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	23,210,394.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	24,407,834.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	334,900.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	-356,490.
e	Add lines 2a through 2d	2e	-21,590.
3	Subtract line 2e from line 1	3	24,429,424.
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 XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	24,429,424.

Part XIV Supplemental Information

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

PART V, LINE 4: LANE STEWARDSHIP ENDOWMENT: THESE FUNDS MAY BE USED

FOR EXPENSES TO MAINTAIN TRAILS, REMOVE INVASIVE AND EXOTIC SPECIES,

UNDERTAKE EROSION PREVENTION AND REPAIR, AND RESTORE PLANT AND ANIMAL

HABITATS.

STEWARDSHIP ACTION VENTURES ENDOWMENT: THESE FUNDS WILL BE USED FOR

FORWARD-LOOKING STEWARDSHIP ACTIVITIES THAT WILL HELP ENSURE THE

PRESERVATION OF KEY RESOURCES ON POST-PROTECTED LANDS INTO THE FUTURE.

WILBUR'S WATCH ENDOWMENT: THIS GRANT IS RESTRICTED TO ACTIVITIES RELATED TO

Part XIV Supplemental Information (continued)

THE MAINTENANCE OF THE TRAIL AT WILBUR'S WATCH ON POST'S CLOVERDALE PROPERTY. THIS INCLUDES ANNUAL STEWARDSHIP SUCH AS MOWING, PAMPAS GRASS REMOVAL, AND MONITORING; REPLACEMENT OF ITEMS SUCH AS THE BENCH, TELESCOPE, AND SIGNAGE; AND REPAIR OF THE TRAIL.

PART X, LINE 2: THE ORGANIZATION EVALUATES ITS UNCERTAIN TAX POSITIONS AND WILL RECOGNIZE A LOSS CONTINGENCY WHEN IT IS PROBABLE THAT A LIABILITY HAS BEEN INCURRED AS OF THE DATE OF THE FINANCIAL STATEMENTS AND THE AMOUNT OF THE LOSS CAN BE REASONABLY ESTIMATED. THE AMOUNT RECOGNIZED IS SUBJECT TO ESTIMATE AND MANAGEMENT JUDGMENT WITH RESPECT TO THE LIKELY OUTCOME OF EACH UNCERTAIN TAX POSITION. THE AMOUNT THAT IS ULTIMATELY SUSTAINED FOR AN INDIVIDUAL UNCERTAIN TAX POSITION FOR ALL UNCERTAIN TAX POSITIONS IN THE AGGREGATE COULD DIFFER FROM THE AMOUNT RECOGNIZED. AS OF JUNE 30, 2012 MANAGEMENT DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

INVESTMENT MANAGEMENT FEES	-356,490.
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PART XIII, LINE 2D - OTHER ADJUSTMENTS:

INVESTMENT MANAGEMENT FEES	-356,490.
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**SCHEDULE I
(Form 990)**Department of the Treasury
Internal Revenue Service**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States****Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.****▶ Attach to Form 990.**

OMB No. 1545-0047

2011**Open to Public
Inspection**

Name of the organization

PENINSULA OPEN SPACE TRUST**Employer identification number****94-2392007****Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐ **▶**

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEMPERVIRENS FUND 419 SOUTH SAN ANTONIA RD. SUITE 211 LOS ALTOS, CA 94022	94-2155097	501(C)(3)	239,226.	0.			STEWARDSHIP PROJECT- CASTLEROCK
SAN MATEO COUNTY PARKS 455 COUNTY CENTER, 4TH FLOOR REDWOOD CITY, CA 94063	94-3306697	GOVERNMENT AGENCY	0.	1,973,199.	APPRAISAL	LAND	TRANSFER OF PILLAR POINT TO SAN MATEO COUNTY PARKS
NATIONAL PARKS SERVICE 300 BUSH STREET, SUITE 500 SAN FRANCISCO, CA 94104	52-1086761	GOVERNMENT AGENCY	0.	13,029,170.	APPRAISAL	LAND	TRANSFER OF RANCHO CORRAL DE TIERRA TO THE NATIONAL PARKS SERVICE
COASTSIDE LAND TRUST P.O. BOX 3205 HALF MOON BAY, CA 94019	94-3290067	501(C)(3)	0.	823,872.	APPRAISAL	LAND	TRANSFER OF WAVECREST TO THE COASTSIDE LAND TRUST
CITY OF HALF MOON BAY 201 MEDIO AVE HALF MOON BAY, CA 94019	93-1219763	GOVERNMENT AGENCY	0.	666,065.	APPRAISAL	LAND	TRANSFER OF WAVECREST PARCELS TO THE CITY OF HALF MOON BAY
MIDPENINSULA REGIONAL OPEN SPACE DISTRICT - 330 DISTEL CIRCLE - LOS ALTOS, CA 94022	26-3602066	GOVERNMENT AGENCY	0.	2,006,661.	APPRAISAL	LAND	TRANSFER OF MADONNA CREEK PROPERTY TO MROSD

