Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection Internal Revenue Service For the 2010 calendar year, or tax year beginning and ending Name of organization D Employer identification number Check if applicable: Sustainable Conservation Doing Business As Address change 94-3232437 Number and street (or P.O. box if mail is not delivered to street address) Name change Room/suite E Telephone number Initial return 98 Battery Street 302 (415) 977-0380 Terminated City or town, state or country, and ZIP + 4 San Francisco Amended return CA 94111 G Gross receipts \$ 2,960,331 Application pending Name and address of principal officer: H(a) Is this a group return for affiliates? Yes X No Ashley Boren 98 Battery Street, Suite 302, San Francisco, CA 94111 H(b) Are all affiliates included? X 501(c)(3) If "No," attach a list. (see instructions) 501(c)) (insert no.) 4947(a)(1) or Tax-exempt status: 527 J Website: ▶ www.suscon.org H(c) Group exemption number ► N/A X Corporation K Form of organization: Trust Association L Year of formation: 1995 M State of legal domicile: CA Part I Summary 1 Briefly describe the organization's mission or most significant activities: For more than 15 years, Sustainable Conservation has partnered with the private sector to find environmental solutions that make economic sense. Our climate, clean air and Activities & Governance water, and biodiversity initiatives promote practical solutions that result in tangible, lasting benefits for California. Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 3 14 Number of independent voting members of the governing body (Part VI, line 1b) 4 14 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 24 6 47 7a 0 Net unrelated business taxable income from Form 990-T, line 34. 0 **Current Year** 1,998,221 2,601,847 9 69,584 37,325 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 21,432 15,168 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 5,646 5,563 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12). 12 2,094,883 2,659,903 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 84,590 0 Benefits paid to or for members (Part IX, column (A), line 4) 14 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . 15 1.568.706 1,757,979 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 297,774 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 17 777,705 973,483 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 18 2,431,001 2,731,462 19 Revenue less expenses. Subtract line 18 from line 12 -336,118-71,559 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 3,076,254 2,970,525 Total liabilities (Part X, line 26) 21 423,602 312,101 22 Net assets or fund balances. Subtract line 21 from line 20 2.652.652 2,658,424 Signature Block Part II 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 Date Here Executive Hishley Type or print name and title Print/Type preparer's name Preparer's signature Date Paid 10 Ghaffari Zaragoza LLP self-employed Preparer's Firm's name ▶ Ghaffari Zaragoza LLP Firm's EIN ▶ 57-1155648 **Use Only** Firm's address ▶ 1330 Broadway, Suite 430, Oakland, CA 94612 Phone no. (510) 834-6542

X Yes

| Form 9 | 90 (2010) | Sustainable Conservation | 94-3232437 | Page 2 |
|--------|------------|--|--|----------|
| Pa | rt III | Statement of Program Service Accomplishments | | |
| | | Check if Schedule O contains a response to any question in this Part III | | |
| 1 | Briefly d | escribe the organization's mission: | | |
| | For mor | e than 15 years, Sustainable Conservation has partnered with the private sector to find environn | nental solutions tha | at make |
| | econom | ic sense. Our climate, clean air and water, and biodiversity initiatives promote practical solutions | that result in tang | ible, |
| | lasting b | enefits for California. | | |
| | | | | |
| 2 | | organization undertake any significant program services during the year which were not listed or | | |
| | | Form 990 or 990-EZ? | · · Yes | X No |
| | If "Yes," | describe these new services on Schedule O. | | |
| 3 | | organization cease conducting, or make significant changes in how it conducts, any program | | |
| | services | ? | Yes | X No |
| | | describe these changes on Schedule O. | | |
| 4 | | e the exempt purpose achievements for each of the organization's three largest program service | | |
| | | 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the ar | nount of grants and | t |
| | allocation | ns to others, the total expenses, and revenue, if any, for each program service reported. | | |
| | | | | |
| 4a | (Code: | | | |
| | | change, Air and Water Quality and Biodiversity - a) Addressed Climate Change by partnering with California | | |
| | | se gases and produce renewable energy from cow manure. Currently, more than a dozen methane digester | | |
| | | g enough clean, renewable energy to power more than 3,000 homes and offset \$2 million in energy costs to | | |
| | | stainable Conservation has reduced California agriculture's greenhouse gas emissions by 12,000 tons - equ | | |
| | | ad. b) Reduced air pollution by expanding innovative farming practices in California's Central Valley. Through | | |
| | | and less costly method of cultivating crops, Sustainabale Conservation's farming partners have cut dust ar | | |
| | | pectively, since 2003. c) Improved water quality by expanding our hallmark permit coordination program, Pa | | |
| | | and easier for committed landowners to promote clean water and wildlife. Launched in 1998, the project now | | |
| | | nties throughout the state, enhancing declining populations of imperiled species like salmon. d) Protected b | | |
| | | t, a coalition of California nurseries, retailers and other horticultural partners to prevent the sale of invasive t to reduce the more than \$80 million California spends each year to control and eradicate invasive species - | | |
| | | ty behind habitat destruction. | ine second greatest t | nieat to |
| 4b | |) (Expenses \$ 0 including grants of \$ 0) (Revenue | ıe \$ | 0) |
| 12 | | | | |
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| 4c | (Code: |) (Expenses \$ 0 including grants of \$ 0) (Revenue | ie\$ | 0_) |
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| 4d | Other pr | ogram services. (Describe in Schedule O.) | was a second sec | |
| 74 | (Expens | | 0) | |
| 4e | | ogram service expenses ► 2.109,208 | | |

