## Form 990

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

benefit trust or private foundation:

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

2011
Open to Public Inspection

Α	For the	2011 calendar year, or tax year beginning and	ending					
В	Check if applicable	C Name of organization	-	D Employer identifi	cation number			
	Addres	SAN DIEGO COASTKEEPER			5.450.45			
	Name change			33-0647946				
F	Initial return Termin		Room/suite	E Telephone number 619 –	r 758-7743			
F	Amend			G Gross receipts \$	1,180,340.			
	return Applica			H(a) Is this a group r				
	Lion pendin	F Name and address of principal officer: MEGAN BAEHRENS		for affiliates?	Yes X No			
		2825 DEWEY ROAD, #200, SAN DIEGO, CA	92106	H(b) Are all affiliates in				
1	Tax ava	mpt status: X 501(c)(3)		4 ' '	list. (see instructions)			
		WWW.SDCOASTKEEPER.ORG	ال ال	H(c) Group exemption	11125			
		organization: X Corporation Trust Association Other	I Vear		State of legal domicile: CA			
		Summary	Licai	or formation. 1555 1	VI Otate of logal doffilolio, O22			
		Briefly describe the organization's mission or most significant activities: TO PI	ROTECT	THE REGION	'S BAYS			
ce	1 1	BEACHES, WATERSHEDS, AND OCEAN FOR PEOPLI	E AND	WILDLIEE TH	AT DEPEND			
nan		Check this box if the organization discontinued its operations or dispose						
ver			IIA.	ا م ا	11			
Ĝ		Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)	ii)		11			
త		otal number of independent voting members of the governing body (Part VI, line 2a)			17			
Activities & Governance				AND DESCRIPTION OF THE PARTY OF	16000			
ξį	6 7	otal number of volunteers (estimate if necessary)		7a	0.			
Ac		otal unrelated business revenue from Part VIII, column (C), line 12			0.			
-	D I	Net unrelated business taxable income from Form 990-T, line 34		Prior Year	Current Year			
Revenue	, ,	Contributions and grants (Dort VIII line 1 b)		1,462,269.	1,180,337.			
	8 (	Contributions and grants (Part VIII, line 1h)		0.	0.			
	9 F	Program service revenue (Part VIII, line 2g)		1,388.	3.			
Re		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		-5,304.	0.			
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,458,353.	1,180,340.			
_		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,430,333.	0.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
		Benefits paid to or for members (Part IX, column (A), line 4)		1,068,424.	714,562.			
ses	15 5	Galaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,000,424.	714,302.			
Expenses	16a F	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) of Professional fundraising fees (Part IX, column (A), line 11e) of South fundraising expenses (Part IX, column (D), line 25)	0.2	0.	0.			
X				631,413.	431,846.			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,699,837.	1,146,408.			
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-241,484.	33,932.			
L 02		Revenue less expenses. Subtract line 18 from line 12						
ts or	00 -	(D. 1 V. II. 40)		ginning of Current Year 394,844.	End of Year 273,811.			
let Assets und Baland	20 T	otal assets (Part X, line 16)		321,421.	174,988.			
net/	21 T	otal liabilities (Part X, line 26)		73,423.	98,823.			
-11	22 1	let assets or fund balances. Subtract line 21 from line 20		13,423.	30,023.			
		ies of perjury, I declare that I have examined this return, including accompanying schedules	and statem	anta and to the heat of m	v knowledge and ballof it is			
		and complete. Declaration of preparer (other than officer) is based on all iniumizaten of wh			y knowledge and belief, it is			
uuc	, correct,	. 15/17) - 1	ion areasier	ads any knowledge.	Topic .			
C: -	[	Signature of officer		Date // S	112			
Sig		MEGAN BAEHRENS, EXECUTIVE DIRECTOR						
Her	e	Type or print name and title						
-				Date Check	II PTIN			
Paid		Print/Type preparer's name  IEFFREY S. ACKLEY  Preparer's signature  Original Signed by Jeffrey S.		11/15/2012	D00246014			
	1	HITKET D. MCKBET		self-employ	33-0885895			
	-		50	Firm's EIN	33-0003033			
USE	Only	Firm's address 4225 EXECUTIVE SQUARE, SUITE 115 LA JOLLA, CA 92037	5.0	Dhana na O	58 5589200			
	. 41. 151			Trilone no. 6				
May	y the IRS	S discuss this return with the preparer shown above? (see instructions)	*************		X Yes No			

132002	
02-09-12	

(Expenses \$

942,916.