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶** **6.**

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.**Schedule I (Form 990) (2011)**

Part II	Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)
----------------	--

[illegible]

Part III**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV**Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: FOR GRANTS RECEIVED, POST MONITORS THESE FUNDS THROUGH EXTENSIVE BUDGET TRACKING AND REPORTING ON THE USE OF THESE FUNDS TO THE GRANTING ORGANIZATIONS. REPORTS DETAILING THE USE OF FUNDS ARE TYPICALLY SUBMITTED TO THE GRANTING ORGANIZATION AT THE INTERIM OF THE GRANT PERIOD, THE END, OR BOTH. IN MOST CASES, FUNDS MUST BE COMPLETELY SPENT AT THE TIME OF THE FINAL REPORT, ENSURING THAT THE GRANTING ORGANIZATION IS MADE FULLY AWARE OF POST'S USE OF THE GRANTED FUNDS.

FOR GRANTS MADE, POST MONITORS THE USE OF THESE FUNDS THROUGH CLOSE

Part IV Supplemental Information

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

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ **Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

PENINSULA OPEN SPACE TRUST

Employer identification number

94-2392007

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 in 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 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in 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. Explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" 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 in 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 section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in 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" to line 5a or 5b, describe in Part III.

6 For persons listed in 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" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 WALTER T. MOORE	(i)	229,571.	0.	162.	16,964.	15,833.	262,530.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 HEATHER KANTOR	(i)	175,632.	0.	248.	5,733.	17,753.	199,366.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 ANNE TRELA	(i)	155,288.	0.	162.	11,401.	10,646.	177,497.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 AUDREY C. RUST	(i)	311,072.	0.	51,871.	13,495.	6,884.	383,322.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ **Complete if the organization answered**
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No. 1545-0047

2011

**Open To Public
Inspection**

Name of the organization

PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2011

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
LARRY JACOBS	DIRECTOR OF POST	18,200.	SEE PART V		X

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: LARRY JACOBS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

DIRECTOR OF POST

(C) AMOUNT OF TRANSACTION \$ 18,200.

(D) DESCRIPTION OF TRANSACTION: SEE PART V - CONTRACT BETWEEN DIRECTOR LARRY JACOBS OF JACOBS FARMS AND POST TO LEASE 52 ACRES IN FY 2012 FOR ORGANIC FARMING.

(E) SHARING OF ORGANIZATION REVENUES? = NO

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2011

Open to Public
Inspection

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

Name of the organization **PENINSULA OPEN SPACE TRUST** Employer identification number **94-2392007**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	46	564,675.	AVG HI/LOW GIFT DATE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other	X	1	2,106,500.	APPRAISAL
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>WINE, FOOD AN</u>)	X	7	2,852.	FAIR VALUE
26 Other ► (_____)				
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 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

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 did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a	X	
33		

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

Schedule M (Form 990) (2011)

Part II

Supplemental Information. Complete this part to 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.

SCHEDULE M, LINE 32B: POST DIRECTS OUR INVESTMENT ADVISORS, SANDHILL
GLOBAL ADVISORS, TO SELL ALL NONCASH CONTRIBUTIONS OF STOCKS OR
SECURITIES UPON RECEIPT

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

PENINSULA OPEN SPACE TRUST

Employer identification number

94-2392007

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

IN SEPTEMBER 2011, POST PURCHASED 160 ACRES OF CONSERVATION LAND IN SOUTH SANTA CLARA COUNTY NEAR MORGAN HILL. THE LAND, ADJACENT TO RANCHO CANADA DEL ORO OPEN SPACE PRESERVE, CONTAINS STEEP SLOPES AND CHAPARRAL-COVERED HILLSIDES AND IS STRATEGICALLY LOCATED TO HELP PRESERVE WILDLIFE CORRIDORS AND EXPAND PUBLIC TRAILS BETWEEN THREE MAJOR PARKS: ALMADEN QUICKSILVER COUNTY PARK, SIERRA AZUL OPEN SPACE PRESERVE, AND RANCHO CANADA DEL ORO OPEN SPACE PRESERVE.

