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ARMANINO LLP

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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)

Department of the Treasury
Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning **OCT 1, 2012** and ending **SEP 30, 2013**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GOLDEN GATE NATIONAL PARKS CONSERVANCY Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite FORT MASON BUILDING 201 City, town, or post office, state, and ZIP code SAN FRANCISCO, CA 94123 F Name and address of principal officer: GREGORY MOORE SAME AS C ABOVE	D Employer identification number 94-2781708 E Telephone number 415-561-3000 G Gross receipts \$ 51,851,569. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.PARKSCONSERVANCY.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1981 M State of legal domicile: CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PRESERVE GOLDEN GATE NATIONAL PARKS; ENHANCE VISITOR EXPERIENCE; BUILD A DEDICATED COMMUNITY. 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 22 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 22 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 465 6 Total number of volunteers (estimate if necessary) 6 35600 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h) Prior Year 20,529,212. Current Year 11,911,038. 9 Program service revenue (Part VIII, line 2g) 14,230,664. 15,913,833. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,575,066. 1,580,277. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 9,404,489. 10,402,242. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 45,739,431. 39,807,390.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 761,517. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 19,105,130. 19,622,694. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,804,149. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 27,925,107. 16,951,765. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 47,030,237. 37,335,976. 19 Revenue less expenses. Subtract line 18 from line 12 -1,290,806. 2,471,414.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16) Beginning of Current Year 48,003,886. End of Year 54,128,650. 21 Total liabilities (Part X, line 26) 5,956,744. 7,597,644. 22 Net assets or fund balances. Subtract line 21 from line 20 42,047,142. 46,531,006.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer 	Date 6.26.14
	NICOLAS ELSISHANS, EXECUTIVE VP AND COO Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name LYNN HENLEY	Preparer's signature 	Date 6/25/14	Check <input type="checkbox"/> if self-employed PTIN P00356034	Firm's EIN ▶ 94-6214841
	Firm's name ▶ ARMANINO LLP		Firm's address ▶ 12657 ALCOSTA BOULEVARD, SUITE 500 SAN RAMON, CA 94583-4600		
	Phone no. 925-790-2600				

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



Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: GOLDEN GATE NATIONAL PARKS CONSERVANCY (THE "CONSERVANCY") IS A NOT-FOR-PROFIT COOPERATING ASSOCIATION OF THE NATIONAL PARK SERVICE AND THE PRESIDIO TRUST WHOSE MISSION IS TO PRESERVE THE GOLDEN GATE NATIONAL PARKS (THE "PARKS"), ENHANCE THE PARK VISITOR EXPERIENCE, AND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 13,479,938. including grants of \$) (Revenue \$ 26,359,271.) PARK INTERPRETATION AND VISITOR SERVICES

THIS CATEGORY INCLUDES THE OPERATION AND DELIVERY OF TOURS OF ALCATRAZ ISLAND, MUIR WOODS, AND THE GOLDEN GATE BRIDGE; SALES OF INTERPRETIVE PUBLICATIONS AND THEME-RELATED PRODUCTS; AND THE PRODUCTION OF TRAIL SIGNAGE AND FREE PUBLICATIONS TO ENHANCE THE VISITOR EXPERIENCE.

2013 ACCOMPLISHMENTS

* DELIVERED PROJECTS, PROGRAMS, AND SERVICES BENEFITING NEARLY 18 MILLION VISITORS (COMBINED VISITATION TO GOLDEN GATE NATIONAL RECREATION AREA, MUIR WOODS NATIONAL MONUMENT, AND FORT POINT NATIONAL HISTORIC SITE).

4b (Code:) (Expenses \$ 12,947,106. including grants of \$ 761,517.) (Revenue \$ 74,641.) PARK ENHANCEMENTS, RESTORATIONS, AND STEWARDSHIP

THIS WORK ENCOMPASSES BUILDING AND MAINTAINING MULTI-USE (PEDESTRIAN, BIKE, EQUESTRIAN) TRAILS, RESTORING SENSITIVE ECOSYSTEMS, PROTECTING ENDANGERED SPECIES, GROWING NATIVE PLANTS, REHABILITATING HISTORIC STRUCTURES, CONSTRUCTING OVERLOOKS, INSTALLING VISITOR AMENITIES, AND CREATING NEW PARK EXPERIENCES FOR THE ENTIRE COMMUNITY.