Part IV

Checklist of Required Schedules

| | | | Yes | No |
|-----|--|-------|----------|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | Х | - |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | 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? If "Yes," complete Schedule C, Part II | 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 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II | 7 | | Х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 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? If "Yes," complete Schedule D, Part IV | 9 | | х |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or | 9 | | |
| | quasi-endowments? If "Yes," complete Schedule D, Part V. | 10 | х | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, | 24,00 | Mark | |
| | VII, VIII, IX, or X as applicable | | Altre 1 | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | Х | |
| 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 | | х |
| c | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more | 110 | - | _^_ |
| · | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. | 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 | | X |
| | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. | 11e | | X |
| Ť | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | 445 | | |
| 420 | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i> | 11f | | X |
| | Schedule D, Parts XI, XII, and XIII | 12a | х | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," | | | |
| 40 | and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional. | 12b | | <u>X</u> |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, | 14a | | X |
| D | business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i> | 14b | | Х |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any | 1.12 | | |
| | organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | | Х |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance | | | |
| | to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | v |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | 17 | | X |
| | 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? | | | v |
| 200 | If "Yes," complete Schedule G, Part III | 19 | \dashv | X |
| | If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some | 20a | -+ | |
| 2 | Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions). | 20b | N/A | |

94-3232437

| Pai | t IV 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 | | х |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the | | | |
| 12020 | United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | | | |
| | organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | | х |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | 2.0 | | |
| | \$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 | | X |
| | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | N/A | |
| C | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | l | |
| | to defease any tax-exempt bonds? | 24c 24d | N/A N/A | |
| | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | 240 | IN/A | |
| ZJa | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 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 | | | |
| | 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | X |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | | | ., |
| 07 | disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | 26 | | X |
| 27 | 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): | 3.0 | | |
| | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete | 28b | | v |
| С | Schedule L, Part IV | 200 | | <u>X</u> |
| · | 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? If "Yes," complete Schedule M | 29 | | Х |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | 1.7.65 |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | <u>X</u> |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? | 31 | | |
| | If "Yes," complete Schedule N, Part II | 32 | | Х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | <u>X</u> |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, | 24 | | v |
| 35 | III, IV, and V, line 1 | 34 35 | N/A | _X_ |
| 100000 | Did the organization receive any payment from or engage in any transaction with a | -00 | 14// (| |
| - | 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 | | <u>X</u> |
| 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 | |
| | | Form | 990 (| (2010) |

Part V Statements Regarding Other IRS Filings and Tax Compliance No Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 1c 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. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?... b 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3a If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O b N/A 3b 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 X 4a 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 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b C 5c N/A Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a Χ If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b N/A Organizations that may receive deductible contributions under section 170(c). 7 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a 7b | N/A Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?... 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . g 7g N/A If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h N/A Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring Sponsoring organizations maintaining donor advised funds. N/A Did the organization make a distribution to a donor, donor advisor, or related person? b 9b N/A 10 Section 501(c)(7) organizations. Enter: a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . Section 501(c)(12) organizations. Enter: 11 11a N/A Gross income from other sources (Do not net amounts due or paid to other sources Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . . . 12a 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. 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. Enter the amount of reserves the organization is required to maintain by the states in which 13b N/A 13c N/A 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b N/A

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.

| 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 1a 14 | | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 1b 14 | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | | | |
| | any other officer, director, trustee, or key employee? | 2 | | Х | | |
| 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 | | Χ | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | Χ | | |
| 6 | Does the organization have members or stockholders? | - 6 | | Х | | |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members | | | | | |
| | of the governing body? | 7a | | Χ | | |
| b | 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 | | _X_ | | |
| Sect | ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co | de.) | | | | |
| | | | Yes | No | | |
| 10a | Does the organization have local chapters, branches, or affiliates? | 10a | | X | | |
| b | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, | | | | | |
| | 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 | X | | | |
| b | | | | | | |
| 12a | | | | | | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give | on the same of the | | | | |
| | rise to conflicts? | 12b | X | | | |
| 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 | X | | | |
| 13 | Does the organization have a written whistleblower policy? | 13 | X | | | |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | X | and the same | | |
| 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? | CEST | | | | |
| | The organization's CEO, Executive Director, or top management official. | 15a | X | | | |
| D | - 이번 사람들은 발표하는 "바람들이 가는 이번 보고 있는 것이 되었다. 그는 이번 보고 있는 것이 되었다. | 15b | N/A | 16,7575 | | |
| 40- | If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) | | | | | |
| Iba | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 40- | | V | | |
| h | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate | 16a | areas s | <u>X</u> | | |
| b | its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard | | | | | |
| | | 16b | NIA | | | |
| Sacti | on C. Disclosure | lan | IV/A | | | |
| 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 | . \ | | | | |
| 10 | available for public inspection. Indicate how you make these available. Check all that apply. | " | | | | |
| | X Own website X 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 | | | | | |
| . • | 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: ► Ashley Boren (415) 977-038 | 30 | | | | |
| | 98 Battery Street, Suite 302, San Francisco, CA 94111 | | | | | |