Total program service expenses

Other program services (Describe in Schedule O.)

Form 990 (2011) SAN DIEGO CO Part IV Checklist of Required Schedules SAN DIEGO COASTKEEPER

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation survices? If "Yes," complete Schodule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.	I EXTLIN		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	l I	v	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			X
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b	-	A
С	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
٦	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			37
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	4.5	2	v
16	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	-	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10	-	
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		0	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Salt-Co.	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV | Checklist of Required Schedules (continued)

#### No Yes 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? If "Yes," complete Schedule I, Parts I and II 04 Χ Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Χ 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Χ 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Χ Schedule K. If "No", go to line 25 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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 X disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Χ 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified X person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 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? If "Yes," complete Schedule L, Part III Χ 27 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): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Х 30 Did the organization liquidate, terminate, or dissolve and cease operations? Χ If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Schedule N. Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Χ 34 Χ 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 X 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 X 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Χ and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 27 Did the organization complete Schedule O and provide explanations in Schedule O for Part Vi, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O . Form 990 (2011)

Form	990 (2011) SAN DIEGO COASTKEEPER	33-06479	46	P	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response to any question in this Part V	************	******		
	į į	4.5		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	16			
b	Enter the number of Forms W-2G included in line 1a. Enter ·0· if not applicable	0			
С	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 return2a	17	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a ]		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation of Schedule C	[	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)	? [	4a		X
b	If "Yes," enter the name of the foreign country: ▶				.54710000
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	j.			
5a			5a		X
b	20000000000		5b		X
c			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	zation solicit			
•	any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or g	ifts			
-	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
a	District the second sec	vided to the payor?	7a		X
b			7b		
C		nan Sibacura vacanera a menerence en el el esc	1.5		-
·	to file Form 8282?		7c		X
4		*******************			
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		Х
e	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
f			7g		
g			79 7h		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations are supported by the supporting organization organizations.		-111		THE PERSON
8					Х
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess susfices sholdings at any time d	uring the year?	8	-	
9	Sponsoring organizations maintaining donor advised funds.				Х
a			9a	-	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter:			-	
а	Gross income from members or shareholders 11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against		Ilo.		
	amounts due or received from them.)				
	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				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L			
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
þ	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		9 5	-70	15.
	Enter the amount of reserves on hand		7		
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		

Form 990 (2011) SAN DIEGO COASTKEEPER 33-0647946 Page
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			Δ								
Sec	tion A. Governing Body and Management		T <sub>V</sub>									
	Enter the number of voting members of the governing body at the end of the tax year 1.		Yes	No								
1a	Enter the manual of voting members of the governing body at the ord of the tax year	-										
	If there are material differences in voting rights among members of the governing body, or if the governing		5.7									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.  Enter the number of voting members included in line 1a above, who are independent  15											
b	Zittor die riameer er retting membere metadea in inte raj abere) wie die interprinten											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			Х								
_	officer, director, trustee, or key employee?	2		Λ								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			Х								
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X								
4												
5		5		X								
6	Did the organization have members or stockholders?	6		-21								
/a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			Х								
	more members of the governing body?	7a	-									
a	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7.		Х								
_	persons other than the governing body?  Did the organization contemporaneously document the meetings held or writter actions undertaken during the year by the following:	7b	-	- 1								
8	CONTRACTOR OF THE CONTRACTOR O	0-	Х									
a	The governing body?	8a	X									
b	Each committee with authority to act on behalf of the governing body?	8b	Λ.	-								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		Х								
500	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	1 9										
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	-	Yes	No								
100	Did the examination have lead chapters, branches, or offiliated?	10a	162	X								
	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104										
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b										
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X									
	Authors/	110	11	-								
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.											
	<ul> <li>Did the organization have a written conflict of interest policy? If "No<sub>i</sub>" go to line 13</li> <li>Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</li> </ul>											
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	X									
C		12c	$\mid x \mid$									
13		13	X									
14	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?	14	X									
15	Did the process for determining compensation of the following persons include a review and approval by independent	17										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?											
а	The organization's CEO Executive Director, or top management official	15a	x l									
	Other officers or key employees of the organization	15b		X								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a											
4	taxable entity during the year?	16a		Х								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation											
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	-										
	exempt status with respect to such arrangements?	16b										
Sect	tion C. Disclosure	100										
	List the states with which a copy of this Form 990 is required to be filed ▶CA											
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah	le									
	for public inspection. Indicate how you made these available. Check all that apply.		-									
	X Own website X Another's website X Upon request											
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, as	d finar	ncial									
	statements available to the public during the tax year.											
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:	•									
	MEGAN BAEHRENS - 619-758-7743		_									
	2825 DEWEY ROAD, #200, SAN DIEGO, CA 92106											
132006		Form	990 (	2011)								

