Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury

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

		the Treasury ue Service	►The organization may have to use a copy of this return to satisfy state reporti	ing requirements	S.	Inspection	n
			endar year, or tax year beginning 10/1/2010 , and endin		0/2011		
		applicable:	C Name of organization California Ocean Science Trust	D Employe	r identifica	tion number	_
X	Address	change	Doing Business As	65-126100	6		
1	Name ch	ange	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephon	e number		
	nitial retu	urn	1330 Broadway 1530	(510) 251-8	3320		
1	erminate	ed	City or town, state or country, and ZIP + 4				
	Amended	d return	Oakland CA 94612	G Gross red	ceipts \$	2,1	99,381
	Application	on pending	F Name and address of principal officer:	Is this a group ret	urn for affilia	ates? Yes	X No
			Skyli McAfee 1330 Broadway, Suite 1135, Oakland, CA 94612 H(b)	Are all affiliates in	ncluded?	N/A Yes	No
ı T	ax-exem	npt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a l	ist. (see inst	tructions)	
		-		Croup overmetion	number >	NI/A	
				Group exemption			
_		rganization:		ormation: 2003	M State	e of legal domicile	: CA
P	art I		nmary			 	
	1	-		e that the bes			
Φ		to Califo	rnia policies and ocean management to successfully maintain a healthy, res	silient, and pro	ductive o	cean and coa	st.
anc							
Activities & Governance							
Š	2		nis box if the organization discontinued its operations or disposed of more than 25		1 1		
ૐ	3		of voting members of the governing body (Part VI, line 1a)		3		10
ties	4		of independent voting members of the governing body (Part VI, line 1b)		4		10
Ę	5		mber of individuals employed in calendar year 2010 (Part V, line 2a)		5		9
ĕ	6		mber of volunteers (estimate if necessary)		6		11
	7a		related business revenue from Part VIII, column (C), line 12		7a		0
	b	Net unre	elated business taxable income from Form 990-T, line 34		7b		0
		0		Prior Year	4.000	Current Yea	
ē	8		tions and grants (Part VIII, line 1h)		1,833	2,1	79,578
Revenue	9		service revenue (Part VIII, line 2g)		9,000		12,028
Re	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)		770		1,470
	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4.07	503	0.4	6,305
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,87	2,106	2,1	99,381
	13		and similar amounts paid (Part IX, column (A), lines 1–3)		0		0
	14		paid to or for members (Part IX, column (A), line 4)	55		c	06 550
ses	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)	33	1,950		
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)		0		0
Ä	17		odraising expenses (Part IX, column (D), line 25) ► 9,812 penses (Part IX, column (A), lines 11a–11d, 11f–24f)	1 01	6,612		40,675
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25).		8,562		47,233
	19		e less expenses. Subtract line 18 from line 12		3,544		52,148
or es	13	rtevenue		ginning of Curren		End of Yea	
Net Assets or Fund Balances	20	Total as	sets (Part X, line 16)		9,306		11,611
Ass d Ba	21		pilities (Part X, line 26)		6,298		33,960
F Ret	22		ets or fund balances. Subtract line 21 from line 20		3,008		77,651
Pa			nature Block	,		,-	
			y, I declare that I have examined this return, including accompanying schedules and statements, a	and to the best of n	ny knowledg	je	
and I	belief, it i	is true, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which p	oreparer has any k	nowledge.		
Sig	ın						
He			Signature of officer	Date			
			Type or print name and title			T = =:	
ь.	اء.	Print	/Type preparer's name Preparer's signature	Date	Check	PTIN if	
Pai		. Gha	ffari Zaragoza LLP		self-employe	L	' 1
	parer	5		Firm's EIN ▶			•
Us	e Only	у —	-				
			s address • 1330 Broadway, Suite 430, Oakland, CA 94612	Phone no.	(510) 83		 _
May	/the IF	⊰S diecue	s this return with the preparer shown above? (see instructions)			X Vas	No

