

Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2010**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

A For the 2010 calendar year, or tax year beginning 7/1/10, 2010, and ending 6/30/11, 20

B Check if applicable:
☐ Address change
☐ Name change
☒ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
SAN DIEGO COUNTY PARKS SOCIETY

D Employer identification number
95-3655610

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
P.O. BOX 957

E Telephone number
619-267-7323

City or town, state or country, and ZIP + 4
BONITA, CA 91908

F Group Exemption Number ▶ 501(c)3

G Accounting Method. ☒ Cash ☐ Accrual Other (specify) ▶ _____

H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ WWW.SDCPS.ORG

J Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ _____

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)
Check if the organization used Schedule O to respond to any question in this Part I. ☐

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received	1	13,672.86	18	Excess or (deficit) for the year (Subtract line 17 from line 9)
2	Program service revenue including government fees and contracts	2	0.00	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)
3	Membership dues and assessments	3	735.00	20	Other changes in net assets or fund balances (explain in Schedule O)
4	Investment income	4	1,298.61	21	Net assets or fund balances at end of year. Combine lines 18 through 20
5a	Gross amount from sale of assets other than inventory	5a	0.00		
b	Less: cost or other basis and sales expenses	5b	0.00		
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0.00		
6	Gaming and fundraising events				
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0.00		
b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	16,477.46		
c	Less: direct expenses from gaming and fundraising events	6c	12,298.79		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	3,548.67		
7a	Gross sales of inventory, less returns and allowances	7a	30,233.15		
b	Less: cost of goods sold	7b	25,152.94		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	5,080.21		
8	Other revenue (describe in Schedule O)	8	2,802.66		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	27,138.01		
10	Grants and similar amounts paid (list in Schedule O)	10	43,607.92		
11	Benefits paid to or for members	11	0.00		
12	Salaries, other compensation, and employee benefits	12	0.00		
13	Professional fees and other payments to independent contractors	13	7,650.00		
14	Occupancy, rent, utilities, and maintenance	14	0.00		
15	Printing, publications, postage, and shipping	15	984.17		
16	Other expenses (describe in Schedule O)	16	3,032.14		
17	Total expenses. Add lines 10 through 16	17	55,274.23		
		18	(28,136.22)		
		19	148,725.45		
		20	0.00		
		21	120,589.23		

For Paperwork Reduction Act Notice, see the separate instructions.

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Part II Balance Sheets. (see the instructions for Part II.)

Check if the organization used Schedule O to respond to any question in this Part II ☐

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	148,725.45	22 120,818.71
23	Land and buildings	0	23 0.00
24	Other assets (describe in Schedule O)	0	24 2,802.66
25	Total assets	148,725.45	25 123,621.37
26	Total liabilities (describe in Schedule O)	0	26 3,032.14
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	148,725.45	27 120,589.23

Part III	Statement of Program Service Accomplishments (see the instructions for Part III.)
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Check if the organization used Schedule O to respond to any question in this Part III ☐

What is the organization's primary exempt purpose? Support of San Diego County Parks

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28	See attached.		
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	28a	
29			
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	29a	
30			
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	30a	
31	Other program services (describe in Schedule O)		
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	31a	
32	Total program service expenses (add lines 28a through 31a) ▶	32	

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (see the instructions for Part IV.)

Check if the organization used Schedule O to respond to any question in this Part IV ☐

[illegible]

Part V Other Information (Note the statement requirements in the instructions for Part V.)Check if the organization used Schedule O to respond to any question in this Part V. ☐

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?		NA
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a NA		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b NA		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a NA		
b Gross receipts, included on line 9, for public use of club facilities 39b NA		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		X
41 List the states with which a copy of this return is filed. ▶ NA		
42a The organization's books are in care of ▶ Grace Aspiras Telephone no. ▶ 619-267-7323 Located at ▶ P.O. BOX 957, BONITA, CA ZIP + 4 ▶ 91908-0957		
b 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)?	Yes	No
If "Yes," enter the name of the foreign country: ▶		X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?		X
If "Yes," enter the name of the foreign country: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 NA		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	Yes	No
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		NA
c Did the organization receive any payments for indoor tanning services during the year?		NA
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		NA

	Yes	No
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?		☒
a 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		
45a		☒
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		☒
46		☒

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

	Yes	No
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		☒
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		☒
49a Did the organization make any transfers to an exempt non-charitable related organization?		☒
b If "Yes," was the related organization a section 527 organization?		☒
49b		☒

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000 **0**

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 **0**

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ☒ Yes ☐ No

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

Sign Here	Signature of officer <u>George Hanson</u>		Date <u>9/28/11</u>		
	Type or print name and title <u>GEORGE HANSON PRESIDENT</u>				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	
	Firm's name	Firm's EIN			
	Firm's address	Phone no			

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

Employer identification number

SAN DIEGO COUNTY PARKS SOCIETY

95-3655610

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Other
 - e ☒ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		☒
(ii) A family member of a person described in (i) above?		☒
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		☒
 - h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33¹/₃% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 ¹ / ₃ % or more, check this box and stop here. The organization qualifies as a publicly supported organization		☐
b 33¹/₃% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 ¹ / ₃ % or more, check this box and stop here. The organization qualifies as a publicly supported organization		☐
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		☐
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		☐
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	57,398	31,802	11,229	23,084	14,408	137,921
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	0	0	0	0	0	0
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 Total. Add lines 1 through 5	57,398	31,802	11,229	23,084	14,408	137,921
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						137,921