## 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

 $\mathsf{X}$ 

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## 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 organized	zation nor any related	orga	aniza		cor C)	mpe	nsat			
(A)	(B)	(B)						(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos heck	more	than	one	Reportable	Reportable 	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)			is bot or/trus	h an tee)	compensation	compensation	amount of
	week	-	Г				Ė	from the	from related organizations	other compensation
	(describe hours for	lirect				_		organization	(W-2/1099-MISC)	from the
	related	e or c	tee			satec		(W-2/1099-MISC)	(** 27 1000 141100)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee	Attion	Villa.		and related
	in Schedule	dual	ution	<u></u>	Key employee	est co	5			organizations
	O)	Indiv	Instil	Officer	Key e	High	Former			
(1) DAVID A, FIELD					A	1	M			
PRESIDENT	5.00	X		Х	463	1	₩.	0.	0.	0.
(2) MARY M. ZOELLER			١.	52 (8)	SEA	V				0
VICE PRESIDENT	2.00	X	A	X	4.19	Ds.	4	0.	0.	0.
(3) MICHAEL BEVIS						愚				
TREASURER	2.00	X	W	X	_	100		C.	U.	0.
(4) JENNY K. GOODMAN		19	1	-						0
SECRETARY	2.00	X	4	Х	_		_	0.	0.	0.
(5) JO BROOKS	0 00	l		Ħ						_
DIRECTOR	2.00	X	4	y.	_			0.	0.	0.
(6) SANDOR KAUPP	2 00	37	-					0.	0.	0.
DIRECTOR (7) SUSAN ARMSTRONG	2.00	X			_		_	0.	0.	0.
(7) SUSAN ARMSTRONG DIRECTOR	2.00	X						0.	0.	0.
(8) NICOLE CAPRETZ	2.00	1					$\vdash$	0.	0.	0.
DIRECTOR	2.00	X						0.	0.	0.
(9) DAVID WELBORN										-
DIRECTOR	2.00	x						0.	0.	0.
(10) MEGAN LIM										
DIRECTOR	2.00	Х						0.	0.	0.
(11) JP MCNEILL				ries in		13				
DIRECTOR	2.00	Х						0.	0.	0.
(12) GALE FILTER										
EXECUTIVE DIRECTOR	40.00	X		Х				52,708.	0.	0.
Billion (and the original transfer of the original transfer original transfer of the original tr				_						
*		_	-		à		dir ng			1-3
				i				Ĭ		
M										
A										
120007 01 02 12			_	_	_					Form 990 (2011)

Form **990** (2011)