WORKING WITH ITS CONSERVATION PARTNERS TOWARD PERMANENT LAND PROTECTION, POST COMPLETED A LARGE AND IMPORTANT PROPERTY ACQUISITION IN FISCAL YEAR 2012: THE 8,532-ACRE CEMEX REDWOODS PROPERTY IN DAVENPORT. THE PROPERTY WAS ACQUIRED IN DECEMBER 2011 THROUGH POST'S PARTNERSHIP IN THE LIVING LANDSCAPE INITIATIVE, A COLLABORATION OF BAY AREA LAND CONSERVATION GROUPS INCLUDING POST, THE LAND TRUST OF SANTA CRUZ COUNTY, THE NATURE CONSERVANCY, SAVE THE REDWOODS LEAGUE AND SEMPERVIRENS FUND. THE ACQUISITION PRESERVES LARGE SWATHS OF REDWOOD FOREST AND WATERSHED LAND AND IS THE LARGEST LAND PROTECTION PROJECT IN THE HISTORY OF POST.

WITH THE CEMEX REDWOODS ACQUISITION, POST LAUNCHED A NEW PROPERTY PROTECTION INITIATIVE CALLED THE HEART OF THE REDWOODS CAMPAIGN. THE EFFORT SEEKS TO PROTECT 20,000 ACRES OF THE LAST REMAINING REDWOOD FORESTS IN THE SANTA CRUZ MOUNTAINS OVER THE NEXT FIVE YEARS. POST HOPES TO RAISE \$50 MILLION IN PUBLIC AND PRIVATE FUNDS FOR REDWOOD

Name of the organization	Employer identification number
PENINSULA OPEN SPACE TRUST	94-2392007

PROTECTION THROUGH THIS EFFORT, AND TO DATE HAS RAISED \$20.9 MILLION TOWARD THAT GOAL.

ALSO IN FISCAL YEAR 2012, POST COMPLETED THE LONG-AWAITED TRANSFER OF ITS RANCHO CORRAL DE TIERRA PROPERTY TO THE GOLDEN GATE NATIONAL RECREATION AREA (GGNRA). SEVEN YEARS AGO, CONGRESS APPROVED A BOUNDARY EXPANSION TO INCLUDE THE VAST MAJORITY OF THE 4,262-ACRE PROPERTY AS PART OF THE GGNRA, WHICH IS OWNED AND MANAGED BY THE NATIONAL PARK SERVICE. IN THE INTERVENING YEARS, POST PURSUED FEDERAL APPROPRIATIONS FOR THE PROJECT. ONCE THAT PROCESS WAS COMPLETE, WE WERE ABLE TO TRANSFER NEARLY 4,000 ACRES OF THE PROPERTY TO THE NATIONAL PARK SERVICE (NPS) SO THAT IT CAN SERVE AS THE SOUTHERN GATEWAY INTO THE GGNRA LANDS, WHICH ARE OWNED AND MANAGED BY THE NPS.

IN APRIL 2012, POST ACQUIRED THE 117-ACRE HENDRYS CREEK PROPERTY IN LOS GATOS. BORDERED ON THREE SIDES BY THE SIERRA AZUL OPEN SPACE PRESERVE, THE SOUTH BAY LANDSCAPE IS RICH IN WATER RESOURCES AND FISH HABITAT AND IS STRATEGICALLY LOCATED FOR THE FUTURE EXPANSION OF SURROUNDING PUBLIC OPEN SPACE AND PARKLAND.

