990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public Inspection

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

For the 2011 calendar year, or tax year beginning 10/1/2011 , and ending 9/30/2012 C Name of organization D Employer Identification number Check if applicable: California Ocean Science Trust Doing Business As Address change 65-1261006 Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Initial return 1330 Broadway 1530 (510) 251-8320 City or town, state or country, and ZiP + 4 Terminated G Gross receipts \$ Amended return 94612 3,697,965 F Name and address of principal officer: Application pending H(a) Is this a group return for affiliates? Yes X Skyli McAfee 1330 Broadway, Suite 1530, Oakland, CA 94612 H(b) Are all affiliates included? If "No," attach a list. (see instructions) X 501(c)(3) Tax-exempt status 501(c)) (insert no.) 4947(a)(1) or 527 J Website: ▶ www.calost.org H(c) Group exemption number ► N/A L Year of formation: 2003 X Corporation K Form of organization: Trust Association Other ▶ M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: The mission of California Ocean Science Trust is to ensure that the best available science is applied to California policies and ocean management to successfully maintain Activities & Governance a healthy, resilient, and productive ocean and coast. Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 4 Number of independent voting members of the governing body (Part VI, line 1b) 10 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 16 6 10 7a 0 Net unrelated business taxable income from Form 990-T, line 34. 0 **Current Year** 2.179.578 8 Contributions and grants (Part VIII, line 1h) 3,691,857 12,028 9 3,486 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,470 2,562 6,305 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 60 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . 2.199,381 3,697,965 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3). 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 806,558 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) . . . 974,882 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ h 17 940,675 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,683,880 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) . . . 1,747,233 18 2.658.762 19 Revenue less expenses. Subtract line 18 from line 12 452,148 1,039,203 **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . . 2,711,611 3,652,203 1,033,960 21 Total liabilities (Part X, line 26) . . . 935,349 22 Net assets or fund balances. Subtract line 21 from line 20 1,677,651 2,716,854 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 Signature of officer Here July 2013 MCAFEE Type or print name and tipe SKYL Print/Type preparer's name Date Preparer's signature Check Paid Hydeh Ghaffari self-employed P01228587 **Preparer** Firm's EIN ▶ 80-0842045 **Use Only** Firm's address ► 1330 Broadway, Suite 430, Oakland, CA 94612 Phone no. (510) 834-6542 X Yes No

		fornia Ocean Science T			65-12	261006	Page 2
Pa			rvice Accomplishments				
	Check	if Schedule O contai	ns a response to any que	estion in this Part III			. <u>X</u>
1	Briefly describe th	e organization's missio	n:				
	The mission of Ca	ilifornia Ocean Science	Trust is to ensure that the	best available science	e is applied to Californi	a policies a	nd
	ocean manageme	nt to successfully main	tain a healthy, resilient, and	l productive ocean an	d coast.		
							
2			ficant program services dur			□ ,, :	ਰਹ
			Sahadula O	8 385 · · · · ·		Yes	X No
_	·	these new services on		to to accept a second code of a			
3	services?	•	r make significant changes			П v	X No
		these changes on Sche				Yes	∆ No
4	•	•	edule O. vice accomplishments for ea	ach of its throa larges	nrogram conject oc	moneured i	b.
•			4) organizations and section	_			•
			expenses, and revenue, if			amount or	
	grants and anotat	ions to others, the total	expenses, and revenue, in	any, for cach program	r service reported.		
4a	(Code:) (Expenses \$	2,183,964 including gr	ants of \$	0) (Revenue \$		0)
			ntinued to fulfill its mission of e				
			ying science needs for decision				
			role as a boundary organization				
			entists, policymakers, and reso				
			bodies, such as the Californi				
			nonitoring to evaluate the eff				
			ive regions, which are curren				
			ementing MPA monitoring thro				
			ng information 4) analyzing da				
			piemented baseline MPA Mo				
	analyzing data and	reporting results for the (Central Coast region, initiated	monitoring planning in	the North Coast region,	and launched	d the
	community platforn	n, OceanSpaces. OST al	so continued to coordinate th	e OPC Science Adviso	ory Team (OPC-SAT),	Continu	ed Sch. O
4b	(Code:) (Expenses \$	0 including gr	ants of \$	0_) (Revenue \$		0.)
		,					
4c	(Code:) (Expenses \$	0 including gr	ants of \$	0) (Revenue \$	4000 DOM:	0)
							::
A .1	Other	ndees (Described to Od	hadula O \				
4d		rvices. (Describe in Scl	•	0 \ /Davaniia	¢	0.)	
4e	(Expenses \$	ervice expenses	ding grants of \$ 2,183,964	0) (Revenue	Ψ	0)	
75	i viai pi vyiaili 5t	71 4100 GVACII369 L	∠, ≀∪∪,∀∪↔				

