

Name	Doing business as		
Address	Number and street (or P O box if mail is not delivered to street address) 12045 WATERFRONT DRIVE SUITE 400	Room/suite	E Telephone number (310) 448-4647
City/State/Zip	City or town, state or province, country, and ZIP or foreign postal code PLAYA VISTA, CA 90094		G Gross receipts \$ 371,023
Officer	F Name and address of principal officer MARC HUFFMAN		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
Tax 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		
Organization	<input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 2000 M State of legal domicile CA

Summary

Briefly describe the organization's mission or most significant activities
THE PRESERVATION & MAINTENANCE OF ENVIRONMENTALLY SENSITIVE COASTAL WETLANDS

Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

Number of voting members of the governing body (Part VI, line 1a)	3	3
Number of independent voting members of the governing body (Part VI, line 1b)	4	0
Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	0
Total number of volunteers (estimate if necessary)	6	
Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
Net unrelated business taxable income from Form 990-T, line 34	7b	

	Prior Year	Current Year
Contributions and grants (Part VIII, line 1h)	480,033	368,722
Program service revenue (Part VIII, line 2g)		0
Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,555	2,301
Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	483,588	371,023
Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
Benefits paid to or for members (Part IX, column (A), line 4)		0
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
Professional fundraising fees (Part IX, column (A), line 11e)		0
Total fundraising expenses (Part IX, column (D), line 25) ▶ ⁰		0
Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	368,972	341,505
Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	368,972	341,505
Revenue less expenses Subtract line 18 from line 12	114,616	29,518
	Beginning of Current Year	End of Year
Total assets (Part X, line 16)	1,109,925	1,132,282
Total liabilities (Part X, line 26)	24,952	17,791
Net assets or fund balances Subtract line 21 from line 20	1,084,973	1,114,491

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 he or she has any knowledge.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission
 THE PRESERVATION & MAINTENANCE OF ENVIRONMENTALLY SENSITIVE COASTAL WETLANDS

- 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 No
 If "Yes," describe these new services on Schedule O
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O
- 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 \$ 287,752 including grants of \$) (Revenue \$)
 THE CONSERVANCY PERFORMS SPECIFIC MAINTENANCE, PRESERVATION AND ENVIRONMENTAL TESTING OF THE BALLONA WETLANDS AREA, WHICH INCLUDES LANDSCAPING, GROUNDS MAINTENANCE FOR THE RELATED AREAS, AND VARIOUS MEASUREMENT AND TESTING PROCEDURES THE BALLONA WETLANDS REPRESENTS ONE OF THE LAST LARGE FRESH-WATER COASTAL WETLANDS AND ECOSYSTEMS IN LOS ANGELES COUNTY, CALIFORNIA

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

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

Checklist of Required Schedules

	Yes	No
Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		No
Has the organization engaged 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		No
Section 501(c)(3) organizations.		
Has the organization engaged in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
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		No
Has 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		No
Has the organization receive or hold a conservation easement, including easements to preserve open space, environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
Has the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
Has the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a guarantor for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
Has 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		No
Is the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
Has the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		No
Has the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		No
Has the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
Has the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
Has the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		No
Do 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		No
Has the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
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 and XII is optional		No
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
Has the organization maintain an office, employees, or agents outside of the United States?		No
Has the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, management, investment, and program service activities outside the United States, or aggregate foreign investments reported at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		No
Has the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
Has the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
Has the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part VIII, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
Has the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
Has 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		No
Has the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
Has the organization answered "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Checklist of Required Schedules (continued)

Table with 3 columns: Question, Response, and Yes/No. Rows include questions about grants, compensation, tax-exempt bonds, and organizational structure, numbered 21 through 38.