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ► 1,157,785

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	_		NO
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Χ	
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		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	N/A	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		Χ
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Χ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		Х
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,"</i>			
	complete Schedule D, Part IV	9		Χ
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			_
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		Χ
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	11a	Х	
	Schedule D, Part VI			
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Χ
С	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		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Χ
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Χ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Χ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes,"</i>			
46	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	146		v
15	business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i> . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b		X
13	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Χ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13		
	to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
••	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Χ
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Χ
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20h	N/A	

Par	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Χ
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	N/A	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	١		
	to defease any tax-exempt bonds?		N/A	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	N/A	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	05-		\ \
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		_
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		Х
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			,,
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Χ
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		Χ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>			.,
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			\ \
22	If "Yes," complete Schedule N, Part II	32		Х
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		Х
34	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
	Did the organization receive any payment from or engage in any transaction with a	- 00		
_	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
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	Х	
	· · · · · · · · · · · · · · · · · · ·		990	(2010)

Part V Statements Regarding Other IRS Filings and Tax Complian
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	Check 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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c	Х	
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 9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
٥-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)	0-		V
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	N/A	Х
b 42	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30	IN/A	
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Χ
b	If "Yes," enter the name of the foreign country: ► N/A	-ra		$\stackrel{\wedge}{=}$
~	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		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		N/A	
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		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	N/A	1
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		Χ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	N/A	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
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	N 1 / A	Χ
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	_	N/A	
h o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	/n	N/A	
8	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	N/A	
9	Sponsoring organizations maintaining donor advised funds.		13//	
а	Did the organization make any taxable distributions under section 4966?	9a	N/A	
b	Did the organization make a distribution to a donor, donor advisor, or related person?		N/A	
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b N/A			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	N/A	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40	A / / ·	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	N/A	
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
C 1/1-a	Enter the amount of reserves on hand	14a		X
14a b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14a 14b	NI/Δ	
IJ	in 100, had it lied a Form 120 to report these payments: If two, provide all explanation in soliedule O	ידט	14//7	

Form 990 (2010) California Ocean Science Trust 65-1261006 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

	Check if Schedule O contains a response to any question in this Part VI		. [Χ
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 10			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Χ
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	Does the organization have members or stockholders?	6		Χ
7a	of the governing body?	7a	Х	
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	N/A	
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		Χ
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	ode.)	ı	
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
44-	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	N/A	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		Χ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	па		
		12a	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		,	
	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		Χ
13	Does the organization have a written whistleblower policy?	13	Χ	
14	Does the organization have a written document retention and destruction policy?	14		Х
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?			
	The organization's CEO, Executive Director, or top management official.	15a	N/A	Х
b	Other officers or key employees of the organization	150	IN/A	
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
104	with a taxable entity during the year?	16a		Χ
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	100		7.
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b	N/A	
Sect	ion 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 (501(c)(3)s only	/)		
	available for public inspection. Indicate how you make these available. Check all that apply.			
40	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
20	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: Skyli McAfee (510) 251-83	20		
	organization: ► Skyli McAfee (510) 251-83	<u> </u>		

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)	(B)	Posit	tion ((Chec	C) k all	that ap	(vla	(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director		Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) Stephen Weisberg Chair	1.	Х		Х				0	0	0
(2) Ken Wiseman Vice Chair	1.	Х		Х				0	0	0
(3) Honorable Fred Keeley Secretary/Treasurer	1.	Х		Х				0	0	0
(4) Karen Finn Trustee	1.	Х						0	0	0
(5) Brian E. Baird Trustee	1.	Х						0	0	0
(6) Jonathon Bishop Trustee	1.	Х						0	0	0
(7) Barry Gold Trustee	1.	Х						0	0	0
(8) David Caron Trustee	1.	Х						0	0	0
(9) Leslie Tamminen Trustee	1.	Х						0	0	0
(10) Kenneth Coale Trustee	1.	Х						0	0	0
(11) Skyli McAfee Executive Director	40.			Х				141,000	1,400	0
(12)										
(13)										
(14)										
(15)										
(16)								_		