2013 ACCOMPLISHMENTS

* COMPLETED A MULTI-PHASE RESTORATION PROJECT AT MUIR BEACH AND THE LOWER REDWOOD CREEK WATERSHED--RECONNECTING THE CREEK WITH ITS FLOODPLAIN, REALIGNING THE PARKING LOT, CREATING WILDLIFE HABITAT,

4c (Code:) (Expenses \$ 3,396,168. including grants of \$) (Revenue \$ 72,698.) YOUTH, VOLUNTEER, AND COMMUNITY PROGRAMS

THIS INCLUDES PROGRAMS CONDUCTED AT THE CRISSY FIELD CENTER (AN URBAN ENVIRONMENTAL EDUCATION CENTER), THROUGH THE CONSERVANCY'S VARIOUS PROGRAMS (INSTITUTE AT THE GOLDEN GATE, TRAILS FOREVER, PARK STEWARDSHIP, ETC.), AND UNDER THE AUSPICES OF THE PARK YOUTH COLLABORATIVE.

2013 ACCOMPLISHMENTS

* DELIVERED 91 CURRICULUM-BASED FIELD TRIPS--REACHING 1,946 STUDENTS--THROUGH THE SCHOOL PROGRAMS OF THE CRISSY FIELD CENTER. * ATTAINED A NEW RECORD FOR PARTICIPATION IN CAMPING AT THE PRESIDIO

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 29,823,212.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 20b regarding organizational requirements and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		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>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
	1a 413		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 465		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		X
2b			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3a			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
4a			
b	If "Yes," enter the name of the foreign country: CANADA, CAYMAN ISLANDS 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?		X
5a			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5b			
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6a			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6b			
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
8			
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
9b			
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (22); 1b Enter the number of voting members included in line 1a, above, who are independent (22); 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? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8a The governing body? (X); 8b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b 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 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official (X); 15b Other officers or key employees of the organization (X); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
NICOLAS ELSISHANS, EVP AND COO - 415-561-3000
BUILDING 201, FORT MASON, SAN FRANCISCO, CA 94123