Part VII Section A. Officers, Directo	rs, Trustees, Key E	nploye	es, a	nd H	ighes	t Compensated Employ	yees (continued)			
(A) Name and title	(B) Average hours per week	(do not box, un officer a	Posi check less per	ition more t rson is	han one	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of		
	(describe hours for related organizations in Schedule O)	tee or director			employee	the organization (W-2/1099-MISC)	from related organizations (W·2/1099·MISC)	com fr orga	other pensation rom the anization d related anizations	
	- 0,	<u> </u>	Jun Ott	Ke	6 6					
						filed a service control control occurs of the filed states			-	
						1				
			H	A						
				1		F2 700				
1b Sub-total c Total from continuation sheets to F d Total (add lines 1b and 1c)	Part VII, Section A					52,708. 0. 52,708.	0.		0. 0. 0.	
Total number of individuals (including compensation from the organization		ose list	ed ab	oove)	who	received more than \$10	0,000 of reportable		Yes No	
<ul> <li>3 Did the organization list any former of line 1a? If "Yes," complete Schedules</li> <li>4 For any individual listed on line 1a, is</li> </ul>	J for such individual							3	Х	
<ul> <li>and related organizations greater than</li> <li>Did any person listed on line 1a receive</li> <li>rendered to the organization? If "Yes,</li> </ul>	ve or accrue comper	nsation	from	any i	unrela	ted organization or indiv	idual for services	5	X	
Section B. Independent Contractors  1 Complete this table for your five higher	est compensated inc	depend	ent co	ontra	ctors	that received more than	\$100,000 of compen	sation f	***************************************	
the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  Name and business address NONE Description of services								(C Comper		
•								-		
Total number of independent contract     \$100,000 of compensation from the contract		ot limite	ed to 1	those 0	e liste	d above) who received r	nore than	Form (	<b>990</b> (2011)	

	rt VI			(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	b	Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and	1a				
d O	g	Noncash contributions included in lines 1a-1f: \$					
<u>0</u> g	h	Total. Add lines 1a-1f					
Program Service Revenue	2 a b c d						
-	† q	All other program service revenue Total. Add lines 2a-2f		ALL			
	3 4 5	Investment income (including dividends other similar amounts) Income from investment of tax-exempt Royalties	s, interest, and bond proceeds	3.	3.		
	6 a	Gross rents Less: rental expenses Rental income or (loss)			Adding the Nation		
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	rities (ii) Other				
Other Revenue	d	Net gain or (loss)  Gross income from fundraising events (including \$ of contributions reported on line 1c). See Part IV, line 18	not				
the	b	Less: direct expenses					
0	с 9 а	Net income or (loss) from fundraising ev Gross income from gaming activities. So Part IV, line 19 Less: direct expenses	rents				
	c 10 a	Net income or (loss) from gaming activit Gross sales of inventory, less returns and allowances Less: cost of goods sold	ies				
H	С	Net income or (loss) from sales of inven		20 20 15 15 15 15 15 15 15 15 15 15 15 15 15			
	11 a b c	Miscellaneous Revenue					
	d	All other revenue			Children Color 19	701	
132009 01-23-	12	Total revenue. See instructions.		1,180,340.	3.	0.	0 • Form <b>990</b> (2011)

## Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

comp	lete columns (B), (C), and (D).				
	Check if Schedule O contains a respon		is Part IX		/B\
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
-	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21			erforch III	
2	Grants and other assistance to individuals in	W W S			
	the United States. See Part IV, line 22				
	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
	Benefits paid to or for members			elekarat at ur	
	Compensation of current officers, directors,	F0 700	47 427	1 501	2 (00
	trustees, and key employees	52,708.	47,437.	1,581.	3,690
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	E40 C40	405 604	70 274	61 501
	Other salaries and wages	548,642.	405,684.	78,374.	64,584
	Pension plan accruals and contributions (include		VA.		
	section 401(k) and section 403(b) employer contributions)	E0 007	43,802.	8,462.	6 072
	Other employee benefits	59,237.		7,710.	6,973 6,354
	Payroll taxes	53,975.	13年、39,911.	7,710.	0,354
	Fees for services (non-employees):	A	7 )19		
	Management	7/5	745.		
	Legal	745.	745.	1,403.	
	Accounting	1,403.		1,403.	
	Lobbying		YA.		
	Professional fundraising services. See Part IV, line 17	WA.			
	Investment management fees	130 100	120 106		
g	Other	138,196	138,196. 18,859.		
	Advertising and promotion	18,659.		369.	245
13	Office expenses	2,451.	1,837.		
	Information technology	21,938.	18,578.	1,760.	1,600
	Royalties	72 546	C1 770	0 000	2 (77
16	Occupancy	73,546.	61,779.	8,090.	3,677.
	Travel	10,766.	10,057.	576.	133
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 036	1 226		
19	Conferences, conventions, and meetings	1,236.	1,236.	260	215
	Interest	5,253.	4,570.	368.	315.
21	Payments to affiliates	27 (52	32 006	2 626	1 120
	Depreciation, depletion, and amortization	37,652.	33,886.	2,636.	1,130.
	Insurance	5,922.	5,567.	355.	
	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 0.)				
	EVENT EXPENSES AND PERM	47,953.	47,953.		
- 0	PROGRAM EXPENSES AND LA	37,880.	37,880.		
	OTHER EXPENSE	12,330.	10,850.	987.	493.
- 0	TELEPHONE EXPENSE	7,235.	6,076.	797.	362
	All other expenses	8,681.	8,213.	322.	146.
	Total functional expenses. Add lines 1 through 24e	1,146,408.	942,916.	113,790.	89,702.
	Joint costs. Complete this line only if the organization	_,,	512,510.		02,702
	reported in column (B) joint costs from a combined	ì	1	ĺ	
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	01-23-12				Form <b>990</b> (2011)