	990 (2010) California Ocean Science Trus										261006	
P	art VI Section A. Officers, Directors, Tr	ustees, Key Eı	nplo	yees	s, a	nd	High	est	Compensated	Employees	(continu	ed)
	(A)	(B)		. ,	. (0	•			(D)	(E)		(F)
	Name and title	Average hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	nstitutional trustee	Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MIS	con C) f	estimated mount of other npensation from the ganization nd related ganizations
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
(26)												
(27)												
(28)												
1b	Sub-total		٠						141,000	1,4	00	(
С	Total from continuation sheets to Part VII,								0		0	(
	Total (add lines 1b and 1c)	imited to those							141,000 ed more than \$1	•	00	(
	reportable compensation from the organization	n ▶			1							1.4
3	Did the organization list any former officer, dir											Yes No
	employee on line 1a? If "Yes," complete Sche										3	X
4	For any individual listed on line 1a, is the sum the organization and related organizations gre	•							•			
	individual										4	X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "	•			•				•		5	X
Sec	tion B. Independent Contractors											
1	Complete this table for your five highest compound compensation from the organization.	ensated indepe	ndent	t cor	ntra	ctor	s tha	t re	eceived more tha	ın \$100,000 c	f	
	(A) Name and business add	ress							(B) Description of ser	vices	(Compe	
	Amplifier Catalyst 939 Kings	ton Avenue, Pied	mont,	CA	CA S	946	11	MPI	MAE Programmatic 0	Consulting		228,000
		34202, Washingto						Pro	grammtic Consultant	(Monitoring		102,333
	1101200							i		1		
												(
												(

Par	t 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	1a b c d e f	Federated campaigns	1b 1c 1d 1d	0 0 0 1,555,474				
ntrib d otf	q	Noncash contributions included in lines 1a	1f 1-1f: \$	624,104				
Co	h			•	2,179,578			
anc				Business Code	40.000			
Program Service Revenue	l -	Sublease to a environmental nonprofit		900099	12,028	12,028	0	
ě.	b				0	0	0	_
ž	C				0	0	0	
Š	u a				0	0	0	
grar	f	All other program service revenue			0	0	0	
P	a	Total. Add lines 2a–2f		•	12,028		, and the second	
	3	Investment income (including dividence other similar amounts)	ls, interes	t, and	1,470	0	0	1,470
	4	Income from investment of tax-exemp			0	0	_	
	5	Royalties			0	0	0	0
	6a	Gross Rents	0	0				
	b	Less: rental expenses	0	-				
	С	Rental income or (loss)	0	0				
	d	Net rental income or (loss)			0	0	0	0
	7a	Gross amount from sales of (i) s	Securities	(ii) Other				
		assets other than inventory .	0	0				
	b	Less: cost or other basis and sales expenses	0	0				
	С	Gain or (loss)						
Φ	d	Net gain or (loss)			0	0	0	0
Other Revenue	_	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	а	0				
ŏ	b	•		0				
	9a	Net income or (loss) from fundraising of Gross income from gaming activities. See Part IV, line 19		0	0		0	0
	b			0				
					0	0	0	0
		Gross sales of inventory, less returns and allowances		0		·		
	b	Less: cost of goods sold	b	0				
	С	Net income or (loss) from sales of inve	entory	•	0	0	0	C
		Miscellaneous Revenue		Business Code				
	11a	Refund of bank fees		900099	230	0	0	230
	b	Miscellaneous receipts		900099	6,075	0	0	6,075
	С				0			
	d	All other revenue			0	0	0	C
	е	Total. Add lines 11a-11d			6,305			
	12	Total revenue. See instructions.		▶	2.199.381	12.028	0	7.775