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Х 2 X Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Х 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, Χ 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Х 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 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," Х 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V Х 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more 11b Х c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more Χ 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Х 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.... Х 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b Х Χ 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E......... 13 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Х 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? If "Yes," complete Schedule F, Parts II and IV 15 Χ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 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 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19

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

Form 990 (2011) California Ocean Science Trust 65-1261006 Part IV **Checklist of Required Schedules** (continued) Yes No 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? If "Yes," complete Schedule I, Parts I and II 21 Х 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 Х Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J........... 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24a 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 24d N/A 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a Х 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 Х Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 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, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 27 Х Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Х 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M..... 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a N/A 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)? If "Yes," complete Schedule R, Part V, line 2 35b N/A 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Х 36 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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 37

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California Ocean Science Trust

Statements Regarding Other IRS Filings and Tax Compliance Part V

	Check if Schedule O contains a response to any question in this Part V	590)	1962	Ш
			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	3511		10
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			· 2005
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1370	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 16		Attal	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		TO SERVICE STATE OF THE PARTY O	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	N/A	
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: ► N/A			
	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		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	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		X
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	
7	Organizations that may receive deductible contributions under section 170(c).			TO THE
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		X
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	and the same	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	COLUMN TO SERVICE	100	
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	NI/A	 ^
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/A	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/A	10000
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		Fig.	
	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	10000
•	• • • •	<u> </u>	IN/A	
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9 a	N/A	
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	N/A	
10	Section 501(c)(7) organizations. Enter:	100	14//	1030
а	Initiation fees and capital contributions included on Part VIII, line 12	15.53		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	66		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		3.3	
-	against amounts due or received from them.)	Tage I	No.	
1 2 a	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	100	135/11	R
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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.		13/6	
b	Enter the amount of reserves the organization is required to maintain by the states in which		1364	
	the organization is licensed to issue qualified health plans		1938	
С	Enter the amount of reserves on hand	200	193	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	N/A	L

Form 990 (2011) California Ocean Science Trust 65-1261006 Page 6 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 Х Section A. Governing Body and Management No Yes 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. Enter the number of voting members included in line 1a, above, who are independent . . . 10 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b N/A 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 Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Х 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 N/A 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 13 13 Χ 14 Х 14 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 Х 15b 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 16a 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 Section C. Disclosure 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 X Upon request Another's website 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. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the

organization: ▶ Julie Besha, Director of Administration and Finance (510) 350-1989