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARK BUELL CHAIR	1.00	X		X				0.	0.	0.
(2) ALEXANDER H. SCHILLING VICE-CHAIR	1.00	X		X				0.	0.	0.
(3) LYNN MELLE WENDELL VICE-CHAIR	1.00	X		X				0.	0.	0.
(4) DAVID COURTNEY TREASURER	1.00	X		X				0.	0.	0.
(5) LARRY LOW SECRETARY	1.00	X		X				0.	0.	0.
(6) JANICE BARGER TRUSTEE	1.00	X						0.	0.	0.
(7) BETSY EISENHARDT TRUSTEE	1.00	X						0.	0.	0.
(8) RANDI FISHER TRUSTEE	1.00	X						0.	0.	0.
(9) JESSICA GALLOWAY TRUSTEE	1.00	X						0.	0.	0.
(10) JOHN C. GAMBLE TRUSTEE	1.00	X						0.	0.	0.
(11) SALLY HAMBRECHT TRUSTEE	1.00	X						0.	0.	0.
(12) LINDA HOWELL TRUSTEE	1.00	X						0.	0.	0.
(13) PATSY ISHIYAMA TRUSTEE	1.00	X						0.	0.	0.
(14) DAN KINGSLEY (SINCE JUNE 2013) TRUSTEE	1.00	X						0.	0.	0.
(15) MARTHA KROFF TRUSTEE	1.00	X						0.	0.	0.
(16) COLIN LIND TRUSTEE	1.00	X						0.	0.	0.
(17) PHIL MARINEAU (THRU SEPTEMBER 2 TRUSTEE	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JOHN E. MCCOSKER, PH.D. TRUSTEE	1.00	X					0.	0.	0.	
(19) ROBERT MORRIS TRUSTEE	1.00	X					0.	0.	0.	
(20) JOHN MURRAY TRUSTEE	1.00	X					0.	0.	0.	
(21) JACOB E. PEREA, PH.D. TRUSTEE	1.00	X					0.	0.	0.	
(22) ROB PRICE TRUSTEE	1.00	X					0.	0.	0.	
(23) STACI SLAUGHTER TRUSTEE	1.00	X					0.	0.	0.	
(24) MICHAEL WILLIS (THRU SEPTEMBER) TRUSTEE	1.00	X					0.	0.	0.	
(25) GREGORY MOORE PRESIDENT & CEO	40.00			X			294,808.	0.	60,038.	
(26) NICOLAS ELSISHANS EXECUTIVE V.P. & COO	40.00			X			231,846.	0.	31,477.	
1b Sub-total							526,654.	0.	91,515.	
c Total from continuation sheets to Part VII, Section A							723,788.	0.	94,041.	
d Total (add lines 1b and 1c)							1,250,442.	0.	185,556.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **15**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CAMPBELL GRADING INC. P. O. BOX 434, HEALDSBURG, CA 95448	CONSTRUCTION SERVICES	3,952,192.
FOGHORN CREATIVE, 39 MESA STREET, SUITE 102, SAN FRANCISCO, CA 94129	EVENT PRODUCTION SERVICES	2,817,574.
FISHER DEVELOPMENT, INC. 201 SPEAR STREET, SAN FRANCISCO, CA 94105	CONSTRUCTION SERVICES	2,515,069.
PLANT CONSTRUCTION COMPANY 300 NEWHALL STREET, SAN FRANCISCO, CA 94124	CONSTRUCTION SERVICES	1,341,137.
PROJECT FROG, 1500 SANSOME STREET, SAN FRANCISCO, CA 94111	CONSTRUCTION SERVICES	966,063.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **41**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	1,156,250.			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	5,237,337.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	5,517,451.			
	g	Noncash contributions included in lines 1a-1f: \$		93,523.			
	h	Total. Add lines 1a-1f		11,911,038.			
	Program Service Revenue			Business Code			
2 a		INTERPRETIVE TOURS	900099	15,167,362.	15,167,362.		
b		PARK ACCESS FACILITATION	900099	437,380.	437,380.		
c		INTERPRETIVE PHOTOS	900099	161,681.	161,681.		
d		COMMUNITY PROGRAMS	900099	88,723.	88,723.		
e		MITIGATION AWARDS	900099	58,687.	58,687.		
f		All other program service revenue					
g	Total. Add lines 2a-2f		15,913,833.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,285,843.		1,285,843.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real	(ii) Personal			
			127,400.				
			b	Less: rental expenses	127,400.		
	c	Rental income or (loss)	0.				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
			6,460,620.				
			b	Less: cost or other basis and sales expenses	6,166,186.		
			c	Gain or (loss)	294,434.		
	d	Net gain or (loss)		294,434.		294,434.	
	8 a	Gross income from fundraising events (not including \$ 1,156,250. of contributions reported on line 1c). See Part IV, line 18	a	90,000.			
			b	Less: direct expenses	344,223.		
c			Net income or (loss) from fundraising events		-254,223.		-254,223.
9 a	Gross income from gaming activities. See Part IV, line 19	a					
		b	Less: direct expenses				
		c	Net income or (loss) from gaming activities				
10 a	Gross sales of inventory, less returns and allowances	a	15,999,148.				
		b	Less: cost of goods sold	5,406,370.			
		c	Net income or (loss) from sales of inventory		10,592,778.	10,592,778.	
Miscellaneous Revenue		Business Code					
11 a	RECOVERY OF BAD DEBT	900099	63,687.			63,687.	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		63,687.				
12	Total revenue. See instructions.		39,807,390.	26,506,611.	0.	1,389,741.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	761,517.	761,517.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	507,854.		507,854.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	14,898,537.	11,927,929.	2,137,180.	833,428.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	449,356.	317,357.	97,914.	34,085.
9 Other employee benefits	2,676,335.	2,242,267.	340,194.	93,874.
10 Payroll taxes	1,090,612.	846,903.	179,792.	63,917.
11 Fees for services (non-employees):				
a Management	424,392.	424,392.		
b Legal	52,914.	49,624.	3,290.	
c Accounting	103,162.		103,162.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	83,626.		83,626.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	2,544,373.	1,842,756.	610,054.	91,563.
12 Advertising and promotion	165,126.	53,733.	53,896.	57,497.
13 Office expenses	3,171,475.	2,218,886.	629,869.	322,720.
14 Information technology	733,222.	420,040.	287,819.	25,363.
15 Royalties	35,473.	35,473.		
16 Occupancy	1,042,593.	933,164.	74,894.	34,535.
17 Travel	625,485.	539,615.	77,736.	8,134.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	220,605.	118,404.	43,973.	58,228.
20 Interest	10,077.	10,077.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,453,397.	1,188,082.	265,088.	227.
23 Insurance	191,565.	150,213.	39,967.	1,385.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CONSTRUCTION SERVICES	2,983,722.	2,983,722.		
b PLANNING AND DESIGN	1,648,321.	1,641,758.		6,563.
c TICKETING SERVICES	531,929.	531,929.		
d CONSTRUCTION MATERIALS	480,859.	480,859.		
e All other expenses	449,449.	104,512.	172,307.	172,630.
25 Total functional expenses. Add lines 1 through 24e	37,335,976.	29,823,212.	5,708,615.	1,804,149.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	253,762.	1	224,338.
	2	Savings and temporary cash investments	1,466,917.	2	9,047,107.
	3	Pledges and grants receivable, net	2,661,410.	3	2,021,616.
	4	Accounts receivable, net	7,374,898.	4	6,424,481.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	
	6	Loans and other 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 instr). Complete Part II of Sch L	0.	6	
	7	Notes and loans receivable, net	0.	7	
	8	Inventories for sale or use	3,165,942.	8	3,225,917.
	9	Prepaid expenses and deferred charges	252,371.	9	312,583.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,827,898.		
	b	Less: accumulated depreciation	10b 2,116,785.	10c	711,113.
	11	Investments - publicly traded securities	11,047,302.	11	18,688,429.
	12	Investments - other securities. See Part IV, line 11	13,520,121.	12	6,109,606.
	13	Investments - program-related. See Part IV, line 11	0.	13	
	14	Intangible assets	0.	14	
	15	Other assets. See Part IV, line 11	7,373,182.	15	7,363,460.
16	Total assets. Add lines 1 through 15 (must equal line 34)	48,003,886.	16	54,128,650.	
Liabilities	17	Accounts payable and accrued expenses	4,432,950.	17	5,446,164.
	18	Grants payable	0.	18	
	19	Deferred revenue	502,076.	19	1,578,422.
	20	Tax-exempt bond liabilities	0.	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	877,888.	21	519,201.
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	
	23	Secured mortgages and notes payable to unrelated third parties	0.	23	
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	143,830.	25	53,857.
	26	Total liabilities. Add lines 17 through 25	5,956,744.	26	7,597,644.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	22,811,746.	27	27,197,607.
	28	Temporarily restricted net assets	14,242,488.	28	13,276,804.
	29	Permanently restricted net assets	4,992,908.	29	6,056,595.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	42,047,142.	33	46,531,006.	
34	Total liabilities and net assets/fund balances	48,003,886.	34	54,128,650.	