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). (A) (B) (C) (D) Do not include amounts reported on lines 6b, Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 0 Grants and other assistance to individuals in the U.S. See Part IV, line 22 0 0 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 0 0 Benefits paid to or for members Compensation of current officers, directors. trustees, and key employees 141,700 53,366 85,097 3,237 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 526,184 287,745 234,367 4,072 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 10,594 5,562 4,831 201 9 70,551 22,727 47,716 108 10 57,529 30,162 26,806 561 Fees for services (non-employees): 11 а 0 0 0 0 b 0 39,063 0 39,063 С 0 0 0 0 Professional fundraising services. See Part IV, line 17 . . . е 0 0 0 0 0 0 Investment management fees f 620,584 527,559 93,025 0 g 0 12 Advertising and promotion 0 0 0 18,394 24,741 0 43,135 13 11,073 5,860 5,213 0 14 Information technology 0 0 15 0 0 81.874 43.781 37.263 16 830 17 42,526 40,000 2,515 11 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . 0 19 Conferences, conventions, and meetings 27,890 24,512 3,329 49 20 0 0 0 0 0 0 21 Payments to affiliates 0 0 Depreciation, depletion, and amortization 22 7,801 4,172 3,550 79 23 8,462 4,525 3,851 86 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) 52,389 52,389 0 Workshop/conference sponsorship 0 Honorarium 5,300 5.300 0 0 С Events 578 0 0 578 0 0 0 0 d 0 0 0 0 е All other expenses 0 0 0 0 Total functional expenses. Add lines 1 through 24f. 1,747,233 1,157,785 579,636 9,812 25 Joint costs. Check here ▶ if following 26 SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Balance Sheet

65-1261006

(A) (B) Beginning of year End of year 520 1 1 520 2 1,384,603 2 1,857,797 3 821,036 818,548 3 4 0 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 5 0 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) 0 6 0 0 7 0 0 8 8 0 8,495 9 20,258 9 Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 11.908 Less: accumulated depreciation 10b 18.210 10c 11 11 0 0 12 Investments—other securities. See Part IV, line 11 0 12 0 13 Investments—program-related. See Part IV, line 11 0 13 0 0 0 14 14 15 6,442 15 2,580 Total assets. Add lines 1 through 15 (must equal line 34) 16 2,239,306 16 2.711.611 17 130,775 17 238,898 18 0 18 0 19 795,062 355,523 19 20 20 0 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. . . 0 21 0 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 0 0 0 23 0 23 Secured mortgages and notes payable to unrelated third parties 24 0 24 Unsecured notes and loans payable to unrelated third parties 450,000 25 0 25 0 26 **Total liabilities.** Add lines 17 through 25 936,298 26 1,033,960 Organizations that follow SFAS 117, check here ► X and **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 1,145,649 27 1,642,432 157,359 28 28 35,219 0 29 29 0 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 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 1,303,008 33 1,677,651 Total liabilities and net assets/fund balances . . . 2.239.306 34 2.711.611

OIIII C	990 (2010) California Ocean Science Trust	03	-1201000	ra	ge 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				Χ
		1			
1	F	1		2,199	
2	F ()	2		1,747	7,233
3	- · · · · · · · · · · · · · · · · · · ·	3			2,148
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,303	3,008
5		5		-77	7,505
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	6		1,677	7,651
Part	XII Financial Statements and Reporting			1	
	Check if Schedule O contains a response to any question in this Part XII				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other N/A If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		_	Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				Х
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	f	20	_	
	the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		2c	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:				
•					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		. 3a	N/A	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	-	- 54		
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	N/A	

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

20**10**

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization
California Ocean Science Trust