1330 Broadway, Suite 1530, Oakland, CA 94612

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Form 990 (2011) California Ocean Science Trust									65-12610)06 Page 7
Part VII Compensation of Officers, Dire	ctors, Truste	es, K	(ey	Em	plo	oyee	s, F	lighest Comp		rage r
Employees, and Independent C	ontractors		-		•		Ť			
Check if Schedule O contains a re	esponse to an	y que	esti	on i	n th	nis Pa	art '	VII		🔲
Section A. Officers, Directors, Trustees, Key	Employees, an	d Hig	hes	st C	om	pens	ate	d Employees		
1a Complete this table for all persons required to be	e listed. Report o	omp	ens	atio	n fo	r the	cale	endar year endir	ng with or within	the
organization's tax year.								•		
 List all of the organization's current officers, of compensation. Enter -0- in columns (D), (E), and List all of the organization's current key emp List the organization's five current highest compensation (Box 5 of Foorganization and any related organizations. 	(F) if no comper loyees, if any. Sompensated emperm W-2 and/or l	nsationee in ploye Box 7	on w stru es (7 of	vas ctio othe Fori	paid ns f er th m 1	d. for de nan ai 099-N	finit n of /IIS	ion of "key empl ficer, director, tr C) of more than	loyee." ustee, or key en \$100,000 from t	nployee) he
 List all of the organization's former officers, k \$100,000 of reportable compensation from the organ 	ey employees, a	and h	nigh ted	est (com	npens	ate	d employees wh	o received more	e than
 List all of the organization's former directors organization, more than \$10,000 of reportable comp List persons in the following order: individual trustee 	or trustees the pensation from t	at rec	eive gan	ed, i izat	n th	e cap and a	aci iny	related organiza	itions.	e of the
compensated employees; and former such persons		istitu	uori	ai li	usie	3es, c	HIIC	ers, key employ	ees; nignest	
Check this box if neither the organization nor ar		izatio	n c	omr	ana	hates	anı	current officer	director or truck	200
	ly related organ		,,,,			aicu	any	Carrent onicer,	l liector, or trus	lee.
(A) Name and Title	(B) Average hours per	box, office	unle: er an	Pos neck ss pe d a d	erson	e than of is both tor/trust	n an lee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Ken Wiseman										
Chair	1.00	Х		X	L			0	0	0
(2) Barry Gold										
Vice Chair	1.00	_X_	_	X	<u> </u>			0	0	0
(3) Honorable Fred Keeley Secretary/Treasurer	1.00	v		x						_
(4) Karen Finn	1.00	^		 ^			-	0	0	0
Trustee	1.00	х					İ	l o	o	0
(5) Brian E. Baird										
Trustee	1.00	Х						o	o	0
(6) Jonathan Bishop										
Trustee	1.00	Х						0	0	0
(7) Stephen Weisberg										
Trustee (9) Devid Cores	1.00	X			<u> </u>			0	0	0
(8) David Caron Trustee	1.00	y						_		_
(9) Leslie Tamminen	1.00		\vdash	Н	_	\vdash		0	0	. 0
Trustee	1.00	Х						o	o	0
(10) Kenneth Coale										
Trustee	1.00	Χ						0	0	0

40.00

1.00 X

Х

131,000

(11) Catherine Kuhlman Trustee

(12) Skyli McAfee Executive Director

(13)

(14)

0

0

6,089

Amplifier Catalyst, Inc.

more than \$100,000 of compensation from the organization

Part VII Section A. Officers, Directors, Tr	ustees, Key E	mplo	yee	s, a	nd	High	est	Compensated	Employees (c	ontinue	ed)	
(A) Name and title	(B) Average hours per week	(do r	not ch unles	Pos neck ss pe	C) sition more erson lirect	than is boti	one h an tee)	an Reportable Reporta e) compensation compens		ation amount of		
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org an	pensation the anization drelated	n I
(15)												
(16)												
(17)												
(18)												
(19)									<u> </u>			
(20)												
(21)												
(22)												
(23)												
(24)										-		
(25)												
1b Sub-total		<u> </u>	Щ.				•	131,000			6.0	089
c Total from continuation sheets to Part VII, \$								0			0,0	0
d Total (add lines 1b and 1c)								131,000		0	6,0)89
2 Total number of individuals (including but not I reportable compensation from the organization							eiv	ed more than \$1	00,000 of			
3 Did the organization list any former officer, dir	ector, or trustee	e, key	em	plo	yee	, or h	ighe	est compensate	d		Yes I	10
employee on line 1a? If "Yes," complete Schee	dule J for such i	indivi	dua	ĺ.,				8 8 8		3		X
4 For any individual listed on line 1a, is the sum the organization and related organizations green												
individual	· · · · · · · ·								(* * XXX • •	4		X
5 Did any person listed on line 1a receive or acc for services rendered to the organization? If "\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\										5		X
Section B. Independent Contractors											'	_
 Complete this table for your five highest compensation from the organization. Report or year. 										n's tax		
(A) Name and business add	ress							(B) Description of ser	vices	(C) Compens		
M & S Consulting 492 Aspe	n Street, Morga	intow	n, V	W	265	05	Oce	an Spaces Implemen	ntation		279,8	95
	51, Portland, O							Vectors Risk Assess			190,2	69
								atic Invasive Species			133,4	_
Center for reserach Aquatic Bioinva 5994 McI	Bryde Ave., Ricl	<u>ımon</u>	d, C	<u>:A 9</u>	<u> 480</u>)5	Aqu	atic Invasive Species	(AIS) Vecto		130,1	75