the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?				1c		
the number of employees reported on Form W-3, Transmittal of Wage and Statements, filed for the calendar year ending with or within the year covered by this return	2a		0			
At least one is reported on line 2a, did the organization file all required federal employment tax returns? If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				2b		
Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a		No
If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b		
At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				4a		No
If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (Form 114-R)						
Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		No
Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		No
If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				5c		
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?				6a		No
If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts are not tax deductible?				6b		
Organizations that may receive deductible contributions under section 170(c).						
Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				7a		
If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		
If "Yes," indicate the number of Forms 8282 filed during the year	7d					
Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e		
Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		
If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
Sponsoring organizations maintaining donor advised funds.						
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?				8		
Did the sponsoring organization make any taxable distributions under section 4966?				9a		
Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		
Section 501(c)(7) organizations. Enter						
Excise taxes and capital contributions included on Part VIII, line 12	10a					
Excise receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
Section 501(c)(12) organizations. Enter						
Excise income from members or shareholders	11a					
Excise income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b					
Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?						
If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					
Section 501(c)(29) qualified nonprofit health insurance issuers.						
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		

Part A. Governing Body and Management

		Yes	No
1a	the number of voting members of the governing body at the end of the tax year		
	3		
1b	Are there material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
	0		
2	Do any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Has 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?		No
4	Has the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Has the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Do the organization have members or stockholders?		No
7a	Do the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8a	Do the organization contemporaneously document the meetings held or written actions undertaken during the year by the following governing body?	Yes	
8b	Do the organization have a committee with authority to act on behalf of the governing body?	Yes	
9	Were there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>		No

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

		Yes	No
10a	Do the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, branches, and affiliates to ensure their operations are consistent with the organization's exempt purposes?		
11a	Did the organization provide a complete copy of this Form 990 to all members of its governing body before filing this form?		No
12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		No
12b	Are all officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>		
13	Does the organization have a written whistleblower policy?		No
14	Does the organization have a written document retention and destruction policy?		No
15a	Does 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?		No
15a	Organization's CEO, Executive Director, or top management official		No
15b	Other officers or key employees of the organization		No
	<i>If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)</i>		
16a	Does the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a for-profit entity during the year?		No
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?		

Part C. Disclosure

the States with which a copy of this Form 990 is required to be filed CA

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) only) available for public inspection. Indicate how you made these available. Check all that apply.

Own website Another's website Upon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and compensation policy available for public inspection.

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

Table with 6 main columns: (A) Name and Title, (B) Average hours per week, (C) Position (Individual trustee or director, Institutional Trustee, Officer, Key employee, Highest compensated employee, Former), (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. Includes a Total row at the bottom.

Number of individuals (including but not limited to those listed above) who received more than \$10,000 of reportable compensation from the organization

Table with 3 columns: Question, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting and unrelated compensation.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation

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

c	Fundraising events	1c				
d	Related organizations	1d				
e	Government grants (contributions)	1e	368,722			
f	All other contributions, gifts, grants, and similar amounts not included above	1f				
g	Noncash contributions included in lines 1a-1f \$					
h	Total. Add lines 1a-1f			368,722		

2a		Business Code				
b						
c						
d						
e						
f	All other program service revenue					
g	Total. Add lines 2a-2f					

3	Investment income (including dividends, interest, and other similar amounts)		2,301			2,301
4	Income from investment of tax-exempt bond proceeds					
5	Royalties					

		(i) Real	(ii) Personal			
6a	Gross rents					
b	Less rental expenses					
c	Rental income or (loss)					
d	Net rental income or (loss)					

		(i) Securities	(ii) Other			
7a	Gross amount from sales of assets other than inventory					
b	Less cost or other basis and sales expenses					
c	Gain or (loss)					
d	Net gain or (loss)					

8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b	Less direct expenses	b				
c	Net income or (loss) from fundraising events					

9a	Gross income from gaming activities See Part IV, line 19	a				
b	Less direct expenses	b				
c	Net income or (loss) from gaming activities					

0a	Gross sales of inventory, less returns and allowances	a				
b	Less cost of goods sold	b				
	Net income or (loss) from sales of inventory					