		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	81,036.	1	22,986
2		36,175.	2	56,480
3			3	
4		136,180.	4	99,496
5			1.30	
	employees, and highest compensated employees. Complete Part II			
	of Schedule L		5	
6			(E)	
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		Levi	
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)		6	
\$   7			7	
Assets 8			8	
9		29,936.	9	24,163
10	a Land, buildings, and equipment: cost or other	Market I and the		
	basis. Complete Part VI of Schedule D 10a 239, 445.			
	b Less: accumulated depreciation 10b 176,277.	100,820.	10c	63,168
11			11	
12	50 2 0 0 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A.	12	
13		Dr.	13	
14	Providence in the control of the con	A	14	
15		10,697.	15	7,518
16		394,844.	16	273,811
17		113,146.	17	140,085
18			18	
19		117,881.	19	7,302
20	Tax-exempt bond liabilities		20	
ဖ္က 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22 22 22 22 22 22 22 22 22 22 22 22 2				
g	highest compensated employees, and disqualified persons. Complete Part II		100	
5	of Schedule L	50,000.	22	0 .
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		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	40,394.	25	27,601.
26	Total liabilities. Add lines 17 through 25	321,421.	26	174,988.
	Organizations that follow SFAS 117, check here	<b>美</b> 妻中野 (1995年)	12/12/12	
s l	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	-150,624.	27	2,393
28	Temporarily restricted net assets	158,916.	28	2,393. 39,950.
29	Permanently restricted net assets	65,131.	29	56,480.
5	Organizations that do not follow SFAS 117, check here   and			
5	complete lines 30 through 34.			
2 30	Capital stock or trust principal, or current funds		30	
,	Deid in an arrival annual and build it		31	
31	Paid-in or capital surplus, or land, building, or equipment fund			
31 32	Retained earnings, endowment, accumulated income, or other funds		32	
31		73,423. 394,844.	32 33	98,823. 273,811.

Form **990** (2011)

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Act and OMB Circular A-133?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