939 Kingston Ave., Piedmont, CA 94611

Total number of independent contractors (including but not limited to those listed above) who received

121,716

MPA Monitoring Enterprise Hub (Wa

6

Form 990 (2011)

Par	t VIII	Statement of Revenue		-		03-12010	Page 3
				(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	' "	1a 0		14 (4 3)		
Gra	b		1b 0				
ts, An	C		1c 0				
Gif	d	- 100 miles	1d 0				
ns,	е	· · · · · · · · · · · · · · · · · · ·	1e 2,544,034				
er S	f	All other contributions, gifts, grants, and					
혈		similar amounts not included above	1f 1,147,823				
id it	g	Noncash contributions included in lines 1a-1f:	\$ 0				
	h	Total. Add lines 1a–1f		3,691,857			Kilenet nedd
Program Service Revenue			Business Code		DESERVE DESIRED		the District Const
BVE	2a	Sublease to a environmental nonprofit org.	900099	3,486	3,486	0	
ě,	b			0	0	0	
Ŋ	C			0	0	0	
s .	a			0	0	0	
Į.		All other program service revenue		0	0	0	
Š.	a	Total. Add lines 2a–2f			0	0	0
	- 3			3,486	N - E - 1 E 1		D 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
	3	Investment income (including dividends, inte				,	
		other similar amounts)		1,462	0	0	
	4 5	Povoltice	proceeds	0	<u>0</u>	0	
	"	Royalties	(ii) Personal		U		0
	6a	Gross rents	0 0				
	b	Less: rental expenses	0 0				
	C	Rental income or (loss)	0 0				
	d	A1 1 (1 1)		0	0	0	0
	7a	Gross amount from sales of (i) Securities			IN THE PROPERTY OF		
	'-	assets other than inventory .	0 1,100				
	ь	Less: cost or other basis	1,100				
		and sales expenses	ol o				
	С	Gain or (loss)					
	d	Net gain or (loss)		1,100	0	0	1,100
		* ***					
Other Revenue	8a	Gross income from fundraising events (not including \$0					
Še		of contributions reported on line 1c).					
7		See Part IV, line 18	a 0				
Ě	Ь	Less: direct expenses					
U		Net income or (loss) from fundraising events		o		0	0
		Gross income from gaming activities.					Exile de la constantina
		See Part IV, line 19.	a 0				
	b	Less: direct expenses					
	С	Net income or (loss) from gaming activities .		0	0	0	0
	10a	Gross sales of inventory, less		Park Salva Side			
		returns and allowances	a 0				
		Less: cost of goods sold					
	<u> </u>	Net income or (loss) from sales of inventory .	.	0	0	0	0
		Miscellaneous Revenue	Business Code				Market to the same
		Refund of bank fees	900099	60		0	
	b			0	0	0	
	C	All alban garages		0	0	0	
	d	All other revenue		0	0	0	0
	e	Total. Add lines 11a–11d		60			0.005
	12	Total revenue. See instructions	<u> </u>	3,697,965	3,486	0	2,622