| Form 990 (2010) | Sustainable Conservation 94-3232437 | Page 7 |
|-----------------|---|--------|
| Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated | |
| | Employees, and Independent Contractors | |
| | Check if Schedule O contains a response to any question in this Part VII | . 🔲 |

| Section A. | Officers, | Directors, | Trustees, | Key | Employees , | and Highest | Compens | ated Emp | oloyees |
|------------|-----------|------------|-----------|-----|--------------------|-------------|---------|----------|---------|

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) | (C) | | | | | | (D) | (E) | (F) |
|--|---|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|--|--|
| Name and Title | Average hours per | | <u> </u> | | | that ap | | Reportable compensation | Reportable compensation | 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 |
| | 0) | | Ф | | | ated | | | | |
| (1) Russell Siegelman | | | | | | | | | | |
| Chair | 2.7 | Х | | Х | | | | 0 | 0 | 0 |
| (2) Chris Buchbinder | | | | 1000000 | | | | | | |
| Treasurer | 1.7 | X | | Х | | | | 0 | 0 | 0 |
| (3) Laura Hattendorf | | | | | | - | | | | |
| Secretary & Co-Founder | 1.9 | X | | X | | | | 0 | 0 | 0 |
| (4) John Dawson | _ | | | ., | | | | | | 2 |
| Vice -Chair | 2. | Χ | \vdash | Х | | | | 0 | 0 | 0 |
| (5) Tina Quinn | 4.0 | v | | | | | | | | _ |
| Co-Founder | 1.8 | X | - | | | | | 0 | 0 | 0 |
| (6) Chuck Ahlem | 4.7 | | | | | 2 | | | | |
| Board Member | 1.7 | Х | Н | | | | | 0 | 0 | 0 |
| (7) Kim Delfino | 1.7 | х | | | | | | | | |
| Board Member | 1.7 | ^ | | - | - | | - | 0 | 0 | 0 |
| (8) Steve Gross Board Member | 1.7 | Х | | | | | | 0 | 0 | 0 |
| (0) 01: 1/ 1 | 1.1 | | | - | | | | | U | <u>U</u> |
| (9) Chip Koch Board Member | 2.1 | Х | | | | | | 0 | 0 | 0 |
| (10) Cynthia Hunter Lang | £.1 | | | | | | | | U | |
| Board Member | 1.8 | Х | | | | | | 0 | o | 0 |
| (11) Steve McCormick | | | | | | | | | | |
| Board Member | 1.7 | Х | 9. | | | | | 0 | o | 0 |
| (12) Richard Morrison | | | | | | | | | | |
| Board Member | 1.7 | Χ | | | | | | 0 | 0 | 0 |
| (13) Wendy Pulling | | | | | | | | | | |
| Board Member | 1.7 | Х | | | | | | 0 | o | 0 |
| (14) Mark Valentine | | | | | | | | | | |
| Board Member | 1.7 | Х | | | | | | 0 | 0 | 0 |
| (15) Ashley Boren | | | | | | | | | | |
| Executive Director | 40. | | | X | | | | 123,700 | 0 | 11,429 |
| (16) Susan Corlett | | | | | | | | | | |
| Director of Development & Communications | 40. | | | | | Χ | | 106,070 | 0 | 14,038 |
| | | | | | | | | | 3 | Form 990 (2010) |