Part XI Reconciliation of Net Assets

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	39,807,390.
2	Total expenses (must equal Part IX, column (A), line 25)	2	37,335,976.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,471,414.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	42,047,142.
5	Net unrealized gains (losses) on investments	5	2,012,450.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	46,531,006.

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
3b	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 _____	X	

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14		%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15		%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4283086.	15514002.	7260813.	20529212.	11911038.	59498151.
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	27103715.	28607428.	30554234.	28560034.	32002981.	146828392
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	31386801.	44121430.	37815047.	49089246.	43914019.	206326543
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	346,931.	181,218.	544,939.	648,450.	368,326.	2089864.
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.
c Add lines 7a and 7b	346,931.	181,218.	544,939.	648,450.	368,326.	2089864.
8 Public support (Subtract line 7c from line 6.)						204236679

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	31386801.	44121430.	37815047.	49089246.	43914019.	206326543
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	420,608.	362,730.	429,578.	1129013.	1413243.	3755172.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	420,608.	362,730.	429,578.	1129013.	1413243.	3755172.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	2738338.	2506973.	355,995.	208,785.	63,687.	5873778.
13 Total support. (Add lines 9, 10c, 11, and 12.)	34545747.	46991133.	38600620.	50427044.	45390949.	215955493
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	94.57 %
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	94.58 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	1.74 %
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	1.36 %

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2012

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

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

▶ **See separate instructions.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

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

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

Name of organization GOLDEN GATE NATIONAL PARKS CONSERVANCY	Employer identification number 94-2781708
---	---

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

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

- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		0.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)		0.	
c Total lobbying expenditures (add lines 1a and 1b)		0.	
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)		0.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		0.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)		0.	
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount	1,000,000.		7,600.	0.	1,007,600.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,511,400.
c Total lobbying expenditures	24,226.		38,000.	0.	62,226.
d Grassroots nontaxable amount	250,000.		1,900.	0.	251,900.
e Grassroots ceiling amount (150% of line 2d, column (e))					377,850.
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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