Check if Schedule O contains a response or note to any line in this Part IX

Include amounts reported on lines 6b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
Grants and other assistance to domestic individuals See Part IV, line 22				
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
Benefits paid to or for members				
Compensation of current officers, directors, trustees, and employees				
Compensation not included above, to disqualified persons defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
Director salaries and wages				
Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
Director employee benefits				
Payroll taxes				
Expenses for services (non-employees)				
Management				
Legal				
Accounting	650		650	
Advertising				
Professional fundraising services See Part IV, line 17				
Investment management fees				
Travel (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
Advertising and promotion				
Office expenses				
Information technology				
Rentals				
Occupancy				
Travel				
Expenses of travel or entertainment expenses for any federal, state, or local public officials				
Conferences, conventions, and meetings				
Interest				
Contributions to affiliates				
Depreciation, depletion, and amortization				
Insurance	4,909		4,909	
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)				
LANDSCAPE/MARSH MAINTENANCE	205,956	205,956		
EMPLOYEES AND REPORTING	46,616	46,616		
EQUIPMENT AND SUPPLIES	31,573	31,573		
MANAGEMENT FEES	24,000		24,000	
Other expenses	27,801	3,607	24,194	
Total functional expenses. Add lines 1 through 24e	341,505	287,752	53,753	0
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined				

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Cash—non-interest-bearing		81,355	1	11,292
Savings and temporary cash investments		1,027,570	2	1,115,010
Pledges and grants receivable, net			3	
Accounts receivable, net			4	
Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
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 instructions) Complete Part II of Schedule L			6	
Notes and loans receivable, net			7	
Inventories for sale or use			8	
Prepaid expenses and deferred charges			9	4,980
a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		
b	Less accumulated depreciation	10b	10c	
Investments—publicly traded securities			11	
Investments—other securities See Part IV, line 11			12	
Investments—program-related See Part IV, line 11			13	
Intangible assets			14	
Other assets See Part IV, line 11		1,000	15	1,000
Total assets. Add lines 1 through 15 (must equal line 34)		1,109,925	16	1,132,282
Accounts payable and accrued expenses		24,952	17	17,791
Grants payable			18	
Deferred revenue			19	
Tax-exempt bond liabilities			20	
Escrow or custodial account liability Complete Part IV of Schedule D			21	
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			22	
Secured mortgages and notes payable to unrelated third parties			23	
Unsecured notes and loans payable to unrelated third parties			24	
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			25	
Total liabilities. Add lines 17 through 25		24,952	26	17,791
Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
Unrestricted net assets		687,101	27	831,235
Temporarily restricted net assets		397,872	28	283,256
Permanently restricted net assets			29	
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
Capital stock or trust principal, or current funds			30	
Paid-in or capital surplus, or land, building or equipment fund			31	
Retained earnings, endowment, accumulated income, or other funds			32	
Total net assets or fund balances		1,084,973	33	1,114,491

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	371,023
2	Total expenses (must equal Part IX, column (A), line 25)	341,505
3	Revenue less expenses Subtract line 2 from line 1	29,518
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1,084,973
5	Net unrealized gains (losses) on investments	
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O)	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	1,114,491

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
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		No
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 type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
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		
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?		
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		

PART
SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 509(a)(2) organization. Attach to Form 990 or Form 990-EZ.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

of the
Revenue Service

Name of the organization
LANDS CONSERVANCY

Employer identification number

91-2100439

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

Organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.

A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.

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)

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III)

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

Number of supported organizations: _____

Provide the following information about the supported organization(s)

(i) supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		

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.)

n A. Public Support

alendar year year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
grants, contributions, and membership fees received (Do not include any unusual grants or revenues levied for the organization's benefit and either to or expended on its behalf or the value of services or facilities furnished by a governmental unit or organization without charge.)						
1. Add lines 1 through 3						
2. Subtract line 5 from line 4						
Public support. Subtract line 5 from line 4						

n B. Total Support

alendar year year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1. Add lines 1 through 3						
2. Add lines 4 through 6						
Total support. Add lines 1 through 2						

5-year rule. 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**

n C. Computation of Public Support Percentage

Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	
Public support percentage for 2014 Schedule A, Part II, line 14	15	

- 33 1/3% support test—2015.** 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.
- 33 1/3% support test—2014.** 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.
- Facts-and-circumstances test—2015.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.
- Facts-and-circumstances test—2014.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.
- Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

(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.)