| P | art VII Section A. Officers, Directors, T | rustees, Key Er | nplo | yee | s, a | nd | High | est | Compensated | Employees | (col | ntinued) | 1 |
|--------------|--|---|--------------------------------|---------------|--------------|---------|------------------------------|-------|---|--|----------------|--|--|
| | (A) | (B) | D14 | · /- | | C) | 414 | I- A | (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 amployee | _ | Reportable compensation from the organization (W-2/1099-MISC) | Reportabl compensati from relati organizatio (W-2/1099-M | on ed ns | Estim amou oth comper from organiz and re organiz | unt of ner nsation the ization elated |
| (17) | | | | | | | | | ¥ | | | | |
| (18) | | | | | | | | | | | | | |
| (19) | | | | | | | | | | | | | |
| (20) | | | | | | | | | | | | | |
| (21) | | | | | | | | | | | | | |
| (22) | | | | | | | | | , | | | | |
| (23) | | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | | |
| (25) | | | | | | | | | | | | | |
| (26) | | | | | | | | | | | | | A CONTRACTOR |
| (27) | | | | | | | | | | | | | |
| (28) | | | | | | | | | | | | | |
| 1b c d | Sub-total | Section A | | | S * S | | | ▶ | 229,770 0 229,770 | | 0 | | 25,467 0 25,467 |
| 2 | Total number of individuals (including but not I reportable compensation from the organization | imited to those | listed | abo | ove) |) wh | | | | 100,000 in | | | |
| 3 | Did the organization list any former officer, dir employee on line 1a? If "Yes," complete Sche | ector or trustee, dule J for such i | , key Individ | emp dual | oloy | ee, | | | | | Strain | Ye | x No |
| 4 | For any individual listed on line 1a, is the sum the organization and related organizations gre individual | ater than \$150,0 | 000? | <i>lf "</i> \ | /es, | " cc | omple | ete . | Schedule J for s | uch | SHEET SHEET | 4 | X |
| 5 | Did any person listed on line 1a receive or acc for services rendered to the organization? If "Y | | | | | | | | | | sterill | 5 | X |
| | ion B. Independent Contractors | | | | | | | | | **** | | | |
| 1 | Complete this table for your five highest components of the compensation from the organization. | ensated indeper | ndent | cor | ntra | ctor | s tha | at re | ceived more tha | in \$100,000 | of —— | | |
| | (A) Name and business addr | ess | | | | | | | (B) Description of serv | rices | Cc | (C) ompensation | |
| | None | | | | | | | | | | | | 0 |
| | | | | | | | | | | | | | 0 |
| | | | | | | | - | | · | | | | 0 |
| | | | | | | - | | | | | | | 0 |
| 2 | Total number of independent contractors (inclumore than \$100,000 in compensation from the | (1 | ited t | o th | ose | list | ted a | bov | e) who received | | | | |

| The second second | 2 0 (20 | and the second s | | | | 94-32324 | 3/ Page 9 |
|--|-----------|--|---------------|-------------------------|--|---|---|
| Pa | rt 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 |
| क क | 1 1a | Federated campaigns 1a | 0 | | and the second | CAMP TO THE | |
| Ta I | b | Membership dues 1b | 0 | | The William | | |
| S, 9 | C | Fundraising events 1c | 0 | Marie and Co | | | Se Street Bridge Service |
| gift | d | Related organizations 1d | 0 | | The said section. | | |
| S, | е | Government grants (contributions) 1e | 290,572 | | | | |
| tior | f | All other contributions, gifts, grants, and | | | 744704 | | age with the |
| ibu | | similar amounts not included above 1f | 2,311,275 | | | est or the constitu | |
| Contributions, gifts, grants and other similar amounts | g | Noncash contributions included in lines 1a-1f: \$ | 5,953 | | | | |
| <u> </u> | h | Total. Add lines 1a-1f | | 2,601,847 | A SPEC | | |
| e | | | Business Code | YEAR THE MAN | | | |
| ven | 2a | Client services | 541900 | 37,325 | 37,325 | 0 | 0 |
| Program Service Revenue | b | | | 0 | 0 | . 0 | 0 |
| Š | C | | | 0 | 0 | 0 | 0 |
| Sei | d | | | 0 | 0 | 0 | 0 |
| ram | е | | | 0 | 0 | . 0 | |
| Jo Bo | f | All other program service revenue | | 0 | 0 | 0 | 0 |
| | g | Total. Add lines 2a–2f | | 37,325 | 2007-01-01-01-02-0 | | 10.457-63 |
| | 3 | Investment income (including dividends, interes | | - | | | |
| | ١. | other similar amounts) | | 28,287 | 0 | 0 | 28,287 |
| | 4 | Income from investment of tax-exempt bond pro | | 0 | . 0 | 0 | 0 |
| | 5 | Royalties | Y | 0 | 0 | 0 | 0 |
| | | | (ii) Personal | | | | |
| | 6a | G. Coo F. College F. C | | | | | |
| | b | | | | | | |
| | C | Rental income or (loss) | | | 0 | | |
| | d 7a | | (ii) Other | 0 | 0 | 0 | 0 |
| | l la | assets other than inventory . 287,309 | | | | | |
| | Ь | Less: cost or other basis | - 4 | | | | |
| | " | and sales expenses 300,428 | o | | | | |
| | C | Gain or (loss)13,119 | | | | | |
| | d | Net gain or (loss) | | -13,119 | o | o | -13,119 |
| | _ | gamer (1000) | | | | | -10,110 |
| e e | 8a | Gross income from fundraising | | | | | |
| Ver | 1,100,000 | events (not including \$ 0 | | | | | |
| Re | | of contributions reported on line 1c). | | | | | |
| Other Revenue | | See Part IV, line 18 a | 0 | | | | |
| \$ | b | Less: direct expenses b | 0 | | | | |
| _ | С | Net income or (loss) from fundraising events . | ▶ | 0 | | 0 | 0 |
| | 9a | Gross income from gaming activities. | | | | and the second | The autobiotics |
| | | See Part IV, line 19 a | 0 | | | | |
| | b | Less: direct expenses b | 0 | 12.76 | Notes and | | |
| | С | Net income or (loss) from gaming activities | | 0 | 0 | 0 | 0 |
| | 10a | Gross sales of inventory, less | | | | | |
| | | returns and allowances a | 0 | 4-1 | | | |
| | b | Less: cost of goods sold b | 0 | Philipped States of the | | | |
| | С | Net income or (loss) from sales of inventory | | 0 | 0 | . 0 | 0 |
| | 44- | Miscellaneous Revenue | Business Code | F 500 | | | NAME OF STREET |
| | 11a | Miscellaneous receipts | 900099 | 5,563 | 0 | 0 | 5,563 |
| | b | | | 0 | 0 | 0 | 0 |
| | d | All other revenue | | 0 | 0 | 0 | 0 |
| | e | Total. Add lines 11a–11d | . | 5,563 | distribution of the particular | 0 | 0 |
| | 12 | Total revenue. See instructions | <u> </u> | 2,659,903 | 37,325 | 0 | 20,731 |
| - | 1.5 | TOWN TO TOTAL OCC MONITORION ON THE TOTAL OCCUPANT | | 2,000,000 | 01,020 | U | 20,731 |