Page 9

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 Par	t IX		·
	not include amounts reported on lines 6b, 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				SARATE CONTRACTOR
_	organizations in the United States. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the				
_	United States. See Part IV, line 22	0	0		BETTER BUILDINGS
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0	0		801101 KUN 1440
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
_	trustees, and key employees	144,873	75,043	58,192	11,638
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	0	507.000		0
7	Other salaries and wages	695,653	565,908	129,745	0
8	Pension plan accruals and contributions (include	10.140	0.074		
•	section 401(k) and 403(b) employer contributions)	12,149	2,271	9,878	0
9	Other employee benefits	52,638	18,608	34,030	0
10	Payroll taxes	69,569	17,432	51,828	309
11	Fees for services (non-employees):		ا		_
a	Management	0 000	0	0	0
b	Legal	2,000	0	2,000	0
G	Accounting	32,773	0	32,773	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17 Investment management fees	0	0	0	0
f			0	0 05 454	0
g 12	Other	1,329,899	1,264,445	65,454	0
13	Office expenses	72,894		0 26 529	0
14	Information technology	4,117	36,135	36,528	231
15	Royalties	4,117	3,148	935	34
16	Occupancy	92,867	71,008	21,088	0 771
17	Travel	60,239	55,449	4,590	
18	Payments of travel or entertainment expenses	00,239	33,448	4,090	200
	for any federal, state, or local public officials	ام	م		^
19	Conferences, conventions, and meetings	64.844	57,238	7,541	0 65
20	Interest	0	0	7,541	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	8,532	6,523	1,937	71
23	Insurance	4,509	3,448	1,024	37
24	Other expenses. Itemize expenses not covered	.,000	0,110		
	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.)				
а	Honorarium	3,750	3,750	0	0
b	Hiring Expenses	2,944	0	2,944	0
С	Professional Development	2,540	2,540	0	0
d	Unreconciled expense	1,122	858	255	9
е	All other expenses Miscellaneous Expenses	850	160	690	0
25	Total functional expenses. Add lines 1 through 24e	2,658,762	2,183,964	461,432	13,365
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)	o	o	o	0

Balance Sheet

(A) (B) Beginning of year End of year 520 1 741,619 2 1,857,797 2 483,208 3 818,548 3 2,366,853 4 Ol 4 5,025 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Ol 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) 6 0 0 7 0 8 0 8 0 9 Prepaid expenses and deferred charges . . . 20,258 15,978 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 77,936 **b** Less: accumulated depreciation 10b 49.000 11,908 10c 28,936 11 11 0 12 Investments—other securities. See Part IV, line 11 ol 12 0 13 ol 13 0 14 ol 14 0 15 2,580 15 10,584 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 2,711,611 16 3,652,203 17 238,898 17 340,757 18 18 19 795.062 594,592 19 20 20 Ol 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. . . ol 21 0 Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified 22 0 23 Secured mortgages and notes payable to unrelated third parties ol 23 0 Unsecured notes and loans payable to unrelated third parties 24 ol 24 0 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete 25 Total liabilities. Add lines 17 through 25 1,033,960 26 935,349 Organizations that follow SFAS 117, check here ► X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 1,642,432 27 2,426,073 28 35,219 28 290,781 0 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 30 0 31 Paid-in or capital surplus, or land, building, or equipment fund ol 31 0 32 Retained earnings, endowment, accumulated income, or other funds . . . ol 32 0 33 1,677,651 33 2,716,854 2,711,611 3,652,203

Form	990 (2011) California Ocean Science Trust	65-12	61006	Pa	ige 12
Par	t XI Reconciliation of Net Assets				80
	Check 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		3.697	7,965
2	Total expenses (must equal Part IX, column (A), line 25)	2			3,762
3	Revenue less expenses. Subtract line 2 from line 1	3			9,203
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			7,651
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0
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		2,716	3.854
Par	Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			100	1880
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		112-33	100	303
_	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	* *	2c	N/A	
	If the organization changed either its oversight process or selection process during the tax year, explain in			3 2 3	
	Schedule O.		1000		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		13.5		
	issued on a separate basis, consolidated basis, or both:		2333	103	
	Separate basis Doth consolidated and separate basis		176		
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		1 2 2	-	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	N/A	
				990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

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.