FINALLY, IN JUNE 2012, POST ANNOUNCED A PARTNERSHIP PROJECT WITH SAVE THE REDWOODS LEAGUE AND THE PORTOLA AND CASTLE ROCK FOUNDATION TO KEEP PORTOLA REDWOODS STATE PARK OPEN. DURING THE RECENT BUDGET CRISIS FACING CALIFORNIA STATE PARKS, PORTOLA REDWOODS WAS PLACED ON THE IMMINENT STATE PARKS CLOSURE LIST. IN RESPONSE, POST AND ITS PARTNERS DEvised A PLAN TO PROVIDE SHORT-TERM OPERATING FUNDS TO KEEP THE PARK OPEN FOR THE NEXT 12 MONTHS AS WELL AS SUPPORT FOR LONG-TERM INFRASTRUCTURE IMPROVEMENTS AND SUSTAINABILITY PLANNING SO THAT THE PARK CAN HELP

Name of the organization	PENINSULA OPEN SPACE TRUST	Employer identification number	94-2392007
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SUPPORT ITSELF WITH INCREASED REVENUE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

THREAT POSED BY HYPERICUM CANARIENSE, A HIGHLY DAMAGING AND AGGRESSIVE
INVASIVE EXOTIC PLANT THAT IS SPREADING ALONG THE SAN MATEO COAST.

POST CONTINUES TO HOLD AND MANAGE THE 5,777 ACRE CLOVERDALE COASTAL
RANCHES. POST ACQUIRED THIS LAND COMPLEX IN 1997. AT THE TIME, THE
PROPERTY TOTALED 6,743 ACRES; OVER THE YEARS, POST HAS TRANSFERRED
PORTIONS OF THE PROPERTY SUBJECT TO CONSERVATION EASEMENT TO OTHER
OWNERS. A RESIDENT RANCH MANAGER IS ON SITE TO MANAGE EROSION CONTROL,
COORDINATE FUELS REDUCTION PROJECTS, PERFORM HABITAT RESTORATION
ACTIVITIES, MANAGE NON-NATIVE PLANT SPECIES REMOVAL PROJECTS, AND
OPERATE A PUBLIC TRAIL. IN THE PAST FISCAL YEAR, POST CONTINUES TO
WORK TO ELIMINATE THE INVASIVE EXOTIC WEED HYPERICUM CANARIENSE FROM
THE PROPERTY, CONTROL PAMPAS GRASS AND IMPROVE CRITICAL POND AND
WETLAND HABITAT FOR THREATENED AND ENDANGERED SPECIES ON THE LAND,
INCLUDING THE CALIFORNIA RED-LEGGED FROG AND THE SAN FRANCISCO GARTER
SNAKE. IN FISCAL YEAR 2012, POST ALSO CONTINUED ITS EFFORTS TO CONTROL
EROSION PRONE AREAS ON THE PROPERTY. POST ALSO CONTINUES TO CONDUCT
SIMILAR RESOURCE PROTECTION AND RESTORATION PROJECTS ON ITS OTHER FEE
LANDS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

CALIFORNIA COUNCIL OF LAND TRUSTS, AN ASSOCIATION OF LAND CONSERVANCIES
THROUGHOUT CALIFORNIA AND THE BAY AREA OPEN SPACE COUNCIL, AN
ASSOCIATION OF LAND CONSERVATION ORGANIZATIONS THROUGHOUT THE SAN
FRANCISCO BAY AREA REGION.

Name of the organization	Employer identification number
PENINSULA OPEN SPACE TRUST	94-2392007

FORM 990, PART VI, SECTION B, LINE 11: EACH YEAR, PRIOR TO SUBMISSION, THE AUDIT COMMITTEE SHALL ENSURE THAT POST'S FORM 990 IS REVIEWED BY A MEMBER OF THE COMMITTEE OR A DESIGNEE OF THE COMMITTEE WITH APPROPRIATE QUALIFICATIONS. IN ADDITION, THE DRAFT SUBMISSION WILL BE MADE AVAILABLE TO THE BOARD FOR REVIEW AND COMMENT.

FORM 990, PART VI, SECTION B, LINE 12C: WHEN JOINING THE ORGANIZATION'S BOARD OR STAFF, AND ON AN ANNUAL BASIS, BOARD MEMBERS, MEMBERS OF THE FINANCE AND AUDIT COMMITTEE NOT CURRENTLY SERVING ON THE BOARD, AND TOP STAFF COMPLETE A CONFLICT OF INTEREST STATEMENT. IF A CHANGE IN A PERSON'S MATERIAL INTEREST IN A MATTER THAT COULD AFFECT POST OCCURS, THAT PERSON MUST AMEND THE CONFLICT OF INTEREST STATEMENT. ALL DISCLOSURE STATEMENTS SHALL BE SUBMITTED TO THE PRESIDENT AND FILED WITH THE MINUTES. THE CHAIR OF THE BOARD GOVERNANCE COMMITTEE AND PRESIDENT SHALL REVIEW THESE STATEMENTS WITHIN A MONTH OF THEIR SUBMISSION DATE.