94-3232437

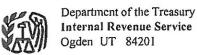
Part IX Statement of Functional Expenses

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). (D) (A) (C) Do not include amounts reported on lines 6b, Fundraising Total expenses Program service Management and 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 2 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 0 4 Compensation of current officers, directors, 139,763 105,637 19,684 trustees, and key employees 14,442 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,336,821 992,054 165,574 179,193 7 Pension plan contributions (include section 401(k) 24,942 4,399 4,687 and section 403(b) employer contributions).... 34,028 139,721 102,921 18,020 18,780 9 107,646 79,569 14,173 13,904 10 Fees for services (non-employees): 11 0 5,610 5,610 0 0 34,411 0 34,411 0 C 43.175 43,175 0 0 d Professional fundraising services. See Part IV, line 17. . . . 0 0 е 0 0 0 f 478,916 460,309 13,556 5,051 g 0 0 12 0 39,930 10,659 89,040 38,451 13 38.740 7.575 31,165 0 14 0 0 0 0 15 131,604 6,635 124.969 0 16 61,121 58,946 488 1,687 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 47,096 27,920 5.186 13,990 19 Conferences, conventions, and meetings 0 0 20 0 0 0 21 0 0 0 6,991 6,991 0 22 Depreciation, depletion, and amortization 0 8,897 8,897 0 23 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.) 7,755 4.584 865 2,306 Dues, subscriptions & publications 8,279 Recruitment & Staff Development 15,964 3,500 4,185 3,484 0 2,378 1,106 Bank charges 679 679 0 Licenses & Fees 140,443 -168,227 Common Costs 0 27,784 f All other expenses 0 324,480 2,731,462 2,109,208 297,774 Total functional expenses. Add lines 1 through 24f. 25 Joint costs. Check here ▶ X if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational 20,426 0 16,341 campaign and fundraising solicitation