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

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

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

GOLDEN GATE NATIONAL PARKS CONSERVANCY

Employer identification number

94-2781708

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
 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 |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 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 violations, and enforcement of the conservation easements it holds?
- 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 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1
- (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	5,667,562.	5,056,463.	7,523,356.	6,897,098.	6,984,769.
b Contributions	1,000,000.	132.	318,611.	68,575.	
c Net investment earnings, gains, and losses	755,264.	855,278.	-143,171.	787,175.	186,823.
d Grants or scholarships					
e Other expenditures for facilities and programs	249,949.	244,310.	37,977.	229,492.	274,494.
f Administrative expenses					
g End of year balance	7,172,877.	5,667,563.	7,660,819.	7,523,356.	6,897,098.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment %
 - b** Permanent endowment 84.44 %
 - c** Temporarily restricted endowment 15.56 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|------------------------------------|--------------------------|-------------------------------------|
| (i) unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		2,827,898.	2,116,785.	711,113.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				711,113.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	4,609,444.	END-OF-YEAR MARKET VALUE
(B) CASH AND CASH EQUIVALENTS	1,500,162.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	6,109,606.	

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

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

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

(a) Description	(b) Book value
(1) CAPITALIZED GGB PROJECT COSTS	7,363,460.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	7,363,460.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CAPITAL LEASE OBLIGATION	53,857.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	53,857.

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

1	Total revenue, gains, and other support per audited financial statements	1	47,517,838.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	2,012,450.
b	Donated services and use of facilities	2b	37,405.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	2,049,855.
3	Subtract line 2e from line 1	3	45,467,983.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-5,660,593.
c	Add lines 4a and 4b	4c	-5,660,593.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	39,807,390.

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

1	Total expenses and losses per audited financial statements	1	43,033,974.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	37,405.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	5,660,593.
e	Add lines 2a through 2d	2e	5,697,998.
3	Subtract line 2e from line 1	3	37,335,976.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	37,335,976.

Part XIII Supplemental Information

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

PART IV, LINE 2B: AGENCY FUNDS PAYABLE PRIMARILY REPRESENT A TERM

ENDOWMENT HELD IN TRUST FOR THE BENEFIT OF THE NATIONAL PARK SERVICE AS WELL AS ADMISSION FEES TO MUIR WOODS NATIONAL MONUMENT COLLECTED ON BEHALF OF AND PAYABLE TO THE NATIONAL PARK SERVICE.

PART V, LINE 4: THE JAMES R. HARVEY RESTORATION FUND WAS ESTABLISHED AS AN ENDOWMENT TO BENEFIT THE ONGOING PRESERVATION AND RESTORATION OF THE PRESIDIO. THE OSHER ENDOWMENT WAS ESTABLISHED FOR THE ENVIRONMENTAL

Part XIII Supplemental Information (continued)

EDUCATION AT CRISSY FIELD. THE TED CHONG ENDOWMENT FUND WAS ESTABLISHED TO BENEFIT THE CONSERVANCY'S NATIVE PLANT NURSERY PROGRAMS. THE DESHA FAMILY CREATED AN ENDOWMENT FUND IN MEMORY OF ANNE KINCAID TO RESTORE, PROTECT, AND CONSERVE THE NATURAL ASSETS AND FEATURES OF THE GOLDEN GATE NATIONAL PARKS. THE MADELEINE TANG FUND WAS ESTABLISHED FOR THE BENEFIT OF THE WATERSHEDS INSPIRING STUDENT EDUCATION (WISE) PROGRAM IN THE GOLDEN GATE NATIONAL PARKS. THE MARK KUTNINK ENDOWMENT WAS ESTABLISHED FOR THE BENEFIT OF THE TRAILS FOREVER PROGRAM AND THE CRISSY FIELD CENTER. THE GREG HIND ENDOWMENT WAS ESTABLISHED FOR THE BENEFIT OF THE GOLDEN GATE RAPTOR OBSERVATORY.