За

X

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

Department of the Treasury

Internal Revenue Service

**Public Charity Status and Public Support** 

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

SAN DIEGO COASTKEEPER

Part I	Reason	for Public Char	rity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.				
The organ			because it is: (For lines									
1		•	s, or association of chur	_				).				
2			70(b)(1)(A)(ii). (Attach Sc				( · / / / / / /	,				
3			ital service organization			170(b)(1)	(A)(iii).					
4	•		operated in conjunction					(b)(1)(A)(ii	ii). Enter th	e hospital	s nam	ne.
т 🗀	city, and stat	-	operated in conjunction	Willia a rioc	phar dooc			(~)( -)( -)( -)	.,,, =,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.o .roopna.	0 11011	,
5	•	(	benefit of a college or u	niversity o	wned or or	nerated by	a govern	mental uni	it describe	d in		-
5	•	(b)(1)(A)(iv). (Compl	-	inversity o	wrica or of	ociated by	a govern	mornar ari	ii aqoonbo	<b>U</b> III		
c 🗀			•	ممانيه مسامية	d in <b>a a a ti a</b>	- 470/bV:	()/ A )/ <sub>(-)</sub> \					
6 L 7 X		_	nent or governmental uni					(			المحاك	
7 X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)											
. $\Box$				<b></b>	D							
8 📙			section 170(b)(1)(A)(vi).						,			,
9 📖	_	-	ceives: (1) more than 33			ecosts.						
			nctions - subject to certa			M25000						
			axable income (less sect	tion 511 ta	ix) from bu	sinesses	acquired b	y the orga	anization a	fter June 3	0, 197	75.
		<b>509(a)(2).</b> (Complete			ARRIGHT.	of Brun						
10			perated exclusively to te									
11			perated exclusively for th									or
	more publicly	y supported organiza	ations described in secti	on 509(a)(	1) or section	on 509(a)(2	2). See <b>se</b> c	ction 509(	a)(3). Che	ck the box	that	
		The second secon	organization and compl	The second second second	- TELLINGS							
	a Type		5.7	ABOUT STATE	e III - Fund	- 8	300			Type III - C		
e 📖			at the organization is not	STATE OF THE PARTY	100							ın
	foundation m	nanagers and other t	han one or more publicly	y supporte	d <u>organiza</u>	ations des	cribed in s	ection 509	9(a)(1) or s	ection 509	(a)(2).	
f	If the organiz	ation received a writ	tten determination from t	the IRS th	at⊦it is a Ƴy	pe I, Type	II, or Type	e III				_
	supporting o	rganization, check tl	nis box	<u>.</u>							*****	
g	Since Augus	t 17, 2006, has the o	organization accepted ar									
	(i) A perso	n who directly or inc	lirectly controls, either al	one or tog	ether with	persons o	lescribed	in (ii) and (	iii) below,	Ugan-	Yes	No
	the gove	erning body of the s	upported organization?							11g(i)		
			n described in (i) above?							11g(ii)		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) abov	e?				***	11g(iii)		
h			about the supported or									
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the c	organization	(v) Did you	notify the	(vi) Is	the	(vii) Am	ount o	f
	inization	(11) = 111	organization	n col. (i) li:	sted in your	organizat	ion in col.	organizátio (i) organiz	on in col.	supr		'
			(described on lines 1-9 above or IRC section	governing	document?	(i) of your	support?	U.S	.?	***		
			(see instructions))	Yes	No	Yes	No	Yes	No			
												11611,1161
												dir med
									2		- 0-0-0-1	
									<u> </u>		-	
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				7 50 5			E CH I				1112	
Total												
. Juli			THE RESERVE OF THE PERSON OF T	- F Pre-1369	To be of Contracting On	The second						

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

Schedule A (Form 990 or 990-EZ) 2011

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

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

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	930,045.	894,358.	1226358.	1456420.	1180337.	5687518.
2	Tax revenues levied for the organ-						
	ization'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	930,045.	894,358	1226358.	1456420.	1189337.	5687518.
5	The portion of total contributions						
	by each person (other than a			in action 4			
	governmental unit or publicly					Bittle - Line	
	supported organization) included			9,000 700		nation of	
	on line 1 that exceeds 2% of the		98.41	O CHARLACTER T	friesday I would		
	amount shown on line 11,						
	column (f)			CLEANER THE	HANNE LINE		
6	Public support. Subtract line 5 from line 4.		nen mystasiy nicht				5687518.
Se	ction B. Total Support			4530	P		
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	930,045.	894,358	1226358.	1456420.	1180337.	5687518.
8	Gross income from interest,		estio.				
	dividends, payments received on	1	APPR				5
	securities loans, rents, royalties			AL.			
	and income from similar sources	3,842.	-17,200.	23.	1,388.	3.	-11,944.
9	Net income from unrelated business		OF WELL	The same of the sa			
	activities, whether or not the	/	P A				
	business is regularly carried on	-	E Y				
10	Other income. Do not include gain		1				
	or loss from the sale of capital	)					×
	assets (Explain in Part IV.)	17,447.	4,676.	26,247.	545.		48,915.
11	Total support. Add lines 7 through 10		Marine Land		Mile III		5724489.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization's		d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here			,		<b>&gt;</b>
Sed	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2011 (I	ine 6, column (f) di	ivided by line 11, o	column (f))		14	99.35 %
	Public support percentage from 2010					15	98.36 %
16a	33 1/3% support test - 2011. If the c	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	ox and
	stop here. The organization qualifies						
b	33 1/3% support test - 2010. If the c	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check tl	nis box
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		<b>&gt;</b>
b	10% -facts-and-circumstances test	•			_		
	more, and if the organization meets the						
	organization meets the "facts-and-circ						
18	Private foundation. If the organizatio						4.5
						dule A (Form 990	