| P | art X | Balance Sheet | | | | | |
|-----------------------------|----------|--|---------|--|--|--------------|--------------------|
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash—non-interest-bearing | | | 277,815 | 1 | 282,205 |
| | 2 | Savings and temporary cash investments | | | 1,585,277 | 2 | 1,489,988 |
| | 3 | Pledges and grants receivable, net | | | 153,697 | 3 | 0 |
| | 4 | Accounts receivable, net | | | 129,550 | 4 | 141,680 |
| | 5 | Receivables from current and former officers, | | An activities and the same | | | |
| | | employees, and highest compensated employ | | TO SECURE OF SEC | | | |
| | | Schedule L | | 5 | 0 | | |
| | 6 | Receivables from other disqualified persons (a | | | | DIFFE | |
| | | 4958(f)(1)), persons described in section 4958 | | | | | |
| c) | | employers and sponsoring organizations of se | | 225 | | | |
| Assets | _ | employees' beneficiary organizations (see inst | | | 0 | 6 | 0 |
| 155 | 7 | Notes and loans receivable, net | | | 0 | 7 | 0 |
| ~ | 8 | Inventories for sale or use | | | 0 | 8 | 0 |
| | 9 | Prepaid expenses and deferred charges | i · · | | 117,948 | 9 | 60,254 |
| | 10a | Land, buildings, and equipment: cost or | 40. | 24.257 | e de la companya del companya de la companya del companya de la co | | |
| | | | 10a | | an are their arrespond | | |
| | b | | 10b | | 9,300 | | 8,535 |
| | 11 | Investments—publicly traded securities | | 789,235 | | 957,244 | |
| | 12 | Investments—other securities. See Part IV, lin | | | 0 | 12 | 0 |
| | 13 14 | Investments—program-related. See Part IV, lii | | | 0 | 13 | 0 |
| | | Intangible assets | | | 0 | 14 | 0 |
| | 15 16 | Other assets. See Part IV, line 11 | | | 13,432 | 15 | 30,619 |
| | 17 | Total assets. Add lines 1 through 15 (must ed Accounts payable and accrued expenses | | | 3,076,254 | | 2,970,525 |
| | 18 | Grants payable | 204,093 | 17 | 168,692 | | |
| | 19 | Deferred revenue | | 219,509 | 18 19 | 0 | |
| | 20 | Tax-exempt bond liabilities | | 219,509 | 20 | 143,409 | |
| S | 21 | Escrow or custodial account liability. Complete | | | 0 | 21 | 0 |
| Liabilities | 22 | Payables to current and former officers, direct | | | U | 41 | |
| <u> </u> | | employees, highest compensated employees, | | The state of the s | | | |
| Ë | | persons. Complete Part II of Schedule L | | | o | 22 | |
| | 23 | Secured mortgages and notes payable to unre | | | 0 | 23 | 0 |
| | 24 | Unsecured notes and loans payable to unrelat | | | 0 | 24 | 0 |
| | 25 | Other liabilities. Complete Part X of Schedule | | - | 0 | 25 | 0 |
| | 26 | Total liabilities. Add lines 17 through 25. | | | 423,602 | | 312,101 |
| ses | | Organizations that follow SFAS 117, check complete lines 27 through 29, and lines 33 | here | ▶ X and | | | 512,161 |
| an | 27 | Unrestricted net assets | | | 826,353 | 27 | 883,664 |
| Ba | 28 | Temporarily restricted net assets | | [| 1,265,317 | 28 | 1,061,578 |
| pu | 29 | Permanently restricted net assets | | | 560,982 | 29 | 713,182 |
| Net Assets or Fund Balances | | Organizations that do not follow SFAS 117, and complete lines 30 through 34. | check | here ▶ | | | |
| ets | 30 | Capital stock or trust principal, or current funds | | | 30 | | |
| 188 | 31 | Paid-in or capital surplus, or land, building, or | equipm | ent fund | | 31 | |
| et / | 32 | Retained earnings, endowment, accumulated i | | | | 32 | |
| Ž | 33 | Total net assets or fund balances | | 2,652,652 | 33 | 2,658,424 | |
| | 34 | Total liabilities and net assets/fund balances . | | | 3,076,254 | 34 | 2,970,525 |

| Form 9 | 990 (2010) Sustainable Conservation | 94-3 | 232431 | Pag | ge IZ | | |
|--------|---|------|------------|---------|--------|--|--|
| Part | XI Reconciliation of Net Assets | | | | | | |
| | Check if Schedule O contains a response to any question in this Part XI | | | | X | | |
| | | , | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 2,659 | ,903 | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 2,731 | | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | -71,559 | | | |
| 4 | 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | | | | | | |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | | 77 | ,331 | | |
| 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 | | 2,658 | ,424 | | |
| Part | XII 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: | | 250 | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in | | | | | | |
| | Schedule O. | | al la firm | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | X | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | Χ | | | |
| 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 | X | | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in | | | | | | |
| | Schedule O. | | | | | | |
| 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: | | 5 5 7 1 | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | 1265 | | | | |
| 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 | | | | | | |
| | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | | | N/A | | | |
| | | | Form | 990 | (2010) | | |



943232437 For assistance, call: 1-877-829-5500

Notice Number: CP211A Date: September 19, 2011

Taxpayer Identification Number:

94-3232437 Tax Form: 990

Tax Period: December 31, 2010

SUSTAINABLE CONSERVATION
98 BATTERY ST STE 302
SAN FRANCISCO CA 94111-5512777



89361

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is **November 15, 2011.**

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2010

Open to Public

Open to Public Inspection

Name of the organization Employer identification number 94-3232437 Sustainable Conservation Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I 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 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: _____ An organization operated for the benefit of a college or university owned or operated by a governmental unit described 5 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 An organization that normally receives a substantial part of its support from a governmental unit or from the general public X 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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.) 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. c | Type III-Functionally integrated a Type I b Type II Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified 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 g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above?............. 11g(ii) 11g(iii) Provide the following information about the supported organization(s) h (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (i) Name of supported (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 col. (i) of your above or IRC section governing document? (i) organized in the (see instructions)) **U.S.?** support? Yes Yes Yes No (A) (B) 0 (C) 0 (D) 0 (E) 0