PART X, LINE 2: THE CONSERVANCY FOLLOWS FASB ASC TOPIC 740 INCOME TAXES TO ACCOUNT FOR UNCERTAIN TAX POSITIONS. MANAGEMENT EVALUATED THE CONSERVANCY'S TAX POSITIONS AND CONCLUDED THAT THE CONSERVANCY HAD MAINTAINED ITS TAX-EXEMPT STATUS AND HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS. THEREFORE, NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN INCLUDED IN THE FINANCIAL STATEMENTS. THE CONSERVANCY IS GENERALLY NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY FEDERAL AND STATE AUTHORITIES FOR YEARS PRIOR TO 2011 AND 2010, RESPECTIVELY.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSE	-254,223.
COSTS OF GOODS SOLD	-5,406,370.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-5,660,593.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSE-NET OF SPECIAL EVENT REVENUE	254,223.
--	----------

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization: **GOLDEN GATE NATIONAL PARKS CONSERVANCY**
Employer identification number: **94-2781708**

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		4,115,196.
NORTH AMERICA	0	0	INVESTMENTS		1,194,972.
3 a Sub-total	0	0			5,310,168.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			5,310,168.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)* Yes No

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		TRAILS FOREVER DINNER (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	1,246,250.		1,246,250.
	2	Less: Contributions	1,156,250.		1,156,250.
	3	Gross income (line 1 minus line 2)	90,000.		90,000.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes	2,877.		2,877.
	6	Rent/facility costs	148,234.		148,234.
	7	Food and beverages	170,969.		170,969.
	8	Entertainment	800.		800.
	9	Other direct expenses	21,343.		21,343.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			(344,223)
	11	Net income summary. Combine line 3, column (d), and line 10			-254,223.

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

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

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain: _____

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

b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2012

Open to Public
Inspection

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

Name of the organization
Employer identification number
94-2781708

Part I **General Information on Grants and Assistance**
GOLDEN GATE NATIONAL PARKS CONSERVANCY

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

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL PARK SERVICE 1849 C STREET NW WASHINGTON, DC 20240	14-0001849		761,517.	0.			TO SUPPORT INTERPRETIVE, EDUCATIONAL, SCIENTIFIC, AND HISTORICAL PROJECTS CONSISTENT WITH THE

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. **SEE PART IV FOR COLUMN (H) DESCRIPTIONS** Schedule I (Form 990) (2012)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PART I, LINE 2: AS A COOPERATING ASSOCIATION, THE CONSERVANCY MAKES DONATIONS TO THE NATIONAL PARK SERVICE THROUGH ITS "GRANTS FOR EXCELLENCE AND INNOVATION IN STEWARDSHIP, ACCESS, INTERPRETATION AND COMMUNITY ENGAGEMENT" PROGRAM. THIS PROGRAM WAS STRUCTURED TO COMPLY WITH DIRECTOR'S ORDER #32 GUIDELINES FOR DONATIONS TO THE NATIONAL PARK SERVICE. EACH GRANT APPLICATION REQUIRES A NARRATIVE DESCRIPTION, A SIMPLE BUDGET, A DESCRIPTION OF SPECIFIC RESULTS AND DELIVERABLES, AND AN IDENTIFICATION OF WHICH GRANT CATEGORY (OR CATEGORIES) IS FULFILLED BY THE PROPOSED GRANT. A WRITTEN REPORT OF EACH GRANT'S ACCOMPLISHMENT IS REQUIRED PRIOR TO THE

Part IV Supplemental Information

CLOSE OF EACH FISCAL YEAR. NEW FUNDS WILL NOT BE GRANTED UNTIL THE PRIOR YEAR GRANT REPORTS ARE RECEIVED.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL PARK SERVICE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT INTERPRETIVE, EDUCATIONAL, SCIENTIFIC, AND HISTORICAL PROJECTS CONSISTENT WITH THE MISSION OF THE NATIONAL PARK SERVICE.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

GOLDEN GATE NATIONAL PARKS CONSERVANCY

Employer identification number

94-2781708

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

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

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

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

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

	Yes	No
1b		
2	X	
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization **GOLDEN GATE NATIONAL PARKS CONSERVANCY** Employer identification number **94-2781708**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		4,000.	FMV
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	8	59,398.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	5	19,621.	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (AUCTION ITEMS)	X	17	5,013.	FMV
26 Other ▶ (PROGRAM SUPPL)	X	3	3,044.	FMV
27 Other ▶ (DONOR PREMIUM)	X	1	2,447.	FMV
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2012)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

GOLDEN GATE NATIONAL PARKS CONSERVANCY

Employer identification number

94-2781708

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BUILD A COMMUNITY DEDICATED TO CONSERVING THE PARKS FOR THE FUTURE. THE
PARKS, ALSO KNOWN AS THE GOLDEN GATE NATIONAL RECREATION AREA, STRETCH
ACROSS 80,000 ACRES NORTH AND SOUTH OF THE GOLDEN GATE BRIDGE,
CONSTITUTING ONE OF THE WORLD'S LARGEST NATIONAL PARKS IN AN URBAN
SETTING. THE CONSERVANCY IS SUPPORTED BY PRIVATE CONTRIBUTIONS,
COOPERATIVE AGREEMENTS, AND INCOME EARNED FROM INTERPRETIVE TOURS AND
THE SALE OF EDUCATIONAL MATERIALS AT VISITOR CENTERS THROUGHOUT THE
PARKS.