►See separate instructions. Inspec

Califo	ornia	Ocean Scien	ce Trust							65-12	261006		
Par				arity Status (All org						struction	ıs.		
The o	orgar		•	ation because it is: (Fo		_		-					
1	Щ	A church, co	nvention of chu	rches, or association o	of churche	es describ	ed in sec	tion 170(b)(1)(A)(i).			
2		A school des	scribed in section	on 170(b)(1)(A)(ii). (At	ttach Sch	edule E.)							
3		A hospital or	a cooperative h	nospital service organiz	zation des	scribed in	section	170(b)(1)	(A)(iii).				
4			search organiza	ation operated in conju	ınction wit	th a hospi	tal describ	oed in se	ction 170	(b)(1)(A)	(iii). En	ter the	
5		An organizat	tion operated for	the benefit of a colleg (Complete Part II.)	ge or univ	ersity owr	ned or ope	erated by	a governr	nental un	it descr	ibed	
6	П			ernment or governmer	ntal unit d	ascrihad i	n section	170/b)/	1)(A)(v)				
7	Х	An organizat	tion that normall	y receives a substantia	al part of					r from the	genera	al publi	С
8	П	described in section 170(b)(1)(A)(vi). (Complete Part II.)											
	H	A community trust described in section 170(b)(1)(A)(vi) . (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross											
9		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 organizat	tion organized a	nd operated exclusive	ly to test t	for public	safety. Se	e sectio	n 509(a)(4).			
11		•	•	nd operated exclusive	•		•				-		
		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		Type II c		e III–Fund					ype III	-Other	
е	П			y that the organization			•	•	ov one or		• .		
				on managers and othe			-	-	-		-		on
		509(a)(1) or	section 509(a)(2	2).									
f		If the organiz	zation received a	a written determination	n from the	IRS that	it is a Typ	e I, Type	II, or Type	e III suppo	orting		
		•	, check this box										
g		-		the organization accep	pted any o	gift or con	tribution f	rom any c	of the				
		following per (i) A pers		or indirectly controls,	aithar alor	ne or tode	ther with	nereone d	lescribed	in (ii)		Yes	No
				erning body of the su		-		•			11g(i)	103	110
				person described in (i)							11g(ii)		
		(iii) A 35%	controlled entit	y of a person describe	ed in (i) or	(ii) above	?				11g(iii)		
h		Provide the f	following informa	ation about the suppor	ted organ	nization(s)	i		1		1		
(i)		of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col. (i) li	organization sted in your document?	the organ col. (i)	ou notify nization in of your oort?	organiza (i) organi	Is the tion in col. ized in the S.?	(vii) Amount support	t of
				(**************************************	Yes	No	Yes	No	Yes	No			
(A)													0
(B)													
(C)													0
(C)													0
(D)													
(E)													0
\ - ,													0

65-1261006 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.)

	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	303,532	908,025	2,108,430	1,861,833	2,179,578	7,361,398
2	Tax revenues levied for the organization's	Í	Í	, ,	, ,	, ,	, ,
	benefit and either paid to or expended on						
	its behalf	0	0	0	0	0	0
3	The value of services or facilities	<u> </u>	J	J	J	J	
•	furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	303,532	908,025	2,108,430	1,861,833	2,179,578	7,361,398
5	The portion of total contributions by each	000,002	000,020	2,100,100	1,001,000	2,170,070	1,001,000
•	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)						260,066
6	Public support. Subtract line 5 from line 4.						7,101,332
_	ion B. Total Support						7,101,002
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
		` '				` ′	
7	Amounts from line 4	303,532	908,025	2,108,430	1,861,833	2,179,578	7,361,398
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
_	sources	18	91	791	770	1,470	3,140
9	Net income from unrelated business						
	activities, whether or not the business is						
	regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or						
	loss from the sale of capital assets		_				
	(Explain in Part IV.)	0	0	1,985	503	6,305	8,793
11	Total support. Add lines 7 through 10					40	7,373,331
12	Gross receipts from related activities, etc. (se					12	25,313
13	First five years. If the Form 990 is for the or						
	organization, check this box and stop here						▶
	ion C. Computation of Public Support						
14	Public support percentage for 2010 (line 6, c	olumn (f) divide	ed by line 11, c	olumn (f))		14	96.31%
15	Public support percentage from 2009 Sched						0.00%
16a	33 1/3% support test-2010. If the organization						
	and stop here. The organization qualifies as						
b	33 1/3% support test-2009. If the organization						
	box and stop here . The organization qualified	es as a publicly	supported org	anization			>
17a	10%-facts-and-circumstances test-2010.	If the organizat	ion did not che	ck a box on lin	e 13, 16a, or 1	6b, and line 14	
	is 10% or more, and if the organization meet	s the "facts-and	d-circumstance	es" test, check t	this box and s	top here. Expl	ain in
	Part IV how the organization meets the "facts	s-and-circumsta	ances" test. Th	e organization	qualifies as a	publicly suppor	ted
	organization			-			
b	10%-facts-and-circumstances test-2009.						
	15 is 10% or more, and if the organization m	-					
	Part IV how the organization meets the "fact						•
	supported organization			•			▶□
18	Private foundation. If the organization did r					s hox and see	- 🗀
	instructions						
							· · · · • 🖊 📖

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.)