0

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) 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.") 1,546,481 2,875,694 4,271,163 1,998,221 2,601,847 13,293,406 Tax revenues levied for the organization's 2 benefit and either paid to or expended on its behalf 0 0 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 1,546,481 2,875,694 4,271,163 1,998,221 2,601,847 13,293,406 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 3,236,235 Public support. Subtract line 5 from line 4. 10,057,171 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total Amounts from line 4 1,546,481 2,875,694 4,271,163 1.998.221 2,601,847 13,293,406 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 228 115 15,831 21,432 28,287 65,893 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 5.646 5,563 11,209 11 Total support. Add lines 7 through 10. 13,370,508 12 12 1,156,363 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2009 Schedule A, Part II, line 14 15 80.39% 33 1/3% support test-2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 16a 33 1/3% support test-2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 10%-facts-and-circumstances test-2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 17a 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-2009. 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

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

| | (Complete only if you checked the I | | | | | ualify under Pa | art II. N/A |
|-----------|--|---------------------|-------------------|-------------------|------------------|-----------------|----------------|
| Sec | tion A. Public Support | | | | | | |
| | 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.") | | | | | | 0 |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the | | | | - | | |
| 3 | organization's tax-exempt purpose | | | | | | 0 |
| | 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 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 |
| _ | Add lines 7a and 7b | 0 | 0 | 0 | 0 | o | 0 |
| 8 | Public support (Subtract line 7c from | 0 | U U | | | | |
| ٠ | line 6.) | | | | | APPRINCED IN | 0 |
| Sec | tion B. Total Support | | | | | | |
| | ndar 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 | ol | 0 |
| 10a | Gross income from interest, dividends, | | | | | | |
| | payments received on securities loans, rents, royalties and income from similar sources | | | | | | 0 |
| b | Unrelated business taxable income (less | | | | | | |
| | section 511 taxes) from businesses | | | | 1 | | |
| | acquired after June 30, 1975 | | | | | | 0 |
| С | Add lines 10a and 10b | 0 | 0 | 0 | 0 | 0 | 0 |
| 11 | Net income from unrelated business | | | | l | | |
| | activities not included in line 10b, whether or not the business is regularly carried on | | | | | 1 | 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, 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 | | | | | | |
| Sect | ion C. Computation of Public Support F | | | | | | |
| 15 | Public support percentage for 2010 (line 8, column (| (f) divided by line | | | | 15 | 0.00% |
| 16 | Public support percentage from 2009 Schedule A, P | | | <u> </u> | | 16 | 0.00% |
| | ion D. Computation of Investment Incom | | | | | 47 | 0.0007 |
| 17 | Investment income percentage for 2010 (line 10c, co | | | | | 17 | 0.00% |
| 18 19a | Investment income percentage from 2009 Schedule 33 1/3% support tests-2010. If the organization did | | | | | | 0.00% |
| - | not more than 33 1/3%, check this box and stop he | re. The organiza | tion qualifies as | a publicly suppor | ted organization | | ▶ □ |
| b | 33 1/3% support tests-2009. If the organization did line 18 is not more than 33 1/3%, check this box and | | | | | | ▶ |

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

| THE RESERVE THE PERSON NAMED IN | 990 or 990-EZ) 2010 | Sustainable Conservation | 94-3232437 | Page 4 |
|---------------------------------|---|--|---------------------|--------|
| Part IV | Supplemental Part II, line 17a instructions). | Information . Complete this part to provide the explanations required or 17b; and Part III, line 12. Also complete this part for any additional | by Part II, line 10 | |
| Part II, Line 10 | - Miscellaneous re | eceipts | | |
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SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

▶ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Sustainable Conservation 94-3232437 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 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . . . Aggregate value at end of year 4 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 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 No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II 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 b 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c C d Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 during the tax year 4 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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: 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

| | The state of the s | | Page 3 |
|--|--|-----------------------|---------------------------------------|
| Part VII Investments—Other Securiti | es. See Form 990, Part X, | line 12. | N/A |
| (a) Description of security or category | (b) Book value | (c) Method of va | |
| (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) | 0 | | |
| (D) (E) | 0 | | |
| (F) | 0 | | |
| (G) | 0 | | |
| (H) | 0 | | |
| (I) | 0 | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) | 0 | | Makes to the second |
| Part VIII Investments—Program Relat | ted. See Form 990, Part X | , line 13. | N/A |
| (a) Description of investment type | (b) Book value | (c) Method of va | |
| , , , | (-, | Cost or end-of-year n | narket value |
| (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, | | | |
| | a) Description | | N/A |
| (1) | a) Description | | (b) Book value |
| (2) | | | . 0 |
| (3) | 100 | | . 0 |
| (4) | | | 0 |
| (5) | | | 0 |
| (6) | | | 0 |
| . (7) | - | | 0 |
| (8) | | | 0 |
| (9) | | | 0 |
| (10) | | | 0 |
| Total. (Column (b) must equal Form 990, Part X, o | | | 0 |
| Part X Other Liabilities. See Form 99 | 0, Part X, line 25. | | N/A |
| 1, (a) Description of liability | (b) Amount | | A Manager Control |
| (1) Federal income taxes | 0 | | |
| (2) | 0 | | |
| (3) | 0 | | |
| (4) | 0 | | |
| (5) | 0 | | |
| (6) | 0 | | |
| (7) | 0 | | |
| (8) | 0 | | |
| (9) (10) | 0 | | |
| (11) | 0 | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | 0 | | |
| | U | | |