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

- * GREETED AND SERVED 954,125 VISITORS TO MUIR WOODS.
- * PROVIDED AUDIO TOURS AND EXHIBITS TO MORE THAN 1 MILLION VISITORS TO
ALCATRAZ.
- * PRESENTED 156 DOCENT TOURS OF THE HISTORIC ALCATRAZ GARDENS, AS PART
OF AN ONGOING RESTORATION PROJECT THAT MARKED ITS 10TH ANNIVERSARY IN
2013.
- * DEPLOYED THE ROVING RANGER "MOBILE TRAILHEAD" TO 44 EVENTS ACROSS THE
BAY AREA, WHERE STAFF SHARED PARK RESOURCES WITH 5,454 COMMUNITY
MEMBERS.
- * OPERATED EIGHT PARK STORES, INCLUDING AN ONLINE STORE, STOCKED WITH
EDUCATIONAL AND INTERPRETIVE ITEMS--MANY OF WHICH ARE SUSTAINABLY
SOURCED AND RESPONSIBLY PRODUCED.

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

EXTENDING THE PEDESTRIAN BRIDGE, ADDING VISITOR AMENITIES, AND

Name of the organization GOLDEN GATE NATIONAL PARKS CONSERVANCY	Employer identification number 94-2781708
--	--

ENHANCING EXPERIENCES FOR INDIVIDUALS WITH SPECIAL NEEDS.

* PRESERVED THE INTEGRITY OF CRISSY FIELD BY RESPONDING TO THE PRESIDIO TRUST'S CALL FOR A CULTURAL INSTITUTION WITH THE PRESIDIO EXCHANGE (PX) PROPOSAL, SHOWCASING A MISSION GERMANE TO THE PARK ENVIRONMENT.

* GREW 185,027 INDIVIDUAL PLANTS (OF 202 SPECIES) IN SIX NATIVE PLANT NURSERIES, FOR 59 RESTORATION PROJECTS PARKWIDE.

* FINISHED A NEW EAGLES POINT OVERLOOK AT LANDS END, FEATURING NEW SEATING AREAS, IMPROVED TRAIL SURFACE, AND NATIVE PLANTS.

* FINALIZED PLANS FOR FUTURE PROJECTS SUCH AS THE PRESIDIO COASTAL TRAIL PEDESTRIAN/BIKE BRIDGE, FORT POINT OVERLOOK, AND BATTERY EAST TRAIL ENHANCEMENTS.

* SUPPORTED THE PRESIDIO TRUST'S REMEDIATION/RESTORATION OF MOUNTAIN LAKE AND PLANNING FOR A NEW PRESIDIO VISITOR CENTER.

* RECORDED 18,508 RAPTOR SIGHTINGS (OF 19 SPECIES) AND BANDED 1,097 BIRDS OF PREY THROUGH THE WILDLIFE MONITORING AND RESEARCH WORK OF THE GOLDEN GATE RAPTOR OBSERVATORY (GGRO).

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

(CAP), WITH 5,567 PEOPLE--MANY OF THEM KIDS ENJOYING THEIR FIRST CAMPING TRIP--SERVED BY THIS PROGRAM IN PARTNERSHIP WITH THE PRESIDIO TRUST, BAY AREA WILDERNESS TRAINING, AND THE NATIONAL PARK SERVICE (NPS).

* PROVIDED SUMMER CAMP OPPORTUNITIES FOR ELEMENTARY SCHOOL-AGED CHILDREN, URBAN TRAILBLAZERS ADVENTURES AND SERVICE PROJECTS FOR MIDDLE SCHOOLERS, AND I-YEL LEADERSHIP TRAINING AND SUPPORT FOR HIGH SCHOOL INTERNS.