800	tion A. Public Support	idei ille lesis	listed below,	piease comp	nete Fart II.)		
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Juic	induity car (or inscar year beginning in)	(a) 2000	(b) 2007	(6) 2000	(d) 2003	(6) 2010	(i) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2	Gross receipts from admissions, merchandise						0
2	sold or services performed, or facilities furnished						
	in any activity that is related to the						
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge			_	_		0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3						0
	received from disqualified persons						0
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						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						
	line 6.)						0
Sec	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,		0		0	J	0
	payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV.)						0
13	Total support. (Add lines 9, 10c, 11,						0
13	and 12.)	0	0	0	0	0	0
14	First five years. If the Form 990 is for the organization						
	organization, check this box and stop here						
Sec	tion C. Computation of Public Support F	Percentage					
15	Public support percentage for 2010 (line 8, column		e 13 column (f))		15	0.00%
16	Public support percentage from 2009 Schedule A, F					16	0.00%
	tion D. Computation of Investment Inco						
17	Investment income percentage for 2010 (line 10c, c			umn (f))		17	0.00%
18	Investment income percentage from 2009 Schedule	. ,	•			18	0.00%
19a	33 1/3% support tests-2010. If the organization di					and line 17 is	_
	not more than 33 1/3%, check this box and stop he	re. The organiza	ation qualifies as	s a publicly suppo	orted organizatio	n	▶
b	33 1/3% support tests-2009. If the organization di	d not check a bo	ox on line 14 or li	ine 19a, and line	16 is more than	33 1/3% and	
	line 18 is not more than 33 1/3%, check this box an	d stop here. The	e organization q	_l ualifies as a pub	licly supported o	rganization	▶
20	Private foundation. If the organization did not ched	ck a hox on line	14 19a or 19h	check this hox a	nd see instructio	ns	•

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

2010

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number California Ocean Science Trust 65-1261006 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. N/A (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 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other Yes No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 N/A Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 during the tax year Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Yes No 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 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. N/A 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. 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: 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:

 Schedule D (Form 990) 2010
 Page 2

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): NA	Par		Organizations Maintaining	Collections of A	rt, His	torical Trea	asures, or C	Other S	imilar Assets (continu	ued)	
Public exhibition d	3				r reco	rds, check ar	ny of the follo	wing tha	at are a significar	ıt		
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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?		use o	f its collection items (check all th	at apply):	N/A							
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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?	а		Public exhibition		d	Loan	or exchange	program	ns			
Preservation for future generations	b		Scholarly research		е	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	С	同	Preservation for future generation	ons		<u> </u>						
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?		Provi			d expl	ain how they	further the or	rganizati	ion's exempt pur	oose in		
Beginning of year balance. 10 Hory Septim V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. 12 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 11 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 13 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X; line 21: 12 Endoing balance. 23 Did the organization include an amount on Form 990, Part X, line 21? 24 Did the organization include an amount on Form 990, Part X, line 21? 25 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 16 Endoing balance. 17 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 18 Eginning of year balance. 19 O O O O O O O O O O O O O O O O O O O	•				u. 07.p.,			. gaa.	one exempt pan	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Beginning of year balance. 10 Hory Septim V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. 12 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 11 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 13 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X; line 21: 12 Endoing balance. 23 Did the organization include an amount on Form 990, Part X, line 21? 24 Did the organization include an amount on Form 990, Part X, line 21? 25 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 16 Endoing balance. 17 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 18 Eginning of year balance. 19 O O O O O O O O O O O O O O O O O O O	5	Durin	g the year, did the organization s	solicit or receive do	nation	s of art. histo	rical treasure	es. or oth	ner similar			
Ny										Ye	s	No
Ny	Parí	· IV	Escrow and Custodial Arra	ingements. Com	nlete	if the organ	ization ansv	vered "	Yes" to Form 9	<u>—</u> 90 Pai		
1				•	•	•	12411011 41101			50, r a.	•	N/A
Included on Form 990, Part X?	1a	Is the					ntributions or	other as	ssets not			
b if "Yes," explain the arrangement in Part XIV and complete the following table: Amount 1c						•				Ye	s	No
C Beginning balance	b											
d Additions during the year				•					A	mount		
e Distributions during the year	С	Begin	ining balance					1c				0
Fending balance Tending ba	d	Additi	ons during the year					1d				
2a Did the organization include an amount on Form 990, Part X, line 21?	е											
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. N/A	f		•									0
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. N/A Table Beginning of year balance	2a		_		ırt X, li	ne 21?				Ye	s X	No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back												
1a Beginning of year balance 0 0 b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 0 0 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations. 3a(i) (ii) related organizations. 3a(ii) \$\frac{1}{3}\$ b b' Yes' No 3a(ii) \$\frac{1}{3}\$ 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 investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 0 0 0 b Buildings 0 0 0 c Leasehold improvements 0 0 0 0 c Leasehold improvements 0 0 0 0 d Equipment 0 55,235 43,327 11,908 e Other 0 0 0 0 <td< th=""><th>Part</th><th>V</th><th>Endowment Funds. Comple</th><th></th><th></th><th></th><th></th><th></th><th></th><th>1</th><th></th><th></th></td<>	Part	V	Endowment Funds. Comple							1		
b Contributions . C Net investment earnings, gains, and losses						-		back	(d) Three years back	(e) Fo	ur years	back
c Net investment earnings, gains, and losses .	_	-		0		0						
and losses . Grants or scholarships			.									
d Grants or scholarships	C											
e Other expenditures for facilities and programs . f Administrative expenses . g End of year balance . 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	d											
and programs			-									
f Administrative expenses .			-									
Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	f											
Board designated or quasi-endowment b Permanent endowment c Term endowment y 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 (iii) related organizations (iii) related organizations (iiii) related organizations (iv) unrelated organizations (iv) related organization	g	End c	of year balance	0		0		0				
b Permanent endowment	2		•	-	e held	l as:						
term endowment	а		- · · · · · · · · · · · · · · · · · · ·			%						
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 (iii) related organizations (iii) related organizations (iii) related organizations (iiii) related organizations (iiii) 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 investment (a) Cost or other basis (investment) (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value C Leasehold improvements C Leasehold improvements C Leasehold improvements C Leasehold improvements C D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D			anoni chaowinchi									
Organization by: Yes No							ما ما ما					
(i) unrelated organizations 3a(i) 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 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. (c) Accumulated depreciation (d) Book value 1a Land 0 0 0 0 b Buildings 0 0 0 0 c Leasehold improvements 0 0 0 0 d Equipment 0 0 0 0 c Other 0 0 0 0	за			possession of the	organi	zation that a	re neid and a	iaministe	erea for the	Г	Voc	No
Column C		-	-							3a(i)	res	NO
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		` '	•									
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 investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 0 0 0 0 0 b Buildings 0 0 0 0 0 c Leasehold improvements 0 0 0 0 0 d Equipment 0 0 55,235 43,327 11,908 e Other 0 0 0 0 0	b	` '	S .									
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 0 0 0 b Buildings 0 0 0 c Leasehold improvements 0 0 0 d Equipment 0 55,235 43,327 11,908 e Other 0 0 0 0	4				•						ı	
Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 0 0 0 0 b Buildings 0 0 0 0 c Leasehold improvements 0 0 0 0 d Equipment 0 55,235 43,327 11,908 e Other 0 0 0 0	Part											
1a Land 0 0 0 b Buildings 0 0 0 0 c Leasehold improvements 0 0 0 0 d Equipment 0 55,235 43,327 11,908 e Other 0 0 0 0								(c) A	Accumulated	(d) Bo	ok value	•
b Buildings 0 0 0 0 c Leasehold improvements 0 0 0 0 0 d Equipment 0 55,235 43,327 11,908 e Other 0 0 0 0				(investm	nent)	basi	s (other)	de	epreciation			
c Leasehold improvements 0 0 0 0 d Equipment 0 55,235 43,327 11,908 e Other 0 0 0 0	1a											
d Equipment			· ·						_			
e Other	-											
											1	
					990 P	~	Ū	(c).)			1	