## 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

Se	ction A. Public Support	now, please con	ipiete i art ii.j					
_	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
	Gifts, grants, contributions, and	, , , , , , , , , , , , , , , , , , ,			, , ,			
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions,							
	merchandise sold or services per-							
	formed, or facilities furnished in							
	any activity that is related to the organization's tax-exempt purpose							
2	Gross receipts from activities that		1					
3	are not an unrelated trade or bus-							
	iness under section 513				25			
	***********							
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities					6		
	furnished by a governmental unit to			A.				
	the organization without charge			AW				
6	Total. Add lines 1 through 5			Ail				
7 a	Amounts included on lines 1, 2, and			4344444			I	
	3 received from disqualified persons			Letting .	*			
b	Amounts included on lines 2 and 3 received			7 19				
	from other than disqualified persons that		4	h. 19				
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			門里				
	Add lines 7a and 7b		400	1. 1207				
			100		AND THE SECOND	4		
	Public support (Subtract line 7c from line 6.)		1/28	ESF				
	ndar year (or fiscal year beginning in)	(-) 0007	(b) 2008 **	(0) 2000	(4) 2010	(e) 2011	(f) Total	
		(a) 2007	(b) 2006	(c) 2009	(d) 2010	(e) 2011	(I) Total	
	Amounts from line 6 Gross income from interest,					-	-	
IUa	dividends, payments received on		VIA. AN					
	securities loans, rents, royalties		The same of the sa				ł k	
	and income from similar sources							
b	Unrelated business taxable income						19	
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
С	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is					1		
	regularly carried on							
12	Other income. Do not include gain							
	or loss from the sale of capital							
13	assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.)							
	First five years. If the Form 990 is for	the organization	'e firet second thi	rd fourth or fifth t	av vear as a section	n 501(c)(3) organ	ization	
14		-			-	on so nojen ornan		
Soc	check this box and stop here ction C. Computation of Public	c Support Pa	arcentage					
				(0)		45	0/	
	Public support percentage for 2011 (lin					15	%	
	Public support percentage from 2010				*****************	16	%	
	tion D. Computation of Inves							
	Investment income percentage for 201	•				17	%	
	18 Investment income percentage from 2010 Schedule A, Part III, line 17							
19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not								
more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and								
	line 18 is not more than 33 1/3%, chec	•						
20	Private foundation. If the organization							
	M. Carlotte							

132023 01-24-12

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

**Employer identification number** Name of the organization 33-0647946 SAN DIEGO COASTKEEPER Organization type (check one): Filers of: Section: X 501(c)( 3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

Schedule of Contributors

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part II, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ 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.

2011
Open to Public Inspection

Name of the organization

Employer identification number

	SAN DIEGO COASTKEEPER		32 0017946			
Pa	art I Organizations Maintaining Donor Advised Funds or Other Similar F	unds or A	ccounts. 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 fur	nde			
5	are the organization's property, subject to the organization's exclusive legal control?					
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds c					
6						
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?						
Da	impermissible private benefit?  Int II Conservation Easements. Complete if the organization answered "Yes" to Form					
		990, Part IV,	ine i,			
1	1 Purpose(s) of conservation easements held by the organization (check all that apply).					
			lly important land area			
	Protection of natural habitat	a certified h	istoric structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the	form of a co	onservation easement on the last			
	day of the tax year.		Lucius sicus six			
	4 3		Held at the End of the Tax Year			
а	The state of the s		2a			
b			2b			
С			2c			
d						
	listed in the National Register					
3	Number of conservation easements modified, transferred, released, extinguished, or terminated	by the orgar	nization 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					
_	violations, and enforcement of the conservation easements it holds?					
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easemed					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements of					
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section					
_	and section 170(h)(4)(B)(ii)?					
9	In Part XIV, describe how the organization reports conservation easements in its revenue and ex	•				
	include, if applicable, the text of the footnote to the organization's financial statements that desc	ribes the or	ganization's accounting for			
Do	conservation easements.	au Oile au	Cincilar Assats			
Pai	rt 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.		<del></del>			
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue					
	historical treasures, or other similar assets held for public exhibition, education, or research in fu	rtherance of	public service, provide, in Part XIV,			
	the text of the footnote to its financial statements that describes these items.					
þ	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue state					
	treasures, or other similar assets held for public exhibition, education, or research in furtherance	of public se	rvice, 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 fire	nancial gain,	provide			
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items					
а	Revenues included in Form 990, Part VIII, line 1					
b	Assets included in Form 990, Part X		<b>&gt;</b> \$			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.  $^{132051}_{01\text{-}23\text{-}12}$ 