FORM 990, PART VI, SECTION B, LINE 15: IT IS THE POLICY OF THE COMPENSATION COMMITTEE TO ANNUALLY REVIEW THE COMPENSATION OF ALL OFFICERS UTILIZING A COMPENSATION STUDY WITH MARKET DATA FROM BAY AREA COMPANIES. THE COMMITTEE ALSO REVIEWS PUBLICLY REPORTED COMPENSATION INFORMATION FROM FORM 990 OF RELEVANT NON-PROFITS. THE COMMITTEE CONSIDERS MULTIPLE FACTORS THAT AFFECT COMPENSATION COMPARISONS SUCH AS GEOGRAPHICAL COST OF LIVING, EXPERIENCE, QUALIFICATIONS, AND PERFORMANCE ACHIEVEMENTS. THIS REVIEW IS CONTEMPORANEOUSLY DOCUMENTED IN THE COMPENSATION COMMITTEE MINUTES.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON

Name of the organization

PENINSULA OPEN SPACE TRUST

Employer identification number

94-2392007

REQUEST. THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE
MADE AVAILABLE VIA THE ORGANIZATION'S WEBSITE EACH YEAR.

FORM 990, PART VII

EXPLANATION OF OFFICER SALARIES

PATRICIA SUVARI, VP OF ACQUISITION AND GENERAL COUNSEL, JOINED THE
ORGANIZATION IN FEBRUARY 2012 AND THEREFORE RECEIVED NO COMPENSATION
FOR THE CALENDAR YEAR ENDING DECEMBER 31, 2011. SHE IS LISTED HERE
BECAUSE SHE WAS AN OFFICER DURING THE TAX YEAR ENDING JUNE 30, 2012.

AUDREY RUST RETIRED AS PRESIDENT AT THE END OF FISCAL YEAR 2011 AND THE
AMOUNTS SHOWN AS COMPENSATION HERE REFLECT PAYMENTS MADE IN CALENDAR
YEAR 2011 PER THE 990 INSTRUCTIONS. MS. RUST DID NOT RECEIVE ANY
COMPENSATION DURING CALENDAR YEAR 2012.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS: -6,330,177.

FORM 990, PART 12. LINE 2C

AUDIT COMMITTEE OVERSIGHT

THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT IS CHARGED WITH THE
OVERSIGHT OF THE AUDIT. THIS PROCESS HAS NOT CHANGED FROM PRIOR YEARS.

Related Organizations and Unrelated Partnerships

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

OMB No. 1545-0047

2011
Open to Public
Inspection

Name of the organization

PENINSULA OPEN SPACE TRUST

Employer identification number
94-2392007

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
LAKE LUCERNE MUTUAL WATER COMPANY - 94-2689518, 222 HIGH STREET, PALO ALTO, CA 94301	DELIVER WATER, FOR IRRIGATION USE ONLY, TO ITS SHAREHOLDERS AT COST	CALIFORNIA	501(C)(12)				X

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

Schedule R (Form 990) 2011

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

[illegible]

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

[illegible]

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Sale of assets to related organization(s)	1f	X
g Purchase of assets from related organization(s)	1g	X
h Exchange of assets with related organization(s)	1h	X
i Lease of facilities, equipment, or other assets to related organization(s)	1i	X
j Lease of facilities, equipment, or other assets from related organization(s)	1j	X
k Performance of services or membership or fundraising solicitations for related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations by related organization(s)	1l	X
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	X
n Sharing of paid employees with related organization(s)	1n	X
o Reimbursement paid to related organization(s) for expenses	1o	X
p Reimbursement paid by related organization(s) for expenses	1p	X
q Other transfer of cash or property to related organization(s)	1q	X
r Other transfer of cash or property from related organization(s)	1r	X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) LAKE LUCERNE MUTUAL WATER COMPANY	D	42,301.	
(2)			
(3)			
(4)			
(5)			
(6)			

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

[illegible]

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

[illegible]