2011

Open to Public Inspection

OMB No. 1545-0047

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

Employer identification number California Ocean Science Trust 65-1261006 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 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. b | Type II c Type III-Functionally integrated Type III-Other 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). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? 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? 11g(i) 11g(ii) 11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (Iv) Is the organization (III) Type of organization (v) Did you notify (vI) Is the (vii) Amount of organization (described on lines 1-9 in col. (I) listed in your the organization in organization in col. support above or IRC section governing document? col. (i) of your (i) organized in the (see instructions)) support? **U.S.?** Yes No Yes No Yes No (A) 0 (B) 0 (C) 0 (D) 0 (E) 0

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 Gifts, grants, contributions, and membership fees received. (Do not 908,025 2,108,430 1,861,833 2,179,578 3,691,857 10,749,723 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. 0 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge 0 Total. Add lines 1 through 3 908.025 3.691,857 2.108.430 1,861,833 2,179,578 10,749,723 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) 324,474 Public support. Subtract line 5 from line 4. 10,425,249 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 4 908,025 2,108,430 1,861,833 2,179,578 3,691,857 10,749,723 8 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar 91 791 770 1.470 1.462 4,584 9 Net income from unrelated business activities, whether or not the business is 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 1,985 503 6,305 8,853 Total support. Add lines 7 through 10... 11 10,763,160 12 28,799 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) Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 96.86% 15 Public support percentage from 2010 Schedule A, Part II, line 14 15 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 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_ 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 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

20

	dule A (Form 990 or 990-EZ) 2011 California Ocean					65-126100	6 Page 3
Pa	rt III Support Schedule for Organization	ons Describe	ed in Section	า 509(a)(2)			<u> </u>
	(Complete only if you checked the	box on line 9	of Part I or if	the organizat	ion failed to d	ualify under P	art II.
	If the organization fails to qualify ur	der the tests	listed below.	please comp	lete Part II.)	,	N/A
Sec	tion A. Public Support						
Cal	endar 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.")						0
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						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	Ö	0	0	0
7a	Amounts included on lines 1, 2, and 3 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
8 8	Add lines 7a and 7b	0	0	0	0	0	0
	line 6.)			STATES OF STATES			0
	tion B. Total Support					·	
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 10a	Amounts from line 6	0	0	0	0	0	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			ļ			
С	Add lines 10a and 10b	0	0	Ö	0	0	0
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					<u>_</u>	0
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.)						0
14	First five years. If the Form 990 is for the organization check this box and stop here	ion's first, second	Ol d, third, fourth, o	O or fifth tax year as	0 s a section 501(d	0	0
Sec	tion C. Computation of Public Support P		2 2 2		55 .5		80 00 0000
15	Public support percentage for 2011 (line 8, column (13 column (f)			45	0.000/
16	Public support percentage from 2010 Schedule A, P tion D. Computation of Investment Incor	art III, line 15.		· · · · · · · · ·		15 16	0.00%
17	Investment income percentage for 2011 (line 10c, co			mn (f)		47	0.000
18	Investment income percentage from 2010 Schedule	A Part III line 1	by mile 15, COIUI	min (1))		17 18	0.00%
19a	33 1/3% support tests—2011. If the organization di						0.00%
	not more than 33 1/3%, check this box and stop her	re. The organiza	tion qualifies as	a publicly suppo	rted organization	1	

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

	990 or 990-EZ) 2011	California Ocean Science Trust		65-1261006	Page 4
Part IV	Supplemental Part II, line 17a instructions).	Information. Complete this part to provor 17b; and Part III, line 12. Also comp	ride the explanations required lete this part for any additional	by Part II, line 10 information. (See);
Part II, Line 1	0				
2008 - \$1,985	Miscellaneous rec	eipts			
2009 - \$503 M	liscellaneous recei	ots			
2010 - \$230 re	fund of bank fees	\$6,075 Miscellaneous receipts			
2011 - \$60 ref	und of bank fees	•••••		••••••	
		•••••			
****				•	
		•••••		**************	
		•••••		••••••••	
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		•••••			