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011

14,697.

28,840. 63,168.

72,649.

30,326.

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

87,346.

59.166.

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	Cos	(c) Method of valu t or end-of-year ma		
(1) Financial derivatives	42				
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)	-				
(I) Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶					
Part VIII Investments - Program Related.	See Form 000 Port V line 1	2			
		3.	(c) Method of valu	ation:	
(a) Description of investment type	(b) Book value	Cos	Cost or end-of-year market value		
(1)					
(2)		VED.			
(3)		W5/524)			
		**************************************			
(5)		60	· · · · · · · · · · · · · · · · · · ·		
(6)	- 45 /	7			
(7)	706	7			
(8)	THE RESERVE THE PERSON NAMED IN COLUMN TWO I				
(10)		A			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	W. 27				
Part IX Other Assets. See Form 990, Part X, lin					
	a) Description			(b) Book value	
(1)					
(2)	W //				
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Column (b) must equal Form 990, Part X, col (B) li Part X Other Liabilities. See Form 990, Part X	ne 15.)				
(10 : :: (1119)		b) Book value			
		b) Dook value			
(1) Federal income taxes (2) PAYROLL LIABILITY		27,601.			
		27,001.			
(3)					
(4)					
(5)					
(7)			district the Late		
(8)					
(9)					
(10)					
(10)					
	ne 25.)	27,601.			
Total. (Column (b) must equal Form 990, Part X, col (B) li. FIN 48 (ASC 740) FOOTNOTE. In Part XIV, provide the text of the footnote 2. FIN 48 (ASC 740).	to the organization's financial statement		ation's liability for uncert	ain tax positions under	
71 132053 01-23-12			901	nedule <b>D</b> (Form 990) 201	

#### **SCHEDULE 0**

(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.

2011
Open to Public Inspection

Name of the organization

Employer identification number 33 – 0647946

33-0647946 SAN DIEGO COASTKEEPER FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ON THEM. THE AIM IS TO BALANCE COMMUNITY OUTREACH, EDUCATION AND ADVOCACY TO PROMOTE STEWARDSHIP OF CLEAN WATER AND A HEALTHY COASTAL ECOSYSTEM. COASTKEEPER PROGRAMS INCLUDE: BEACH CLEANUP, COMMUNITY EVENTS, EDUCATION, WATER MONITORING, AND PROTECT MARINE AREAS AND AREAS OF BIOLOGICAL SIGNIFICANCE. FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION HAS A CPA FIRM PREPARE THE TAX RETURN. A DRAFT OF THE RETURN IS SENT TO THE ORGANIZATION'S BOARD OF DIRECTORS FOR REVIEW AND APPROVAL, PRIOR TO FILING THE RETURN WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD AND STAFF REVIEW THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS. FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD REVIEWS AND APPROVES COMPENSATION OF THE EXECUTIVE DIRECTOR. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S FINANCIAL STATEMENTS AND ANNUAL REPORT ARE AVAILABLE ON THEIR WEBSITE. OTHER

WWW.GUIDESTAR.ORG

FORM 990, PART VII, SECTION A:

MEGAN BAEHRENS IS NOT INCLUDED ON THE LIST OF OFFICERS, DIRECTORS,

DOCUMENTATION ARE AVAILABLE UPON REQUEST. INFORMATION ABOUT THE

ORGANIZATION AND A COPY OF PRIOR TAX RETURNS CAN BE FOUND ON

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 132211 01-23-12

Schedule O (Form 990 or 990-EZ) (2011)