Part A. Public Support

calendar year beginning in	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
scholarships, grants, contributions, and membership fees received (Do not include any "unusual grants.")	460,298	456,216	502,307	480,033	368,722	2,267,576
receipts from admissions, merchandise sold or services performed, or facilities furnished in connection with any activity that is related to the organization's tax-exempt purpose						
receipts from activities that are not an unrelated trade or business under section 513						
revenues levied for the organization's benefit and either collected or expended on its behalf or the value of services or facilities furnished by a governmental unit to the organization without charge						
Total. Add lines 1 through 5	460,298	456,216	502,307	480,033	368,722	2,267,576
amounts included on lines 1, 2, and 3 received from disqualified persons						
amounts included on lines 2 and 3 received from other than disqualified persons that exceed the limits specified in section 170(e)(2)(B) (greater of \$5,000 or 1% of the amount on line 13 for the year)						
Public support. (Subtract line 7c from line 6)						2,267,576

Part B. Total Support

calendar year beginning in	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
amounts from line 6	460,298	456,216	502,307	480,033	368,722	2,267,576
investment income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,068	7,240	5,614	3,555	2,301	22,778
unrelated business taxable income (less section 511 taxes) from businesses acquired after 1975						
amounts from lines 10a and 10b	4,068	7,240	5,614	3,555	2,301	22,778
income from unrelated businesses activities not included on line 10b, whether or not the business is regularly carried on or is a passive activity net income. Do not include capital gain or loss from the sale of capital assets (Explain in Part III.)						
Total support. (Add lines 9, 10c, and 12)	464,366	463,456	507,921	483,588	371,023	2,290,354

For the 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**

Part C. Computation of Public Support Percentage

Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	99.010 %
Public support percentage from 2014 Schedule A, Part III, line 15	16	98.790 %

Part D. Computation of Investment Income Percentage

Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	1.000 %
Investment income percentage from 2014 Schedule A, Part III, line 17	18	1.000 %

3 1/3% support tests—2015. 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

3 1/3% support tests—2014. 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

n A. All Supporting Organizations

	Yes	No
all of the organization's supported organizations listed by name in the organization's governing documents? <i>lo," describe in Part VI how the supported organizations are designated. If designated by class or purpose, rcribe the designation. If historic and continuing relationship, explain.</i>		
the organization have any supported organization that does not have an IRS determination of status under ion 509(a)(1) or (2)? <i>es," explain in Part VI how the organization determined that the supported organization was described in section a)(1) or (2).</i>		
the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>es," answer (b) and (c) below.</i>		
the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and fied the public support tests under section 509(a)(2)? <i>es," describe in Part VI when and how the organization made the determination.</i>		
the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) oses? <i>es," explain in Part VI what controls the organization put in place to ensure such use.</i>		
any supported organization not organized in the United States ("foreign supported organization")? <i>es" and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
the organization have ultimate control and discretion in deciding whether to make grants to the foreign orted organization? <i>es," describe in Part VI how the organization had such control and discretion despite being controlled or supervised r in connection with its supported organizations.</i>		
the organization support any foreign supported organization that does not have an IRS determination under ions 501(c)(3) and 509(a)(1) or (2)? <i>es," explain in Part VI what controls the organization used to ensure that all support to the foreign supported nization was used exclusively for section 170(c)(2)(B) purposes.</i>		
the organization add, substitute, or remove any supported organizations during the tax year? <i>es," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN bers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the ority under the organization's organizing document authorizing such action, and (iv) how the action was mpleted (such as by amendment to the organizing document).</i>		
Type I or Type II only. Was any added or substituted supported organization part of a class already designated in organization's organizing document?		
stitutions only. Was the substitution the result of an event beyond the organization's control?		
the organization provide support (whether in the form of grants or the provision of services or facilities) to ne other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by ore or more of its supported organizations, or (c) other supporting organizations that also support or benefit one ore of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor ned in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990) .</i>		
the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>es," complete Part II of Schedule L (Form 990).</i>		
the organization controlled directly or indirectly at any time during the tax year by one or more disqualified ons as defined in section 4946 (other than foundation managers and organizations described in section 509 l) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the orting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit , assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) arding certain Type II supporting organizations, and all Type III non-functionally integrated supporting nizations)? <i>If "Yes," answer b below.</i>		
the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine her the organization had excess business holdings).</i>		
the organization accepted a gift or contribution from any of the following persons? erson who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, governing body of a supported organization?		