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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 Part I 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 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes No 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 Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 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 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 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. N/A 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:

Par	III Organizations Maintaining Coll	ections of Art, His	storical Tre	asures, or (Other Similar Asse	ts (contin	ued)	
3	Using the organization's acquisition, access							
	use of its collection items (check all that ap	oply): N/A	_					
а	Public exhibition	d	Loan	or exchange	programs			
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's Part XIV.	collections and expl	ain how they	further the o	rganization's exempt	purpose in	1	
5	During the year, did the organization solici assets to be sold to raise funds rather than	t or receive donation	ns of art, histo	orical treasure	es, or other similar		es 🗀] No
Part								110
	IV, line 9, or reported an amount				wered res to For	11 990, Fa		N/A
1a	Is the organization an agent, trustee, custo				other assets not			19/74
	included on Form 990, Part X?					. D Y	es 🗔	No
b	If "Yes," explain the arrangement in Part X					· L ·		,
	· · · · · · · · · · · · · · · · · · ·	·				Amount		
C	Beginning balance				1c			0
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance	* * * * * * * * *	8 (6) 8 6		1f			0
2a	Did the organization include an amount on		ine 21?			Y(es 🔲	No
_ <u>b</u>	If "Yes," explain the arrangement in Part X							
Part	V Endowment Funds. Complete in	f the organization a	answered "\	Yes" to Forn	n 990, Part IV, line	10.		N/A
) Prior year	(c) Two years	back (d) Three years b	ack (e) Fo	our years	3 back
1a	Beginning of year balance	0	0		0	136300		n o
b	Contributions		0.2.3-30523					
С	Net investment earnings, gains,	4						
	and losses							
d	Grants or scholarships .					100000		
е	Other expenditures for facilities	Ĩ				300		
f	and programs						2007/000	
g	End of year balance	0	0		0	0	U.S.	
2	Provide the estimated percentage of the cu	<u> </u>				U		
a	Board designated or quasi-endowment	► %		column (a)) m	ciu as.			
b	Permanent endowment	%	•					
С	Temporarily restricted endowment	%						
	The percentages in lines 2a, 2b, and 2c sh							
3a	Are there endowment funds not in the poss		ization that a	re held and a	dministered for the			
	organization by:						Yes	No
	(i) unrelated organizations					3a(i)		
	(ii) related organizations					3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	ons listed as required	d on Schedul	e R?	(6) (6 . (9	3b		l
4	Describe in Part XIV the intended uses of t							
Part	——————————————————————————————————————	nt. See Form 990,	Part X, line	10.				
	Description of property	(a) Cost or other basis (investment)		st or other s (other)	(c) Accumulated depreciation	(d) Bo	ook value	e
1a	Land		0	0	Autority was the			0
b	Buildings		0	0				0
C	Leasehold improvements		0	0				0
d	Equipment		0	77,936	49,000		2	8,936
	Other	1 15 222 5	0	0				0
lota	. Add lines 1a through 1e. (Column (d) mus	t equal Form 990, P	art X, columr	n (B), line 10(c).)		2	8,936