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Schedule D (Form 990) 2010 Page **3**

Part VII Investments—Other Securitie	s. See Form 990, Part X,	line 12.	N/A
(a) Description of security or category	(b) Book value	(c) Method of val	
(including name of security)		Cost or end-of-year n	narket value
(1) Financial derivatives	0		
(2) Closely-held equity interests	0		
(3) Other	0		
(A)	0		
(B)	0		
(C) (D)	0		
(E)	0		
(F)	0		
(G)	0		
(H)	0		
(I)	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0		
Part VIII Investments—Program Relate	ed. See Form 990, Part X	, line 13.	N/A
(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
(1)	0		
(2)	0		
(3)	0		
(4)	0		
(5)	0		
(6)	0		
(7)	0		
(8)	0		
(9)	0		
(10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	0		
Part IX Other Assets. See Form 990, F	•		N/A
	n) Description		(b) Book value
(1)	,		0
(2)			0
(3)			0
(4)			0
(5)			0
(6)			0
(7)			0
(8)			0
(9)			0
(10)	-1 (D) (in - 45)		0
Total. (Column (b) must equal Form 990, Part X, c			0
Part X Other Liabilities. See Form 99			N/A
1. (a) Description of liability	(b) Amount		
(1) Federal income taxes	0		
(2)	0		
(3)	0		
(4) (5)	0		
(6)	0		
(7)	0		
(8)	0		
(9)	0		
(10)	0		
(11)	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	0		

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).

California Ocean Science Trust 65-1261006 Schedule D (Form 990) 2010 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 2.199.381 1 2 1,747,233 2 452,148 3 3 0 4 4 5 5 0 0 6 6 7 7 0 8 8 0 9 9 0 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9. 10 452,148 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XII Total revenue, gains, and other support per audited financial statements 2,203,961 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a а 0 4.580 b 2b 0 С 2c d 0 4,580 е 2e 3 2,199,381 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. . . . 0 4a 4b 0 0 С 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 2,199,381 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XIII Total expenses and losses per audited financial statements 1,751,813 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: 2a 4.580 2b 0 b С 2c 0 0 d е 2e 4.580 3 1,747,233 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. . . . 4a 0 0 b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 1.747.233 Part XIV Supplemental Information N/A 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.

Schedule D (Form	990) 2010	Page 5
Part XIV	990) 2010 Supplemental Information (continued)	N/A

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047
2010

Department of the Treasury Internal Revenue Service Name of the organization 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.

Open to Public Inspection

Employer identification number

65-1261006 California Ocean Science Trust Part VI, Section A, Line 7a The Secretary of the California Environmental Protection Agency, the Secretary of the California Natural Resources Agency and the Director of Finance each appoint one trustee. The Natural Resources Secretary receives nominations for the remaining seven trustees and appoints the trustees as follows: three trustees representing the California State University and the University of California; two trustees representing ocean and coastal interest groups of the state; and two trustees representing the general public. Part VI, Section B, Line 11b The Executive Director and Finance Subcommittee (Fred Keeley, Barry Gold, Karen Finn, and Ken Wiseman) reviewed the Form 990 before it was filed with the IRS. In the future, review of the Form 990 will be conducted by a board committee prior to filing. Part VI Section B Line 12c and Section C Line 15a The organization is in the process of implementing these policies and will complete the implementation by the end of our subsequent fiscal year. Part VI, Section C, Line 19 Governing documents, conflict of interest policy, and Financial Statements are available to the public upon request. Part XI, Line 5 Other changes to the net assets includes audit adjustments posted subsequent to filing of 2009 return. These adjustments consisted of: a) recording of \$48,625 of professional fees, b) reversal of \$137,500 in donor commitments, c) reduction of contract income in the amount of \$68,629, and d) recording \$80,000 in contributions. Change in gifts, grants and contributions has no impact on 2009 public support percentage.

Criedule O (Form 990 of 990-EZ) (2010)		Page ∠
Name of the organization	Employer identification number	
California Ocean Science Trust	65-1261006	
N/A		