* IMMERSED 33 HIGH SCHOOLERS IN NATURE THROUGH LINC (LINKING INDIVIDUALS TO THEIR NATURAL COMMUNITY), A SIX-WEEK PARK STEWARDSHIP

Name of the organization

GOLDEN GATE NATIONAL PARKS CONSERVANCY

Employer identification number

94-2781708

SUMMER PROGRAM.

* SUPPORTED 161 INTERNS IN THE PARK, INCLUDING 21 ACADEMIC INTERNS THROUGH A NEW PROGRAM IN PARTNERSHIP WITH SAN FRANCISCO STATE UNIVERSITY AND CITY COLLEGE OF SAN FRANCISCO.

* ORGANIZED (ALONGSIDE THE NPS AND PRESIDIO TRUST) 35,598 COMMUNITY VOLUNTEERS, WHO CONTRIBUTED 491,521 HOURS IN THE GOLDEN GATE NATIONAL PARKS.

* WORKED WITH 119 YOUTH WHO TURNED THEIR DAYS OFF INTO "DAYS ON" KEY PARK PROJECTS DURING TEENS ON TRAILS PROGRAMS.

* HOSTED SECRETARY OF THE INTERIOR SALLY JEWELL AT CRISSY FIELD CENTER, WHERE SHE ANNOUNCED A NATIONWIDE CAMPAIGN TO CONNECT YOUNG PEOPLE OF ALL BACKGROUNDS WITH THE OUTDOORS.

* INSPIRED, THROUGH THE PIONEERING "FOOD FOR THE PARKS" PROGRAM OF THE INSTITUTE AT THE GOLDEN GATE, A MAJOR INITIATIVE BY NPS DIRECTOR JONATHAN JARVIS TO OFFER HEALTHIER, MORE SUSTAINABLE FARE AT PARKS ACROSS THE U.S.

* PARTNERED WITH NATIONAL GEOGRAPHIC, NPS, AND PRESIDIO TRUST IN PLANNING A GOLDEN GATE BIOBLITZ FOR 2014.

* COMMEMORATED THE 20TH ANNIVERSARY OF PARK STEWARDSHIP--A PROGRAM CONNECTING COMMUNITY MEMBERS (ESPECIALLY YOUTH) WITH THE PARKS THROUGH HANDS-ON RESTORATION WORK.

* GARNERED RECOGNITION FROM THE SAN FRANCISCO FOUNDATION, AS PRESIDENT & CEO GREG MOORE WAS AWARDED A PRESTIGIOUS COMMUNITY LEADERSHIP AWARD IN 2013.

* RECEIVED THE 2013 DIRECTOR'S PARTNERSHIP AWARD FROM NPS DIRECTOR JONATHAN JARVIS, FOR "LONG-TERM, CUMULATIVE PARTNERSHIP ACHIEVEMENTS."

Name of the organization

GOLDEN GATE NATIONAL PARKS CONSERVANCY

Employer identification number

94-2781708

FORWARDED THE FORM 990 TO THE EVP/COO. AFTER REVIEWING THE FORM 990, THE EVP/COO FORWARDED THE FORM TO THE PRESIDENT/CEO FOR HIS REVIEW. THE FORM 990 WAS PROVIDED TO THE BOARD BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ANNUALLY ASK EACH MEMBER OF THE BOARD OF TRUSTEES, MANAGER, SENIOR DIRECTOR, AND EXECUTIVE TO UPDATE AND SIGN CONFLICT OF INTEREST STATEMENTS. REVIEWED BY PRESIDENT/CEO AND EVP/COO FOR POTENTIAL CONFLICTS OF INTEREST. STAFF DISCLOSURES SHOULD BE MADE TO THE PRESIDENT/CEO AND EVP/COO, WHO SHALL DETERMINE WHETHER A CONFLICT EXISTS AND IS MATERIAL AND, IF THE MATTERS ARE MATERIAL, BRING THEM TO THE ATTENTION OF THE DESIGNATED COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15: COMPARABILITY DATA WAS USED BY THE BOARD TO ESTABLISH THE EXECUTIVE COMPENSATION FOR THE PRESIDENT/CEO AND THE EXECUTIVE VICE PRESIDENT/COO, INCLUDING OTHER ORGANIZATIONS' FORMS 990, COMPENSATION SURVEYS IN DECEMBER 2012.

FORM 990, PART VI, SECTION C, LINE 19: THE CONSERVANCY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. THE FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE CONSERVANCY'S WEBSITE.

FORM 990 PART XII LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR.