<b>-</b>	9	90	Potur	n of Organization Ex	omot From In	como	Tax		OMB No. 1545-0047
Form	5	50	Netun	I OI OI Yailization LX		come	Ιαλ		2019
(Rev.	Januar	ry 2020)	Under section 501(c	:), 527, or 4947(a)(1) of the Inter	nal Revenue Code (e	xcept pri	vate foundation	s)	
Departr	Department of the Treasury Department of the Treasury								Open to Public
Internal	Reven	ue Service	► Go to v	www.irs.gov/Form990 for instru	ctions and the lates	t informa			Inspection
A F	or the	2019 calendar	year, or tax year begin	nning	04-01 , <b>2019</b> , a	nd ending	03	3-31	, <b>20</b> 20
B Check if applicable: C Name of organization Point Reyes National Seashore Assoc							D Empl	oyer ide	ntification number
	ddress	change	Doing business as		-		2228894		
	ame ch	ange	Number and street (or P	.O. box if mail is not delivered to street addr	ess)	Room/suite	E Telep	hone nu	mber
In	itial retu	ım	l Bear Valley	Road Building 70				(41	5)663-1200
Fi	nal retu	rn/terminated	City or town, state or pro	wince, country, and ZIP or foreign postal co	de		G Gros	s receipt	s
AI	nendec	l return	Point Reyes St	ation, CA 94956-9703			\$		2,553,954
🗌 Ap	oplicatio	on pending	F Name and address of pr	incipal officer: Donna Faure		F	I(a) Is this a group return	for subord	inates? Yes X No
			Same as C abov	e		H	I(b) Are all subordinat	es includ	led? Yes No
I Ta	ax-exen	npt status: X 50	01(c)(3) 501(c) (	) < (insert no.) 4947(a)(1) or	527		lf "No," attach a lis	st. (see in	nstructions)
JW	ebsite:	► www.j	ptreyes.org			H	I(c) Group exemption	n numbe	r 🕨
K Fo	orm of c	organization: X C	prporation 🗌 Trust 🗌 Ass	sociation 🗌 Other 🕨	L Year of formation	on: <b>1964</b>	M State of leg	al domic	cile: CA
Par	tl	Summary							
	1	Briefly describe	the organization's miss	sion or most significant activities:	The official	partne	er to the P	oint	Reyes
~		National S	Seashore since 1	1964, Point Reyes Nati	onal Seashore	Assoc	iation focu	ses (	on three
Activities & Governance		priorities	: Youth education	ion and inclusion, env	vironmental com	nservat	ion and bu	ildi	ng a broad
erna		community	for people of a	all ages to learn abou	t the Park.				
ove	2	Check this box	► if the organizatio	n discontinued its operations or dis	sposed of more than 2	25% of its	net assets.		
Ű	3	Number of voti	ng members of the gove	erning body (Part VI, line 1a) .			3		14
ŝ	4	Number of inde	ependent voting membe	rs of the governing body (Part VI,	line 1b)		4		14
itie	5	Total number o	f individuals employed i	n calendar year 2019 (Part V, line	2a)		5		57
cti	6	Total number o	f volunteers (estimate if	necessary)			6		500
◄	7a	Total unrelated	business revenue from	Part VIII, column (C), line 12 .			<b>7</b> a		0
	b	Net unrelated I	ousiness taxable income	e from Form 990-T, line 39			7b		0
							Prior Year		Current Year
	8	Contributions a	nd grants (Part VIII, line	1h)			1,596,373		1,500,120
ne	9	Program servio	e revenue (Part VIII, lin	e 2g)			435,897		477,094
Revenue	10	Investment inco	ome (Part VIII, column (	A), lines 3, 4, and 7d)			6,939		6,195
Re	11	Other revenue	(Part VIII, column (A), li	nes 5, 6d, 8c, 9c, 10c, and 11e)			251,154		217,620
	12	Total revenue -	add lines 8 through 11	(must equal Part VIII, column (A),	line 12)		2,290,363		2,201,029
	13	Grants and sim	ilar amounts paid (Part	IX, column (A), lines 1-3)					10,750
	14	Benefits paid to	o or for members (Part I	X, column (A), line 4)					0
	15			e benefits (Part IX, column (A), lin			1,360,613		1,492,629
Expenses	16a	Professional fu	ndraising fees (Part IX,	column (A), line 11e)					0
ben	b	Total fundraisir	g expenses (Part IX, co	lumn (D), line 25)	432,288				
Ă	17	Other expenses	s (Part IX, column (A), li	nes 11a-11d, 11f-24e)			865,344		773,839
	18	Total expenses	. Add lines 13-17 (mus	t equal Part IX, column (A), line 25	i)		2,225,957		2,277,218
	19	Revenue less e	expenses. Subtract line	18 from line 12			64,406		(76,189)
or						Beginn	ing of Current Year		End of Year
Net Assets or Fund Balances	20	Total assets (P	art X, line 16)				2,746,766		2,631,779
Asse	21	Total liabilities	(Part X, line 26)				423,560		398,499
Par	22	Net assets or f	und balances. Subtract	line 21 from line 20			2,323,206		2,233,280
Par	t II	Signature	Block						
				In, including accompanying schedules and		of my knowle	dge and belief, it is		
true, c	orrect,	and complete. Decial	ation of preparer (other than of	ficer) is based on all information of which pre	eparer has any knowledge.				
		Donna	Faure						
Sigr	)	Signature of	f officer				Da	te	
Here	;	Donna	Faure, Executiv	ve Director					
			t name and title						
		Print/Type prepa	rer's name	Preparer's signature	Date		Check X if	PTIN	
Paid	l	Michael	Smith	Michael Smith	01-23-20	21	self-employed	PC	0097496
Prep				Smith, CPA			n's EIN ►		
Use							ne no.		
	•			a CA 94975-1324			707-	529-	2443
Mav t	he IR	S discuss this re							
			Act Nation and the co	· · · · ·					

Form	n 990 (2019) Point Reyes National Seashore Association	94-2228894	Page <b>2</b>
Pa	rt 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 official partner to the Point Reyes National Seashore since 1964, Point	Reyes National	L
	Seashore Association focuses on three priorities: Youth education and inclu	sion, environme	ental
	conservation and building a broad community for people of all ages to learn	about the Park	۲.
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 measu	red 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 \$1,556,729 including grants of \$1,070 ) (Revenue		,
	Point Reyes National Seashore is a treasure open to all who visit. The wild		
	sticks out into the Pacific Ocean like a green thumb, hitchhiking slowly no		
	three inches each year. No other public place along the northern California	Ť	
	to so many. Situated close to millions of people in San Francisco, Oakland		
	National Seashore offers hiking trails across nearly 70,000 acres of wilder		
	beaches, complex dunes, marshes and scrub. It offers coves and bays for kay		
	equestrians and wildlife viewing opportunities for hundreds of bird species		
	lions, badgers, bobcats, otters and more. Unlike most parks around the coun		
	National Seashore is free to the public. There is no entry fee. There are no		
	open to ALL. Inspiring Youth, Opening Doors, Putting Feet on the Trail: Dra	w a circle with	<u>1 a</u>
	30-mile diameter centered on the		
4b	(Code: ) (Expenses \$ 2 including grants of \$ ) (Revenue	\$	
40		•	)
	the Bear Valley Visitor Center in the Park. That gets you to the East Bay,		
	County and Contra Costa County. To thousands of youths outside that circle, like a million miles away. Many are in underserved communities lacking tran		
	time and supervision to allow them to explore the National Seashore. We rem	ove those obsta	TGTGR

and work with schools and partner agencies to get those children into the park and their feet on the trail. Outdoor-based learning is an essential catalyst for healthy development. Through our Young Stewards programs, the number of Bay Area young people served has grown steadily since 1999 by approximately 50%. We provide need-based financial assistance to 62% of our young visitors, 50% of whom receive benefits from federal school lunch programs so that they can come out to the park and have the same experiences as more privileged youths and those who live closer. This year, we brought

4c	(Code:) (Expenses \$1 including grants of \$) (Revenue \$)
	over 3,200 children and families to the park through our programs and provided some form of
	financial assistance to about 1,800 of them. That total includes 954 kids in our school-year
	camps, 377 kids in summer camp, and 1,100 students attending our day-long Science at the Seashore
	field trips. Unfortunately, as a result of the Coronavirus Pandemic, we had to cancel programming
	for 300 students at the end of our fiscal year in March. Conservation Through Science -
	Supporting the Park: PRNSA works year-round in partnership with the National Park Service (NPS)
	to protect and monitor the health of natural resources within the park. Park biologists and
	ecologists use data partially provided by us and priorities set by regional working groups to set
	an ambitious agenda each year. We secure funding from several sources including private donors,
	government grants and foundations to hire seasonal field staff. Those staff then work with NPS
	project managers on dune habitat
4d	Other program services (Describe on Schedule $\Omega$ )

	Caller program controod (Becombo on s			
	(Expenses \$	including grants of \$	) (Revenue \$	)
4e	Total program service expenses	1,556,732		

Forn	1 990 (2019) Point Reyes National Seashore Association 94-22288	94	P	age 3
Pa	rt IV Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	x	
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		x
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		x
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		v
9	complete Schedule D, Part III	0		x
3	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
-	or in 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,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	x	
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	44-1		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		x
1	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			~
	Schedule D, Parts XI and XII	12a	x	
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 and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did 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	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	17		v
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		x
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	x	
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
20 a		20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
		<b>Form</b>	<b>~~~</b> /~	040)

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Pa	rt IV Checklist of Required Schedules (continued)				
				Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on				
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	• • • •	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the				
	organization's current and former officers, directors, trustees, key employees, and highest compensated				
	employees? If "Yes," complete Schedule J	••••	23		х
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 Schedule K. If "No," go to line 25a	• • • •	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	••••	24b		
С	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		05-		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	$\cdot$ $\cdot$ $\cdot$ $\cdot$	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		25h		
26	If "Yes," complete Schedule L, Part I		25b		х
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	]	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	• • • •	20		
21	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee				
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these				
	persons? If "Yes," complete Schedule L, Part III		27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part	••••			
20	IV instructions, for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				
	"Yes," complete Schedule L, Part IV		28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If				
	"Yes," complete Schedule L, Part IV		28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		29	x	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified				
	conservation contributions? If "Yes," complete Schedule M		30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				
	complete Schedule N, Part II		32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations				
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part L		33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,				
	or IV, and Part V, line 1		34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a				
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable				
	related organization? If "Yes," complete Schedule R, Part V, line 2	••••	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and				
_	19? Note: All Form 990 filers are required to complete Schedule O.		38	х	
Par					
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>			
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	49			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable	0			
С	5 IS I 5 I IS		1.		
	reportable gaming (gambling) winnings to prize winners?	• • • •	1c	Х	

Form	990 (2019) Point Reyes National Seashore Association 94-22288	94	F	Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions).			
3a	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" to line 3b, provide an explanation in Schedule Q	3b		L
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			
<b>F</b> -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<b>F</b> -		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
C C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	60		
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		x
b	gifts were not tax deductible?.	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a	x	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	x	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			<u> </u>
	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		x
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		x
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			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
C 140	Enter the amount of reserves on hand	14-		
14a b	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		x
b 15	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		v
	If "Yes," see instructions and file Form 4720, Schedule N.	13		x
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.	10		

Form **990** (2019)

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Pa	rt 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 instruction	s.		
	Check if Schedule O contains a response or note to any line in this Part VI			. x
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6		х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
a	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_		
<u> </u>	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
100	Did the organization have local chapters branches or effiliates?	100	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		x
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Tia	~	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>			
•	describe in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	x	
14	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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b		х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a 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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed   California			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website I Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			

Phillip Chavira (415)663-1200, 1 Bear Valley Road Building 70, CA 94956

Form 990 (2019) Point Reyes Nation Point VII Compensation of Officers, Direction of Statements Point Reyes National Point Reyes Reyes N	onal Seas ectors. Tru	hore Istee	Asa S.K	soci	iatic Emple	on ovee	es. Highest Co	94-2228 mpensated E	
Independent Contractors	<b>,,,,,</b>		-,	.,	•		, <b>J</b>	•	<b>, , , , , , , , , ,</b>
Check if Schedule O contains a response									<u></u>
Section A. Officers, Directors, Trustees, Key Empl		-					-		
<b>1a</b> Complete this table for all persons required to be list organization's tax year.	ed. Report co	mpen	satior	n for 1	the cale	endar	r year ending with o	or within the	
• List all of the organization's <b>current</b> officers, direc compensation. Enter -0- in columns (D), (E), and (F) if no				divid	uals or	orga	nizations), regardle	ess of amount of	
<ul> <li>List all of the organization's current key employee</li> </ul>				s for	definiti	on of	"key employee "		
<ul> <li>List the organization's five current highest competition</li> </ul>								kev emplovee)	
who received reportable compensation (Box 5 of Form W organization and any related organizations.		-							
<ul> <li>List all of the organization's former officers, key e</li> </ul>	mplovees, an	d high	est co	ompe	ensated	l emp	lovees who receive	ed more than	
\$100,000 of reportable compensation from the organization		-					,		
• List all of the organization's former directors or t organization, more than \$10,000 of reportable compensation.						-		trustee of the	
See instructions for the order in which to list the persons a	bove.								
Check this box if neither the organization nor any relation		ion co	mpen	satec	any c	urrent	t officer, director, or	trustee.	
				(C)					
(A)	(B)	(do )	not chor	Positi	on e than or	20	(D)	(E)	(F)
Name and title	Average	box	, unless	perso	n is both	an	Reportable	Reportable	Estimated amount
	hours per week	offic	cer and	a direc	ctor/truste	ee)	compensation from the	compensation from related	of other compensation
	(list any	9.5	=	0	Ke e	म्	organization	organizations (W-2/1099-MISC)	from the organization and
	hours for related	director	stituti	Officer	employee Key employ	Highes	(W-2/1099-MISC)	(W-2/1033-10100)	related organizations
	organizations	otor tr	onal		employee Key employee	t con			
	below	or director	nstitutional trustee		ee	mpensated			
	dotted line)		ee			sated			
(1) Den Alered	4.00								
(1) Don Lloyd	4.00	x					0	0	0
(2) Kirk Marckwald	4.00						0	0	<b>U</b>
Chair		x		x			0	0	0
(3) Dick Bunce	4.00	0			/				
Member		x					0	0	0
(4) Mike Deverell	4.00								
Former Member (5) David Wilson	4.00	X					0	0	0
Member	4.00	x					0	0	0
(6) Peggy Mitchell	4.00						-		
Secretary		x		x			0	0	0
(7) Amanda Eichstaedt	4.00								
Former Member		x					0	0	0
(8) Richard Gale Member	4.00	x					0	0	0
(9) Pamela Wright	4.00						0	0	<u>U</u>
Member		x					0	0	0
(10)Maureen Kennedy	4.00								
Member		x					0	0	0
(11)John_Casaudoumecq	4.00								
Treasurer	4	x	$\left  \right $	x		_	0	0	0
(12)Melissa Nelken	4.00	x					0	0	0
(13)Seth Rosen	4.00						0	0	<b>0</b>
Member		x					0	0	0
(14)Zac_Weinberg	4.00								
Member		х					0	0	0
EEA									Form <b>990</b> (2019)

## Form 990 (2019)

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

	(A) Name and title		box	, unles cer and	Po: eck m is per d a di	(C) position more than on reson is both a irrector/truster Key employ e b v e b v e b v e e b v e e e e e e e e e e e e e			(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	co orga	(F) nated am of other mpensati irom the unization d organiz	on and
Vice ( (16)Cat Member	herine Porter	4.00	x x		x		2		0	0			0
Member (18)Don Execut		40.00	x		x				0	0		25,6	0 586
(20)	ce Director				x				0	0			0
(24)													
C	Subtotal		•••				· · · ·		110,377	0		25,6	586
3	Total number of individuals (including but not limit reportable compensation from the organization Did the organization list any <b>former</b> officer, direct employee on line 1a? <i>If</i> "Yes," <i>complete Schedu</i>	tor, trustee, l	key er	nploy	vee,	or h	nighest	con	npensated		3	Yes	1 No X
<ul> <li>employee on line 1a? If "Yes," complete Schedule J for such individual</li> <li>For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual</li> <li>5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual</li> </ul>									4		x		
Sectio	for services rendered to the organization? <i>If</i> "Yes on <b>B. Independent Contractors</b> Complete this table for your five highest compensa compensation from the organization. Report comp	ted independ	lent co	ontrac	ctors	s tha	t receiv	ved	more than \$100,00 or within the organ	00 of			
	(A) Name and business addres	55							(B) Description of servic	es	(C) Compens	sation	
2	Total number of independent contractors (includin	g but not limi	ited to	those	e lis	ted	above)	) wh	0				

►

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

art		Statement of Revenue			sociation			
		Check if Schedule O contains a response	or note to	any line in this	s Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns	1a					
? v	b	Membership dues	1b	143,545				
nut	С	Fundraising events	1c	316,885				
n n n n n n n n n n n n n n n n n n n	d	Related organizations	1d					
ar	е	Government grants (contributions)	1e	383,841				
<u>i</u> E	f	All other contributions, gifts, grants,						
S IS		and similar amounts not included above	1f	655,849				
and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f	1g \$	76,737				
90	h	Total. Add lines 1a-1f		►	1,500,120			
			Bu	siness Code				
,	2a	Field Institute	7139	990	109,482	109,482		
ο Ο	b	Clem Miller Environment	6117	710	100,739	100,739		
Revenue	С	Summer Camp	7212	210	266,873	266,873		
eve	d							
<u>а</u> т	е							
		All other program service revenue						
	g	<b>Total.</b> Add lines 2a-2f	· · · · ·	• • • • •	477,094			
		Income from investment of tax-exempt bond p Royalties			6,195			6,1
Other Kevenue	b c d 7a b c d 8a	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       (i) Securities         Gain or (loss)       7a         Retain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       316,885         of contributions reported on line       1c). See Part IV, line 18		(ii) Other				
	b c d 7a b c d 8a b	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)						
	b c d 7a b c d 8a b c	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)		 (ii) Other	(52,754)			(52,7
	b c d 7a b c d 8a b c 9a	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       7a         Gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       316,885         of contributions reported on line       1c). See Part IV, line 18         Ic). See Part IV, line 18          Less: direct expenses          Net income or (loss) from fundraising events         Gross income from fundraising		 (ii) Other 	(52,754)			(52,7
	b c d 7a b c 8a 8a b c 9a	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       7a         Gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       316,885         of contributions reported on line       1c). See Part IV, line 18         Less: direct expenses		 (ii) Other 	(52,754)			(52,7
	b c d 7a b c d 8a b c 9a b	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       7a         Gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       316,885         of contributions reported on line       1c). See Part IV, line 18         Less: direct expenses          Net income or (loss) from fundraising events         Gross income from gaming activities, See Part IV, line 19          Less: direct expenses          Less: direct expenses	 8a 8b  9a 9b	► (ii) Other ► 59,950 112,704 ►	(52,754)			(52,7
	b c d 7a b c d 8a b c 9a b c	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       7a         Gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Soros income from fundraising events (not including \$ 316,885       316,885         of contributions reported on line       1c). See Part IV, line 18         Less: direct expenses          Net income or (loss) from fundraising events       Gross income from gaming activities, See Part IV, line 19         Less: direct expenses          Net income or (loss) from gaming activities, See Part IV, line 19		► (ii) Other ► 59,950 112,704 ►	(52,754)			(52,7
	b c d 7a b c d 8a b c 9a b c 10a	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       7a         Gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Soft contributions reported on line       116,885         of contributions reported on line       112.         1c). See Part IV, line 18          Less: direct expenses          Net income or (loss) from fundraising events       Gross income from gaming activities, See Part IV, line 19         Less: direct expenses          Net income or (loss) from gaming activities       Gross sales of inventory, less		► (ii) Other ► 59,950 112,704 ►	(52,754)			(52,7
	b c d 7a b c d 8a b c 9a b c 10a	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       7a         Gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Sorss income from fundraising events (not including \$ 316,885)       316,885         of contributions reported on line       1c). See Part IV, line 18         Ic). See Part IV, line 18          Less: direct expenses          Net income or (loss) from fundraising events       Gross income from gaming activities, See Part IV, line 19         Gross sales of inventory, less returns and allowances		 (ii) Other ► 59,950 112,704 ► ► 501,166	(52,754)			(52,7
	b c d 7a b c d 8a b c 9a b c 10a b	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       7a         Gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Gross income from fundraising events (not including \$ 316,885 of contributions reported on line       316,885 of contributions reported on line         1c). See Part IV, line 18          Less: direct expenses          Net income or (loss) from fundraising events       Gross income from gaming         activities, See Part IV, line 19          Less: direct expenses          Net income or (loss) from gaming activities       Gross sales of inventory, less returns and allowances         Less: cost of goods sold		 (ii) Other ► 59,950 112,704 ► 501,166 240,221				(52,7
	b c d 7a b c d 8a b c 9a b c 10a b	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       7a         Gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Sorss income from fundraising events (not including \$ 316,885)       316,885         of contributions reported on line       1c). See Part IV, line 18         Ic). See Part IV, line 18          Less: direct expenses          Net income or (loss) from fundraising events       Gross income from gaming         activities, See Part IV, line 19          Less: direct expenses          Net income or (loss) from gaming activities       Gross sales of inventory, less returns and allowances	 8a 8b  9a 9b  10a 10b	 (ii) Other  59,950 112,704  501,166 240,221 	(52,754)	260,945		(52,7
	b c d 7a b c d 8a b c 9a b c 10a b c	Gross rents		► (ii) Other ► 59,950 112,704 ► 501,166 240,221 ► siness Code	260,945	260,945		(52,7
	b c d 7a b c d 8a b c 9a b c 10a b c 11a	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)       6c         Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses       7a         Gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       7c         Net gain or (loss)       316,885         of contributions reported on line       1c). See Part IV, line 18         1c). See Part IV, line 18          Less: direct expenses          Net income or (loss) from fundraising events       Gross income from gaming         activities, See Part IV, line 19          Less: direct expenses          Net income or (loss) from gaming activities       Gross sales of inventory, less         returns and allowances          Less: cost of goods sold          Net income or (loss) from sales of inventory         Other		► (ii) Other ► 59,950 112,704 ► 501,166 240,221 ► siness Code				(52,7)
Other Kevenu	b c d 7a b c d 8a b c 9a b c 10a b c 11a b	Gross rents		► (ii) Other ► 59,950 112,704 ► 501,166 240,221 ► siness Code	260,945	260,945		(52,7)
	b c d 7a b c d 8a b c 9a b c 10a b c 11a b c	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)	 8a 8b  9a 9b  10a 10b  8us 9000	► (ii) Other ► 59,950 112,704 ► 501,166 240,221 ► siness Code	260,945	260,945		(52,7
	b c d 7a b c d 8a b c 9a b c 10a b c 11a b c d	Gross rents       6a         Less: rental expenses       6b         Rental income or (loss)       6c         Net rental income or (loss)		► (ii) Other ► 59,950 112,704 ► 501,166 240,221 ► siness Code 099	260,945	260,945		(52,7

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EEA

Pa	Irt IX Statement of Functional Expenses			
Sec	tion 501(c)(3) and 501(c)(4) organizations must complete all c	olumns. All other organ	izations must complete	e column (A).
	Check if Schedule O contains a response or note to a	any line in this Part IX		
Do	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and
8b,	9b, and 10b of Part VIII.	Total expenses	expenses	general expenses
1	Grants and other assistance to domestic organizations			
	and domestic governments. See Part IV, line 21			
2	Grants and other assistance to domestic			
	individuals. See Part IV, line 22	10,750	10,750	
3	Grants and other assistance to foreign			
	organizations, foreign governments, and			
	foreign individuals. See Part IV, lines 15 and 16			
4	Benefits paid to or for members			
5	Compensation of current officers, directors,			
	trustees, and key employees	121,092	48,316	37,3
6	Compensation not included above, to disqualified			
	persons (as defined under section 4958(f)(1)) and			
	persons described in section 4958(c)(3)(B)			
7	Other salaries and wages	1,063,865	865,444	25,0

### Form 990 (2019) Point Reyes National Seashore Association

94-2228894 Page 10

#### 37,317 35,459 25,041 173,380 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 10,100 7,101 717 2,282 185,525 130,439 13,165 41,921 112,047 86,303 9,224 16,520 Fees for services (nonemployees): Legal..... 142,452 142,452 Professional fundraising services. See Part IV, line 17 2,251 2,251 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 104,676 94,240 10,436 2,011 904 1,107 95,032 45,933 12,583 36,516 Information technology . . . . . . . . 110,460 66,831 16,138 27,491 . . . . 63,515 45,942 9,209 8,364 . . . . 25,457 18,989 4,135 2,333 . . . . Payments of travel or entertainment expenses for any federal, state, or local public officials . . Conferences, conventions, and meetings . . . 43,198 35,614 1,038 6,546 Payments to affiliates . . . . . . . . . . . . . 2,838 Depreciation, depletion, and amortization . . 1,911 927 19,942 8,336 30,631 2,353 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Communications 49,399 21,724 23 27,652 Bank charges 48,731 39,619 1,008 8,104 c Printing and postage 28,453 526 1,884 26,043 16,099 d Park projects 23,825 7,626 100 e All other expenses 910 105 805 2,277,218 Total functional expenses. Add lines 1 through 24e. . 288,198 1,556,732 432,288 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here **•** if following SOP 98-2 (ASC 958-720) . . .

**(D)** Fundraising

expenses

	990 (20	· · · · · · · · · · · · · · · · · · ·	94	4-22	28894 Page 11
Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X $\ldots$	•••••	•••	
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	302,848	1	442,422
	2	Savings and temporary cash investments		2	57,556
	3	Pledges and grants receivable, net		3	165,329
	4	Accounts receivable, net	22,573	4	6,600
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) $\ldots$		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	103,947	8	136,776
∢	9	Prepaid expenses and deferred charges	82,286	9	21,109
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 159,289			
	b	Less: accumulated depreciation	39,233	10c	36,395
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	313,824	12	110,692
	13	Investments - program-related. See Part IV, line 11	1,654,900	13	1,654,900
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	2,631,779
	17	Accounts payable and accrued expenses	176,627	17	169,954
	18	Grants payable		18	500
	19	Deferred revenue		19 20	228,045
	20 21	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director,		21	
Liabilities	22	trustee, key employee, creator or founder, substantial contributor, or 35%			
llide		controlled entity or family member of any of these persons		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	23	Unsecured notes and loans payable to unrelated third parties		23	
	25	Other liabilities (including federal income tax, payables to related third		27	
	20	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	423,560	26	398,499
		Organizations that follow FASB ASC 958, check here			
6		and complete lines 27, 28, 32, and 33.			
Ces	27	Net assets without donor restrictions	799,127	27	723,489
alar	28	Net assets with donor restrictions	1,524,079	28	1,509,791
ä		Organizations that do not follow FASB ASC 958, check here			
un.		and complete lines 29 through 33.			
٩. ۳	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Assi	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	2,323,206	32	2,233,280
Z	33	Total liabilities and net assets/fund balances	2,746,766	33	2,631,779
					Eorm <b>990</b> (2019)

EEA

Form **990** (2019)

Form	n 990 (2019) Point Reyes National Seashore Association	94-2228894	<u> 1</u>	Paç	ge <b>12</b>
Pa	rt 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)	. 1	2,2	01,0	029
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		77,2	
3	Revenue less expenses. Subtract line 2 from line 1			, 76,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))			23,2	
5	Net unrealized gains (losses) on investments			13,7	
6	Donated services and use of facilities		`		<u>, , ,</u>
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
10		. 10	· · ·		
Da	32, column (B))	. 10	_ 2,2	33,2	100
Га					
	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: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	•••••	2a		x
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	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?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form 9	<b>90</b> (20	019)

			1	Public Chari	ity Status and F	Public	Suppo	rt	OMB No. 1545-0047
					501(c)(3) organization or a				t. 2019
•		of the Treasury		► Atta	ch to Form 990 or Form	n 990-EZ.			Open to Public
		venue Service	•	Go to www.irs.go	ov/Form990 for instruct	ions and	the latest		Inspection
		e organization						Employer identificat	
	.nt art I		onal Seashore		ganizations must co	omplete	this part	94-222889	
					s 1 through 12, check onl				<u>.</u>
1				•	Irches described in sect	•			
2					Schedule E (Form 990 c	• •			
3					n described in section 1				
4			earch organization ope e, city, and state:	erated in conjunctio	n with a hospital describ	ed in <b>sect</b>	ion 170(b)	(1)(A)(iii). Enter the	
5		An organizatio	n operated for the bene	efit of a college or ι	iniversity owned or opera	ated by a g	governmen	tal unit described in	
	_	section 170(b	)(1)(A)(iv). (Complete	Part II.)					
6			•	•	nit described in section				
7	х	•	•		of its support from a gov	/ernmental	unit or fror	m the general public	
8			ection 170(b)(1)(A)(vi rust described in secti						
9		-			ion 170(b)(1)(A)(ix) ope	rated in co	niunction	with a land-grant colleg	1e
Ũ					see instructions). Enter the				
		university:	<b>J</b>	<b>3</b> • • • <b>3</b> • • • • (•			,,		
10		An organizatio	n that normally receive	s: (1) more than 33	1/3% of its support from	n contributi	ons, memb	ership fees, and gross	
		receipts from a	ctivities related to its e	exempt functions - s	subject to certain exception	ons, and (2	2) no more	than 33 1/3% of its	
					siness taxable income (le			rom businesses	
			-		section 509(a)(2). (Com				
11		-		-	test for public safety. Se				
12		-			the benefit of, to perform				
					<pre>bed in section 509(a)(1) be type of supporting organic</pre>				
	а	_			ised, or controlled by its				
					appoint or elect a major				.9
					IV, Sections A and B.	·			
	b	Type II. A	supporting organization	on supervised or co	ontrolled in connection w	ith its supp	oorted orga	nization(s), by having	
		control or r	management of the sup	oporting organization	on vested in the same pe	rsons that o	control or n	nanage the supported	
			on(s). You must comp						
	С				anization operated in cor				th,
					u must complete Part I				- (-)
	d				organization operated i penerally must satisfy a d				n(s)
					e Part IV, Sections A a		•		
	е		, ,		determination from the IF			Type II. Type III	
	-		-		ntegrated supporting orga		<b>,</b>		
	f								
	g	Provide the foll	owing information abo	ut the supported or	ganization(s).	I			
	(	i) Name of supported	organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	0	(v) Amount of monetary	(vi) Amount of
					(described on lines 1-10 above (see instructions))	docum	ir governing ient?	support (see instructions)	other support (see instructions)
						Vac	No		
						Yes	No		
(A)									
(B)									
									<u> </u>
(C)									
(D)									
(E)									
Tota	al								

		es National				94-222889	<u>v</u>
Pa	Int II Support Schedule for Organiza	ations Descr	ibed in Secti	ions 170(b)(1	)(A)(iv) and	170(b)(1)(A)(v	vi)
	(Complete only if you checked th	e box on line	5, 7, or 8 of I	Part I or if the	organization	failed to qual	fy under
	Part III. If the organization fails to	o qualify unde	r the tests lis	ted below, ple	ease complet	e Part III.)	
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)►	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and					4	
	membership fees received. (Do not						
	include any "unusual grants.")	1,424,657	783,458	1,215,603	1,596,373	1,500,120	6,520,211
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	1,424,657	783,458	1,215,603	1,596,373	1,500,120	6,520,211
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						204,852
6	Public support. Subtract line 5 from line 4						6,315,359
Se	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)►	(a) 2015	<b>(b)</b> 2016	(c) 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	(f) Total
7	Amounts from line 4	1,424,657	783,458	1,215,603	1,596,373	1,500,120	6,520,211
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from						
	similar sources	906	639	4,816	6,731	6,195	19,287
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on			•			
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)				36,897	9,429	46,326
	Total support. Add lines 7 through 10						6,585,824
12	Gross receipts from related activities, etc. (se	ee instructions)				12	4,150,662
13	First five years. If the Form 990 is for the or	ganization's fir	st, second, thir	d, fourth, or fift	th tax year as a	a section 501(c)	(3)
	organization, check this box and stop here						<u></u> ►□
	ction C. Computation of Public Suppor						
	Public support percentage for 2019 (line 6, c					14	95.89 %
	Public support percentage from 2018 Sched					15	95.58 %
16a	33 1/3% support test - 2019. If the organization						
	box and stop here. The organization qualified						
k	<b>33 1/3% support test - 2018.</b> If the organiza						
	this box and stop here. The organization qu						
17a	10%-facts-and-circumstances test - 2019.	-					
	10% or more, and if the organization meets t						
	Part VI how the organization meets the "fact	s-and-circumst	ances" test. Th	ne organization	qualifies as a	publicly suppor	ted
	organization						
k	0 10%-facts-and-circumstances test - 2018.	-					ne
	15 is 10% or more, and if the organization m					-	
	Explain in Part VI how the organization meet						· _
	supported organization						▶ ∐
18	Private foundation. If the organization did n						
	instructions						▶ Ц

			l Seashore			94-2228	894 Page 3
Pa	rt III Support Schedule for Organiz						
	(Complete only if you checked t						nder Part II.
	If the organization fails to qualify	/ under the te	ests listed bel	ow, please co	mplete Part	II.)	
See	ction A. Public Support						- I
Cal	endar year (or fiscal year beginning in)►	<b>(a)</b> 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513.						
4	Tax revenues levied for the			-			
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						·
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
See	ction B. Total Support						
Cal	endar year (or fiscal year beginning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	<b>(d)</b> 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,			-			
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (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 regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the or	ganization's fi	rst, second, thi	rd, fourth, or fif	th tax year as	a section 501	(c)(3)
	organization, check this box and stop here						ト 🗌
See	ction C. Computation of Public Suppor						
15	Public support percentage for 2019 (line 8, c	olumn (f), divi	ded by line 13,	column (f)) .		15	%
16	Public support percentage from 2018 Sched	ule A, Part III,	line 15			16	%
See	ction D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2019 (line	e 10c, column	(f), divided by I	ine 13, column	(f))	17	%
18	Investment income percentage from 2018 Se	chedule A, Pa	rt III, line 17.			18	%
19a	33 1/3% support tests - 2019. If the organiz	ation did not o	check the box o	on line 14, and	line 15 is more	e than 33 1/3%	6, and line
	17 is not more than 33 1/3%, check this box	and stop her	<b>e.</b> The organiza	ation qualifies a	is a publicly su	pported orgai	nization 🕨 🗌
b	33 1/3% support tests - 2018. If the organiz	ation did not o	check a box on	line 14 or line	19a, and line 1	16 is more that	n 33 1/3%, and
	line 18 is not more than 33 1/3%, check this	box and <b>stop</b>	here. The orga	anization qualifi	ies as a public	ly supported o	organization 🕨 🗌
20	Private foundation. If the organization did n	ot check a bo	x on line 14, 19	a, or 19b, cheo	ck this box and	d see instruction	ons 🕨 🗌

Part	IV Supporting Organizations			
	(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, con			
	and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Pa		е	
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and comp	lete Part V.)		
ect	ion A. All Supporting Organizations		Vee	N
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	N
	documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status	-		
-	under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the suppo	rted		
	organization was described in section $509(a)(1)$ or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," and			
<i>j</i> u	(b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$ , (5), or (6)			
D	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the			
	organization made the determination.	3b		
~	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)			
С	purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.			
12	Was any supported organization not organized in the United States ("foreign supported organization")? If	30		
+a	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	44		
D	supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
~	Did the organization support any foreign supported organization that does not have an IRS determination	40		
С	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization us	ad		
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(			
	purposes.	4c		
5a				
	answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such act			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action action is a business of the organizing document authorizing such action; and (iv) how the action a			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	-		
	designated in the organization's organizing document?	5b		
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	<b>5</b> c		
5	Did the organization provide support (whether in the form of grants or the provision of services or facilities)			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefit	ed		
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or	-		
_	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contribution			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled ent	-		
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
3	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
)a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation managers and organizations described and the section 4946 (other than foundation 494			
	in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal bene			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings.)	10b		

Sched	Ule A (Form 990 or 990-EZ) 2019         Point Reyes National Seashore Association         94-222889	4	Р	age <b>5</b>
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did 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 "No," describe in <b>Part VI</b> 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that 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		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were 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 "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		1	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			

	organization of tax your, (i) a whiten house according the type and amount of capport provided during the prior tax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were 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 "No," explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	
2	By reason of the relationship described in (2), did the ergenization a supported ergenizations have a	2	

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

# Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c 🗌 The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. Answer (a) and (b) below.
- a Did 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.
- **b** Did 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 engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- **a** Did 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.*
- **b** Did 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.*

2a

2b

3a

3

Yes

No

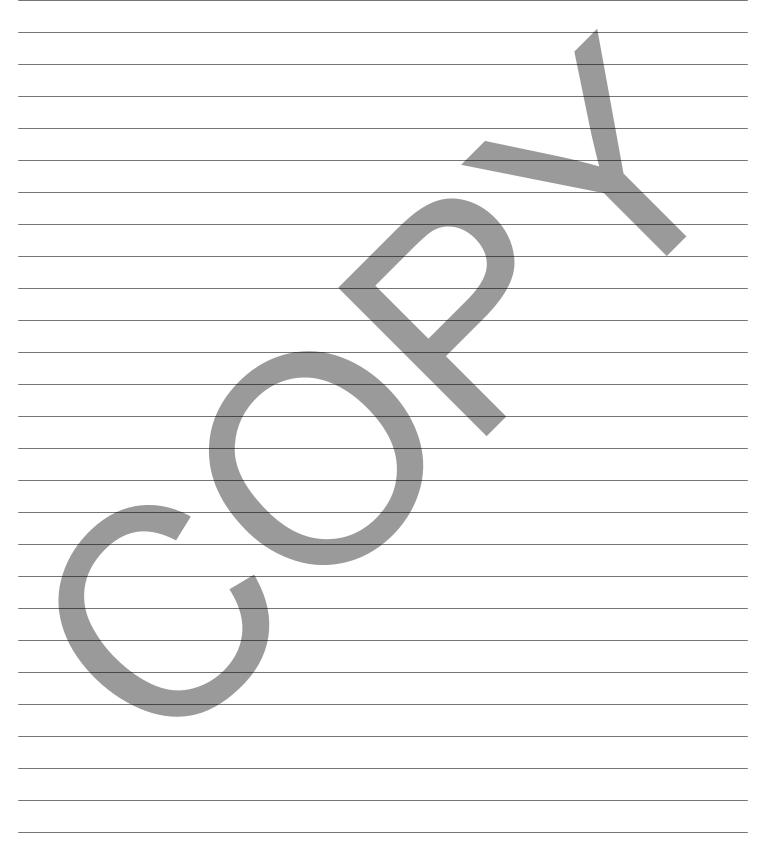
on	94-2228	894 Page
janiz	ations	
rust o	on Nov. 20, 1970 (explain	in Part VI). See
ation	s must complete Sections	s A through E.
	(A) Prior Year	(B) Current Year
	(, , , , , , , , , , , , , , , , , , ,	(optional)
-		
-		
5		
6		
7		
8		
	(A) Prior Year	(B) Current Year (optional)
1a		
1b		
1c		
1d		
2		
3		
4		
5		
6		
7		
8		
		Current Year
1		
2		
3		
4		
5		
6		
	ated Type III supporting o	organization (see
	I       1         2       3         4       5         6       7         8       1         10       1         11       2         12       3         4       5         6       7         8       1         10       1         2       3         4       5         6       7         8       1         12       3         4       5         6       7         8       1         12       3         4       5         6       6         7       8         1       1         2       3         4       5         6       6         7       8         1       1         2       3         4       5         6       6	2 3 4 5 6 7 8 (A) Prior Year 1a 1b 1c 1d 2 3 4 5 6 7 8 1a 1a 1b 1c 1d 1c 1d 1 1 2 3 4 5 6 7 8 1 1 1 1 1 1 1 1 1 1 1 1 1

EEA

Schedule A (Form 990 or 990-EZ) 2019

Schedu Par	le A (Form 990 or 990-EZ) 2019 Point Reyes National Seas t V Type III Non-Functionally Integrated 509(a)(3)		94-222 zations (continued)	8894 Page 7
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exem	npt purposes		
2	Amounts paid to perform activity that directly furthers exempt	• • •		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes	s of supported organizati	ions	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	organization is respons	sive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
	From 2014			
b	From 2015			
C	From 2016			
d	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	·		
4	Distributions for 2019 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	<b>Excess distributions carryover to 2020</b> . Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Evenes from 2016			
	Excess from 2017			
	Evenes from 2018			
	Evenes from 2010			
	Excess non 2019			ulo A /Form 000 or 000 F7) 0010
EEA			Sched	ule A (Form 990 or 990-EZ) 2019

Part VISupplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; PartIII, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, SectionB, 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,<br/>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,<br/>lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)



SCHEDUL	ΕD
(Form 990)	)

Department of the Treasury

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

OMB No. 1545-0047

2019
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Open to Public Inspection

Name of the organization		Employer identification	
Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest inform	ation.	
Department of the Treasury			

Name	of the organization	Employer identification number			
Poi	nt Reyes National Seashore Association		94-2228894		
Ра	rt I Organizations Maintaining Donor Advised Fe	unds or Other Similar Funds or Ac	counts.		
	Complete if the organization answered "Yes" or	Form 990, Part IV, line 6.			
		(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advise	d		
	funds are the organization's property, subject to the organization	ion's exclusive legal control?	••••• Yes 🗌 No		
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that grant funds can be u	sed		
	only for charitable purposes and not for the benefit of the donc	or or donor advisor, or for any other purpos	se		
_	conferring impermissible private benefit?	<u></u>	Yes 🗌 No		
Pa	rt II Conservation Easements.				
	Complete if the organization answered "Yes" o	on Form 990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization				
	Preservation of land for public use (e.g., recreation or edu		n of a historically important land area		
	Protection of natural habitat	Preservatio	n of a certified historic structure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form of a	a conservation		
	easement on the last day of the tax year.		Held at the End of the Tax Ye		
а					
b					
С	Number of conservation easements on a certified historic stru		2c		
d	Number of conservation easements included in (c) acquired a				
	-		2d		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the		
	tax year				
4	Number of states where property subject to conservation ease				
5	Does the organization have a written policy regarding the period				
•	violations, and enforcement of the conservation easements it h				
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	andling of violations, and enforcing conser	vation easements during the year		
_					
7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, and enforcing conservation	on easements during the year		
~					
8	Does each conservation easement reported on line 2(d) abov		n)(4)(B)(I) Yes D No		
•					
9	In Part XIII, describe how the organization reports conservation				
	balance sheet, and include, if applicable, the text of the footnot	te to the organization's financial statement	is that describes the		
Da	organization's accounting for conservation easements. rt III Organizations Maintaining Collections	of Art Historical Trassuras	r Othar Similar Assats		
га	Complete if the organization answered "Yes"		Other Similar Assets.		
1a	If the organization elected, as permitted under FASB ASC 958		ad balance sheet works		
Ia	of art, historical treasures, or other similar assets held for publ	•			
	service, provide, in Part XIII the text of the footnote to its finar				
h	If the organization elected, as permitted under FASB ASC 958				
b	art, historical treasures, or other similar assets held for public				
			המווכב טו משוונ שבו זוכל,		
	provide the following amounts relating to these items:		► ¢		
2	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical trea		gain, provide the		
~	following amounts required to be reported under FASB ASC 9	-	L (*		
а	Revenue included on Form 990, Part VIII, line 1		🕨 🖗		

▶ \$

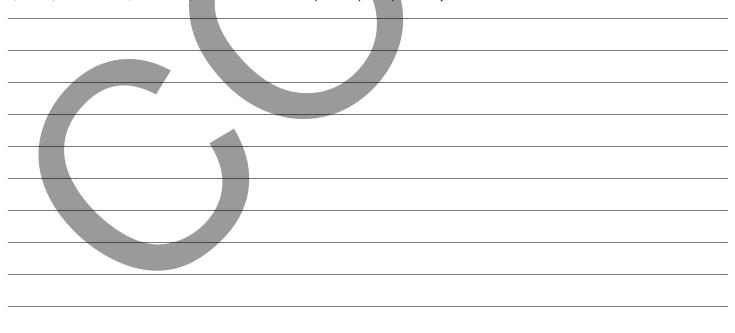
. . . .

Sched	ule D (Form 990) 2019 Point Reyes Nation					94-22288			2 age
Pa	rt III Organizations Maintaining Col	lections of Art, His	storical T	<b>Freasures</b>	, or Ot	her Similar Ass	ets (c	ontin	iued)
3	Using the organization's acquisition, accession, and	d other records, check ar	y of the follo	owing that ma	ake signi	ficant use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan	or exchange	program	S			
b	Scholarly research	е	Other	-	1 0				
c	Preservation for future generations	·							-
4	Provide a description of the organization's collectic	one and availain how thou	further the	orgonization		nurnoso in Port			
-		nis and explain now they		organizations	sevenibi	pulpose in rait			
-									
5	During the year, did the organization solicit or recei	,		,				Г	٦
	assets to be sold to raise funds rather than to be m		organization	's collection?		<u></u>	Ye	s _	No
Pa	t IV Escrow and Custodial Arrange		_						
	Complete if the organization answ	vered "Yes" on Forr	n 990, Pa	art IV, line	9, or re	eported an amou	nt on I	-orm	1
	990, Part X, line 21.								
1a	Is the organization an agent, trustee, custodian or c	other intermediary for cont	ributions or	other assets	s not				
	included on Form 990, Part X?						. 🗌 Ye	s 🗌	No
b	If "Yes," explain the arrangement in Part XIII and c	omplete the following tab	e:						
						Amou	unt		
с	Beginning balance				. 10				
d	Additions during the year								
e									
f	Ending balance				. 1f				
	Did the organization include an amount on Form 99		*		· · · _				
2a	5						∐ Ye	=	No
b	If "Yes," explain the arrangement in Part XIII. Chec	ik here if the explanation	nas been pr	rovided on Pa				• _	<u></u>
ra	rt V Endowment Funds.		- 000 D	MIN Com	10				
	Complete if the organization answ								
			rior year	(c) Two year		(d) Three years back	(e) Fou	-	
1a	Beginning of year balance	416,226 5	40,343	391	,274	376,996		354,	856
b	Contributions	10,000		125	,363				
С	Net investment earnings, gains, and								
	losses	(9,130)	2,182	37	,061	14,278		28,	176
d	Grants or scholarships	11,070						2,	976
е	Other expenditures for facilities and								
	programs	193,083 1	22,960	10	,011				
f	Administrative expenses	2,251	3,339		,344			3.	060
g	End of year balance		16,226		,343	391,274		376,	
2	Provide the estimated percentage of the current year	-	-		7515	5517271		5707	
a	Board designated or quasi-endowment	47.78 %							
		47.70 //							
b	Permanent endowment ► 2.37 %								
С	Term endowment	1.40004							
_	The percentages on lines 2a, 2b, and 2c should eq								
3a	Are there endowment funds not in the possession	of the organization that a	re held and	administered	for the				1
	organization by:							Yes	No
							3a(i)	x	
	(ii) Related organizations		• • • • •				3a(ii)		х
b	If "Yes" on line 3a(ii), are the related organizations	listed as required on Sch	edule R?.				3b		
4	Describe in Part XIII the intended uses of the orga	nization's endowment fur	ıds.						
Pa	rt VI Land, Buildings, and Equipmer	nt.							
	Complete if the organization answ		n 990, Pa	art IV, line	11a. S	ee Form 990, Pa	art X, li	ne 1	0.
	Description of property	(a) Cost or other basis		or other basis		Accumulated	(d) Boo		
		(investment)		other)		epreciation	(1)		
1a	Land		· · ·						
b									
C	Leasehold improvements								
d									
e	Other			159,289		122,894			395
Tota	I. Add lines 1a through 1e. (Column (d) must equa	I Form 990, Part X, colui	nn (B), line	10.c.,)		🕨		36,	395
EEA						Sc	hedule D	Form S	<del>3</del> 90) 2019

Schedule D (Form 9	· •	re Association		94-2228894	Page 3
Part VII	Investments - Other Securities.				
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. Se	ee Form 990, Part X,	, line 12.
	<ul> <li>(a) Description of security or category (including name of security)</li> </ul>	(b) Book value		(c) Method of valuatio Cost or end-of-year market	
(1) Financial de	erivatives				
(2) Closely-held	d equity interests				
(3) Other					
(Ağındowmer	nt and Neubacher Funds	105,692	FMV		
	cate of deposit	5,000	Cost		
(C)					
(D)					
(E)				_	
(F) (G)					
(G) (H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.) ►	110,692			
Part VIII	Investments - Program Related.	110,092			
	Complete if the organization answered "Yes" on For	rm 990, Part IV, lin	e 11c. Se	e Form 990, Part X,	line 13.
	(a) Description of investment	(b) Book value		(c) Method of valuatio	
/42 7 7 7				Cost or end-of-year market	value
(1)Land ne. (2)	ld for National Park Service	1,654,900	Cost		
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col. (B) line 13.)	1,654,900			
Part IX	Other Assets.				
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. Se	e Form 990, Part X,	, line 15.
	(a) Description			(b) Bo	ook value
(1)		-			
(2) (3)					
<u>(4)</u> (5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column	) (b) must equal Form 990, Part X, col. (B) line 15.)			. ►	
Part X	Other Liabilities.				
	Complete if the organization answered "Yes" on Fou line 25.	m 990, Part IV, lin	e 11e or	11f. See Form 990,	Part X,
		value			
1.	(a) Description of liability (b) Book	value			
	(a) Description of liability (b) Book	value			
(1) Federal in					
(1) Federal in (2)					
(1) Federal in (2) (3)					
(1) Federal in (2) (3) (4)					
(1) Federal in (2) (3) (4) (5)					
(1) Federal in (2) (3) (4) (5) (6)					
(1) Federal in (2) (3) (4) (5) (6) (7)					
(1) Federal in (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b)					

Sched	ule D (Form 990) 2019 Point Reyes National Seashore Association	94-2228894	Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	2,185,041
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	7)	
b	Donated services and use of facilities		
С	Recoveries of prior year grants	4	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	(13,737)
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,198,778
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 2,25	1	
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b		2,251
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		2,201,029
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expense	es per Return	I <b>.</b>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	2,274,967
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,274,967
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	1	
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b		2,251
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,277,218
Pa	rt XIII Supplemental Information.		

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



SCHEDULE G	Supplemen	tal Informatio	n Regar	ding Fund	Iraising or Gan	ning Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete				990, Part IV, line 17, Form 990-EZ, line 6		if the	2019
Department of the Treasury Internal Revenue Service	ÞG	► At	tach to Form	990 or Form	990-EZ.			Open to Public Inspection
								ntification number
Point Reyes Natio							94-22	
Part I Fundraisi	ng Activities.	. Complete if th	ne organi	zation ans	wered "Yes" on	Form 99	0, Part IV,	line 17.
		required to com						
1 Indicate whether the	organization raise	ed funds through a	· _	0				
a       Mail solicitations       e       Solicitation of non-government grants         b       Internet and email solicitations       f       Solicitation of government grants								
<b>b</b> Internet and email <b>c</b> Phone solicitation			_		r government grants	6		
d In-person solicitati			g 🗆	Special fullu	raising events			
2a Did the organization		oral agreement w	th any indiv	idual (includir	ng officers, directors	s, trustees,		
or key employees list		-	-		-		□ Y	es 🗌 No
<b>b</b> If "Yes," list the 10 hi	ghest paid individ	uals or entities (fu	ndraisers) p	oursuant to ag	greements under wh	ich the fund	raiser is to b	e
compensated at leas	t \$5,000 by the o	rganization.						
			1			(1) ( 100	unt noid to	
(i) Name and address		(ii) Activity		ndraiser have or control of	(iv) Gross receipts	(or reta	unt paid to ained by)	(vi) Amount paid to (or retained by)
or entity (fundra	iser)	(II) Activity		butions?	from activity		er listed in I. <b>(i)</b>	organization
			Yes	No				
1								·
2								
3								
4								
4								
5								
6								
7								
8								
9								
10								
Total								
3 List all states in which					ions or has been no	tified it is ex	empt from	l
registration or licensin	g.							

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

		gross receipts greater than	\$5,000.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Dinner on PP		None	(add col. <b>(a)</b> through col. <b>(c)</b> )
d)			(event type)	(event type)	(total number)	
Revenue						
eve	1	Gross receipts	376,835			376,835
æ	•					
	2	Less: Contributions	316,885			316,885
	3	Gross income (line 1 minus				
		line 2)	59,950			59,950
	4	Cash prizos				
	4	Cash prizes				
	5	Noncash prizes	34,745			34,745
	3		54,745			54,745
s	6	Rent/facility costs	19,055			19,055
ense	Ŭ		19,035			15,035
xpe	7	Food and beverages	55,904			55,904
сt	•		557501			
Direct Expenses	8	Entertainment	3,000			3,000
	9	Other direct expenses				
	10	Direct expense summary. Add lines	4 through 9 in column (d)			112,704
	11	Net income summary. Subtract line				(52,754)
Pa	rt I					more than
		\$15,000 on Form 990-EZ,	line 6a.		<u>.                                    </u>	
e			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) bingo	bingo/progressive bingo		col. (a) through col. (c))
Rev						
	1	Gross revenue				
	_					
es	2	Cash prizes				
Direct Expenses	•					
Exp	3	Noncash prizes				
ect		Dent/facility costs				
Dire	4	Rent/facility costs				
	5	Other direct expenses				
	-	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No //	□ les /₀	☐ Tes /₀     ☐ No	
	Ţ					
	7	Direct expense summary. Add lines	2 through 5 in column (d)			
	- (					
	8	Net gaming income summary. Sub	tract line 7 from line 1, colur	mn (d)		
9	Er	nter the state(s) in which the organization	tion conducts gaming activi	ties:		
а		the organization licensed to conduct g				Yes 🗌 No
b						
10a	W	ere any of the organization's gaming	licenses revoked, suspende	ed, or terminated during the	e tax year?	🗌 Yes 🗌 No
b	lf '	'Yes," explain:				

SCHEDULE I	1		nts and Other				L	OMB No. 1545-0047		
(Form 990)		Gover	mments, and Ir	ndividuals in	the United Sta	tes		2019		
Department of the Treasury		Complete	if the organization ans	swered "Yes" on For Attach to Form 990.	m 990, Part IV, line 21	or 22.	C	Open to Public		
Internal Revenue Service			► Go to www.irs.g	ov/Form990 for the	latest information.			Inspection		
Name of the organization							Employer identification	tion number		
Point Reyes Nati		Associatio Grants and Assist	tance			_	94-2228894			
		o substantiate the amour		ance, the grantees' eli	aibility for the grants or	assistance, and				
								. 🗴 Yes 🗌 No		
		cedures for monitoring t								
					ts. Complete if the o	organization answered	"Yes" on Form 99	0,		
		ient that received mo				-				
1 (a) Name and addr		(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant		
or gove	rnment		(if applicable)	grant	cash assistance	(book, FMV, appraisal, other)	noncash assistance	or assistance		
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
		nd government organiza listed in the line 1 table			· · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · ·	· · · · · · · · · · ·			

# Schedule | (Form 990) (2019) Point Reyes National Seashore Association

Part III can be duplicated if additiona (a) Type of grant or assistance	(b) Number of	. (c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of noncash assistance
(a) type of grant of assistance	recipients	cash grant	noncash assistance	FMV, appraisal, other)	
Neubacher Fund for Marine Science	6	10,750			
rt IV Supplemental Information. Provide	the information re	equired in Part I. lin	e 2: Part III. colum	n (b): and any other add	litional information.
. Monitoring procedures (Pa	rt I, line	2)			
PRNSA solicits applications. 2. Pro-	logte roui avad	and recommended	by NDC subject	matter exports 3	DDNGA Ford NDG
PRNSA SOTICIUS applications. 2. PIO	Jects reviewed a	and recommended	by MPS Subject	matter experts. 5.	FRNSA IEVIEWS NFS
ommendations and decides on approval	.s. 4. PRNSA pag	ys grant up fro	nt directly to	the applicant. 5. NI	PS works with grantees
logistics, research permits, preser	itations and fin	nal reports or :	published resea	rch articles.	

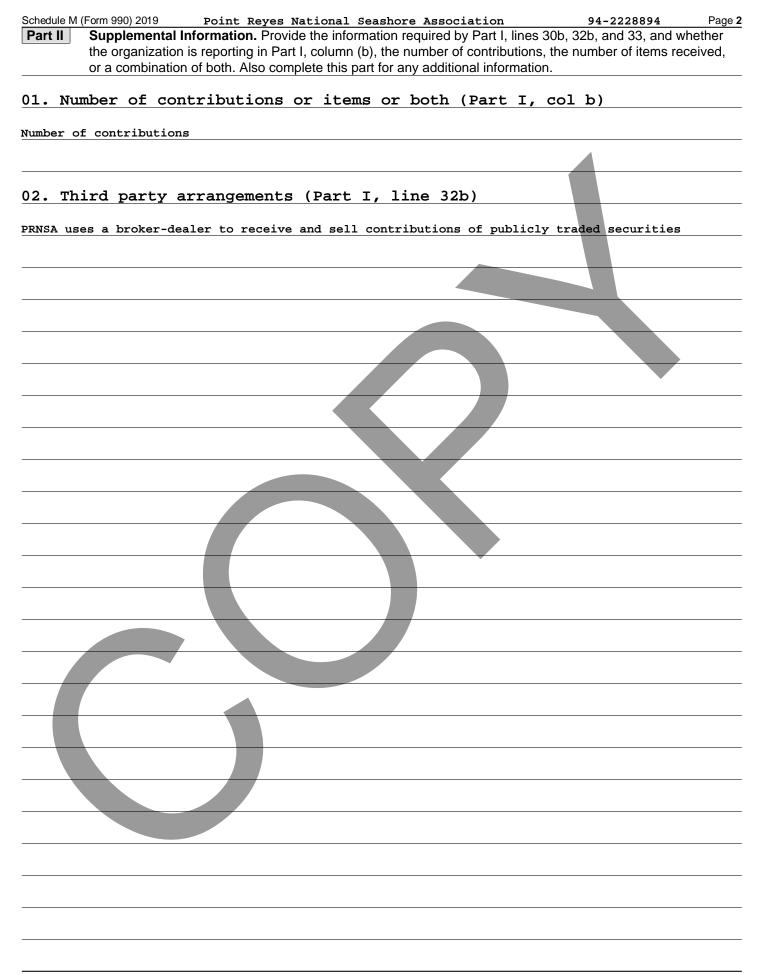
Page 2

94-2228894

(Forr	EDULE M n 990) ent of the Treasury Revenue Service	► At	omplete if th ttach to Forr o to <i>www.ir</i> :	n 990.	OMB No. 1545-0047 2019 Open to Public Inspection				
Name of	the organization						Employer ide	ntificatio	n number
Poin	t Reyes Natio			Associat	ion		94-2228	894	
Part	I Types of	f Prope	erty						
				<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	<b>(c)</b> Noncash contri amounts repor Form 990, Part V	ted on		(d) ethod of determining ish contribution amounts
1	Art - Works of art								
2	Art - Historical trea	sures							
3	Art - Fractional inte	erests							
4	Books and publica	tions .							
5	Clothing and house goods								
6	Cars and other veh								

7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	х	6	28,022	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (Food special ev )	x	55	48,215	Donor FM	v		
26	Other ► ()							
27	Other ► ()							
28	Other ► ( )							
29	Number of Forms 8283 received by the o	organization o	during the tax year for contribut	tions for				
	which the organization completed Form 8	3283, Part IV,	, Donee Acknowledgement		29			
							Yes	No
30a	During the year, did the organization rece							
	28, that it must hold for at least three year			d which isn't required				
	to be used for exempt purposes for the e	-	period?	•••••		30a		х
b	If "Yes," describe the arrangement in Par							
31	Does the organization have a gift accepta	ance policy th	nat requires the review of any n	ionstandard				
			•••••			31		х
32a	Does the organization hire or use third pa	arties or relat	ed organizations to solicit, pro	cess, or sell noncash				
	contributions?		•••••			32a	х	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amoun	it in column (	c) for a type of property for whi	ch column (a) is checked,				
	describe in Part II.							

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



Department of the Treasury

Internal Revenue Service

Name of the organization

# 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. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2019 Open to Public Inspection

Employer identification number

Point Reyes National Seashore Association

94-2228894

# 01. Form 990 governing body review (Part VI, line 11)

Point Reyes National Seashore Association provides an electronic copy of the Form 990 to

all board members for review before filing it.

02. Conflict of interest policy compliance (Part VI, line 12c)

Members of the Board of Directors and the management and staff of Point Reyes National

Seashore Association are required to disclose any conflict of interest immediately.

03. CEO, executive director, top management comp (Part VI, line 15a)

The Board of Directors approves the hiring of the Executive Director and substantiates its

decision in its meeting minutes,

04. Form 990 availability to public (Part VI, line 18)

Point Reyes National Seashore Association makes its Form 990 available on its website.

Other documents are available upon request.

# 05. Governing documents, etc, available to public (Part VI, line 19)

Point Reyes National Seashore Association makes its audited financial statements available

on its website. Other documents are available upon request.

	Statement of Program Service A	ccomplishments	2019 PG01			
Name(s) as shown on return	Name(s) as shown on return					
Point Reyes Nat	94-2228894					
	Form 990-Part III	(a)	Statement #4			
	Statement of Service Acc	complishment	4			
Program Service	e Code					
Program Service	e Expenses	\$0				
Grants and allo	ocations included in above expense	\$0				
Program Service	\$0					
Explanation	L					
restoration, Co	oho salmon conservation, community out	reach programs, inva	asive plant management,			
elephant seal n	monitoring and historic conservation o	f cultural resources	s in the park. In FY20,			
PRNSA funded ov	ver 8,100 hours of natural and cultura	l resource management	nt and protection. From			
long-term inve	ntory and monitoring of threatened and	endangered species	to habit restoration and			
invasive specie	es removal, and historic and cultural	preservation project	ts, our work has never			
been more mean:	ingful. Recreation, Lifelong Learning	and Stewardship: "Ye	ou do you" is a commonly			
heard catchphra	ase these days. PRNSA believes in unit	ing individuals for	common goals while			
allowing each p	park visitor to craft their own experi	ence according to the	heir interests. Our Field			
Institute class	ses and programs create fun and enrich	ing experiences for	people with different			
backgrounds to	explore the natural world and the art	s. This year, we see	rved 889 people with 83			
classes and gu	ided programs on the Natural World, Ar	ts, Photography and	Outdoor Adventure.			
Additionally, o	our Get to the Point program, featurin	g low cost and free	events attracted 273			
youth and adult	ts. This series is designed to encoura	ge families and you	ng adults unfamiliar with			

the natural history of the park to learn and just have fun outside of a traditional class structure. At the heart of all our programs is our desire to invoke a conservation ethic, even if not explicitly stated. We know that people who love the park will understand the need to protect it. And for those wishing to work directly with us, we offered a variety of volunteer opportunities. Like all our in-person programs, the Coronavirus Pandemic resulted in the cancelation of two Field Institute classes and one Get to the Point program in March.