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Page 3

Part VII	Investments—Other Securi	ties. See Form 990, Part X	, line 12.	N/A
	 Description of security or category (including name of security) 	(b) Book value	(c) Method of va Cost or end-of-year	aluation:
	I derivatives		<u> </u>	
(2) Closely-	held equity interests	C		
(<u>A</u>)				
		0		
(D)				
(F)		0		
(G)		0		
(H)		0	· · · · · · · · · · · · · · · · · · ·	
(1)		0		
) must equal Form 990, Part X, col. (B) line 12.)	> 0		
Part VIII	Investments—Program Rel	ated. See Form 990, Part X	I, line 13.	N/A
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year	aluation
(1)		0		
(2)		0		
(3)		0		
<u>(4)</u> (5)		0	 	·
(6)		0		
(7)		0	· · · · · · · · · · · · · · · · · · ·	
(8)		0	· · · · · · · · · · · · · · · · · · ·	
(9)		0		
(10)		0		
	must equal Form 990, Part X, col. (B) line 13.)	0		
Part IX	Other Assets. See Form 990			N/A
(1)		(a) Description		(b) Book value
(2)				0
(3)				0
(4)				0
(5)				0
(6)				0
(7)				0
(8)				0
(9)				0
(10)	mn (b) must equal Form 990, Part X,	cal (D) line 45)		0
Part X	Other Liabilities. See Form 9		· · · · · · · · · · · · · · · · · · ·	0
1.	(a) Description of liability	(b) Book value		N/A
	income taxes	(b) Book value		
(2)		0		
(3)		0		
(4)		0		
(5)		0		
(6)		0		
(7)		0		
(8)		0		
(9)		0		
(10) (11)		1 0		
	must equal Form 990, Part X, col. (B) line 25)	0		
	6C 740) Footnote. In Part XIV, provide		o organizationia financial at 1	anda Ab at :
	- 10, 1 comote, in 1 art Arv, provide	ac the text of the loothole to th	ie organization's financial staten	nents that reports the

Sched	dule D (Form 990) 2011			Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial	Statements	N/A
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
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	(
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3	3 and 9	10	(
Par	t XII Reconciliation of Revenue per Audited Financial Statement	s With Revenue	per Return	N/A
1	Total revenue, gains, and other support per audited financial statements		з 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		153.55	
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	13.00	
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV.)	2d		
е	Add lines 2a through 2d	. (* *) ()	2e	
3	Subtract line 2e from line 1	8 50 · 0 0 8 50 ·	3	(
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b		
С	Add lines 4a and 4b		4c	(
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		. 5	
Par	t XIII Reconciliation of Expenses per Audited Financial Statemen			rn N/A
1	Total expenses and losses per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d		2d		
е	Add lines 2a through 2d	rance was	. 2e	(
3			3	(
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a	7000	
b	Other (Describe in Part XIV.)	4b		
С	Add lines 4a and 4b	#0 90 m = 2	4c	(
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			(
Par	t XIV Supplemental Information			N/A
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Par	rt III. lines 1a and 4:	Part IV. lines	
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part			
	part to provide any additional information.		•	
	/			

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Schedule D (Form	California Ocean Science Trust	65-1261006	Page 5
Part XIV	Supplemental Information (continued)		
	Supplemental information (continued)		N/A

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		***************************************	•••••••••••••••••••••••••••••••••••••••

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

## Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

California Ocean Science Trust	<u> 65-1261006</u>
Form 990, Part III, Line 4a	
working with the OPC-SAT to strengthen the scientific quality of OPC projects.	and proposals, develop innovative research priorities and
translate the best available science for emerging issues in the state. OST also he	elped establish and convene numerous technical working
groups, workshops, and forums to address questions or critical management p	roblems identified by the state and other partners, such as
adaptation to climate change, ocean acidification, harmful algal blooms, and da	ata and information management. During this reporting period,
OST managed the following projects to inform priority topics: 1) the Aquatic Inv	rasive Species Risk Assessment (ongoing) 2) Marine Debris
(completed) 3) Data and Information Management (ongoing) 4) the Agency Sci	ience Needs Assessment (ongoing).
Form 990, 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 Resouces Secretary receives nomi	nations 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 represent	ting the general public.
Form 990, Part VI, Section B, Line 11b	
The Executive Director and Board Finance Subcommittee reveiwed the F	orm 990 before it was filed with the IRS.
Form 990, Part VI, Section B, Line 12c	
OST collects signed conflict of interest statements annually.	
Form 990, Part VI, Section C, Line 19	
The organizations governing documents, conflict of interest policy, and fin	ancial statements are available to the public upon request
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Name of the organization	A1/A	Employer identification number	<u> </u>
California Ocean Science Trust	N/A	65-1261006	
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