Supporting Organizations (continued)

Part B. Type I Supporting Organizations

the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "Yes," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*

	Yes	No
1		

the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*

2		
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Part C. Type II Supporting Organizations

do a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "Yes," describe in Part VI how control or management of the supporting organization was vested in the same persons controlled or managed the supported organization(s).*

	Yes	No
1		

Part D. All Type III Supporting Organizations

the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?

	Yes	No
1		

do any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "Yes," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*

2		
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reason of the relationship described in (2), did the organization's supported organizations have a significant effect on the organization's investment policies and in directing the use of the organization's income or assets at any times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*

3		
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Part E. Type III Functionally-Integrated Supporting Organizations

check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)

- The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. Complete **line 3** below.
- The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

Activities Test. **Answer (a) and (b) below.**

do substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*

	Yes	No
2a		

do the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have been engaged in these activities but for the organization's involvement.*

2b		
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Number of Supported Organizations. **Answer (a) and (b) below.**

do the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*

3a		
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do the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

3b		
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1 Check here if the organization satisfied the integral part test as a qualifying trust on NOV 20, 1970 See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain		
2	Recoveries of prior-year distributions		
3	Other gross income (see instructions)		
4	Add lines 1 through 3		
5	Depreciation and depletion		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)		
7	Other expenses (see instructions)		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		
a	Average monthly value of securities		
b	Average monthly cash balances		
c	Fair market value of other non-exempt-use assets		
d	Total (add lines 1a, 1b, and 1c)		
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets		
3	Subtract line 2 from line 1d		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)		
6	Multiply line 5 by 0.35		
7	Recoveries of prior-year distributions		
8	Minimum Asset Amount (add line 7 to line 6)		

Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	
2	Enter 85% of line 1	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	
4	Enter greater of line 2 or line 3	
5	Income tax imposed in prior year	
6	Distributable Amount . Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

D - Distributions	Current Year
nts paid to supported organizations to accomplish exempt purposes	
nts paid to perform activity that directly furthers exempt purposes of supported organizations, in s of income from activity	
nistrative expenses paid to accomplish exempt purposes of supported organizations	
nts paid to acquire exempt-use assets	
ied set-aside amounts (prior IRS approval required)	
r distributions (describe in Part VI) See instructions	
annual distributions. Add lines 1 through 6	
butions to attentive supported organizations to which the organization is responsive (provide s in Part VI) See instructions	
utable amount for 2015 from Section C, line 6	
8 amount divided by Line 9 amount	

Part E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
utable amount for 2015 from Section C, line			
distributions, if any, for years prior to 2015 nable cause required--see instructions)			
s distributions carryover, if any, to 2015			
2013.			
2014.			
of lines 3a through e			
ed to underdistributions of prior years			
ed to 2015 distributable amount			
over from 2010 not applied (see ctions)			
nder Subtract lines 3g, 3h, and 3i from 3f			
utions for 2015 from Section D, line 7			
ed to underdistributions of prior years			
ed to 2015 distributable amount			
nder Subtract lines 4a and 4b from 4			
ining underdistributions for years prior to if any Subtract lines 3g and 4a from line 2 unt greater than zero, see instructions)			
ining underdistributions for 2015 Subtract h and 4b from line 1 (if amount greater than ee instructions)			
s distributions carryover to 2016. Add lines 4c			
down of line 7			
ss from 2013.			
2014.			
2015.			

Part VI **Supplemental Information.**

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test	

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

2015

Open to Public Inspection

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.
- ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
BALLONA WETLANDS CONSERVANCY

Employer identification number

91-2100439

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	BOARD OF DIRECTORS REVIEWS AND APPROVES FINANCIAL STATEMENTS BEFORE SUBMISSION TO OUTSIDE CPA FOR PREPARATION OF TAX RETURNS BOARD AND ADMINISTRATION REVIEWS TAX RETURNS AND COMPARES WITH FINANCIAL STATEMENTS
FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS ARE AVAILABLE FOR REVIEW AT THE ADMINISTRATIVE OFFICES UPON REQUEST WITH MANAGEMENT PERSONNEL