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).

| Par | Reconciliation of Change in Net Assets from Form 990 to Audited Financial St | atements | 5 |
|--------|--|-----------------------|-----------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 2,659,903 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 2,731,462 |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | 3 | -71,559 |
| 4 | Net unrealized gains (losses) on investments | 4 | 0 |
| 5 | Donated services and use of facilities | 5 | 0 |
| 6 | Investment expenses | 6 | 0 |
| 7 | Prior period adjustments | 7 | 0 |
| 8 | Other (Describe in Part XIV.) | 8 | 0 |
| 9 | Total adjustments (net). Add lines 4 through 8 | 9 | 0 |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | 10 | -71,559 |
| - | Reconciliation of Revenue per Audited Financial Statements With Revenue per | r Return | |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 2,769,674 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | EUSE: | 2,100,014 |
| a | Net unrealized gains on investments | 11 | |
| b | Donated services and use of facilities | And the second second | |
| C | Recoveries of prior year grants | | |
| d | Other (Describe in Part XIV.) | | |
| e | Add lines 2a through 2d | 2e | 109,771 |
| 3 | Subtract line 2e from line 1 | 3 | 2,659,903 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 3 | 2,039,903 |
| | Investment expenses not included on Form 990, Part VIII, line 7b 4a | | |
| a | | 0 | |
| b | | 0 | 0 |
| C | Add lines 4a and 4b | 4c | 0 050 000 |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | 2,659,903 |
| | Reconciliation of Expenses per Audited Financial Statements With Expenses | | |
| 1 | Total expenses and losses per audited financial statements | 1 . | 2,763,902 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 0 | |
| b | Prior year adjustments | 0 | |
| C | Other losses | | |
| d | outer (Becombe in Carry) | 0 | |
| е | Add lines 2a through 2d | 2e | 32,440 |
| 3 | Subtract line 2e from line 1 | 3 | 2,731,462 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | 150000 | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b 4a | 0 | , |
| b | Color (Bosting III allower) | 0 | |
| C | Add lines 4a and 4b | 4c | 0 |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 2,731,462 |
| Part | XIV Supplemental Information | | |
| and 2 | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P 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. A part to provide any additional information. | | |
| Part \ | V, Line 4 - The purpose of the organization's endowment fund is to provide support for the organization | 's operation | าร. |
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| Sustainable | Conservation |
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94-3232437

| Schedule D (Form | 990) 2010 | Page 5 |
|------------------|--|--------|
| Part XIV | 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

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

Name of the organization

Employer identification number

94-3232437

| Sustainable Conservation | 94-3232437 |
|--|--|
| Form 990 Part VI Section B Line 11b | |
| A draft of form 990 is reviewed by management and the Audit Committee | of the Board of Directors prior to filing. The Committee |
| meets with management and the tax preparer as necessary to review the | Form 990, related schedules and supporting |
| documention as necessary. If changes to the Form are requested, a revi | |
| Committee. The Committee will make a recommendation to the full boar | |
| Form 990 Part VI Section B Line 12c | |
| Organization requests all board members to sign a conflict of interest sta | tement once a year |
| | terrient once a year. |
| Form 990 Part VI Section B Line 15a | |
| The Governance Committee is composed entirely of people that have no | conflict of interest with Sustainable Conservation, its |
| Officers/Key employees or its compensation arrangements. It is respons | ble for conducting the performance and compensation |
| review of the Executive Director and other officers/key employees. The p | erformance review process includes a self review, |
| discussion with the Committee and the officers/key employees and a dis | cussion amongst the Committee. A written performance |
| review is included in the personnel file of the Executive Director/key emp | loyees. The Committee also reviews compensation |
| information of comparable positions at Environmental organization of sin | nilar sizes in the Bay Area and makes a compensation |
| recommendation to the full board. The Full Board then discusses the rec | ommendation and decides on the compensation |
| annually as documented in the meeting minutes. Chief Executive Officer | last compensation review was in 2010. |
| Form 990 Part VI Section C Line 19 | |
| Governing documents, conflict of interest policy, and Financial Statemen | ts are available to the public upon request. |
| Form 990 Part XI Line 5 | |
| \$77,331 Unrealized gain from investments | |
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