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	57,398	31,802	11,229	23,084	14,408	137,921
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,806	1,953	1,214	3,109	1,299	11,381
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	3,806	1,953	1,214	3,109	1,299	11,381
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
13 Total support. (Add lines 9, 10c, 11, and 12.)	61,204	33,755	12,443	26,193	15,707	149,302
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	92.4 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	94.8 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	7.6 %
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	5.2 %

- 19a 33 $\frac{1}{3}$ % support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 $\frac{1}{3}$ %, and line 17 is not more than 33 $\frac{1}{3}$ %, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐
- b 33 $\frac{1}{3}$ % support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 $\frac{1}{3}$ %, and line 18 is not more than 33 $\frac{1}{3}$ %, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

Employer identification number

SAN DIEGO COUNTY PARKS SOCIETY

95-3655610

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|--|---|
| a ☐ Mail solicitations | e ☐ Solicitation of non-government grants |
| b ☐ Internet and email solicitations | f ☐ Solicitation of government grants |
| c ☐ Phone solicitations | g ☒ Special fundraising events |
| d ☐ In-person solicitations | |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	1 Gross receipts	SEE ATTACHED.			
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				()
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue	0	0	0	0
Direct Expenses	2 Cash prizes	0	0	0	0
	3 Noncash prizes	0	0	0	0
	4 Rent/facility costs	0	0	0	0
	5 Other direct expenses	0	0	0	0
	6 Volunteer labor	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				(0)
	8 Net gaming income summary. Combine line 1, column d, and line 7 ▶				0

- 9** Enter the state(s) in which the organization operates gaming activities: NA
- a** Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No
- b** If "No," explain: NA
-
- 10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No
- b** If "Yes," explain: NA

- 11** Does the organization operate gaming activities with nonmembers? NA ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? NA ☐ Yes ☒ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|------|
| a The organization's facility | 13a | NA % |
| b An outside facility | 13b | NA % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ NA

Address ▶ NA

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? NA ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party:

Name ▶ NA

Address ▶ NA

16 Gaming manager information:

Name ▶ NA

Gaming manager compensation ▶ \$ NA

Description of services provided ▶ NA

☐ Director/officer

☐ Employee

☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

SAN DIEGO COUNTY PARKS SOCIETY

Employer identification number

95-3655610

SEE ATTACHED.

San Diego County Parks Society

Profit & Loss

June 2011

	<u>Jun 11</u>	<u>Jul '10 - Jun 11</u>
Ordinary Income/Expense		
Income		
Recycling	0 00	20 00
453 · - Trans-County Trail	0.00	25.00
452 · Martha-Jo Rodgers Donations	0.00	75 00
454 · Lakeside Community Center	50.00	50 00
449 · National Trails Day Deposits	500 00	500 00
General Fund - Income	270.00	409 30
447 · San Elijo Gift Shop	314 21	1,966 16
446 · Lakeside/Spring Valley IHWL Don	0.00	550.00
442 · San Elijo Donations	208 07	1,102 79
443 · Los Penasquitos Donations	140.00	1,568 00
439 · 4S Ranch Donations	0 00	1,500 00
437 · Santa Ysabel Donations	0 00	0 00
436 · Potrero Donations	0 00	627.50
435 · Guajome Regional Donations	0 00	2,500 00
434 · Felicita Donations	0 00	600.00
432 · Dos Picos Donations	0 00	538.05
427 · Heise Donations	0 00	265 00
426 · Sweetwater Summit Donations	0 00	350 00
425 · RGA Gift Shop	0 00	2,017.99
424 · Gross Firewood Sales	4,690 00	26,195 00
412 · Wildlife Fund	0 00	25.00
411 · Agua Caliente Donations	0 00	25 00
410 · RGA Donations	0 00	3,221.22
409 · Harville Fund	0 00	0.00
406 · Movies in the Park	5,529 00	7,829 00
403 · RGA Events	2,250 59	7,598 46
423 · Fees	0 00	6 00
Parks Society Board Events	0 00	91.00
County Historian	0 00	819.96
400 · Membership Dues	100.00	735 00
413 · Vending Commissions	0.00	1,053 40
Total Income	<u>14,051 87</u>	<u>62,263 83</u>
 Gross Profit	 14,051 87	 62,263.83
Expense		
560 · San Elijo Expenses/COGS	371 88	1,340 19
2009-10 · California Tax Return	0 00	10.00
559 · Wildlife Fund Expenses	0 00	1,000 00
558 · Santa Ysabel Expenses	0 00	495 00
557 · County Historian Expenses	0 00	2,384.70
6302 · 2010 Firewood Expense/ COGS	2,337 50	16,362 75
556 · Spring Valley Teen Center Expen	0 00	0.00
555 · Lakeside "It's How We Live" Exp	0 00	125 00
554 · San Elijo Expenses	575 00	650 00
549 · Harville Expenses	0 00	100 00
547 · Heise Expenses	0 00	955 87
545 · Rancho Guajome Adobe Expenses	0 00	1,642 94

San Diego County Parks Society

Profit & Loss

June 2011

	<u>Jun 11</u>	<u>Jul '10 - Jun 11</u>
543 · Movies in the Park Expenses	5,042 00	5,353.79
541 · San Dieguito Expenses	2,009 42	6,209.21
537 · Felicita Expenses	0 00	805 62
536 · RGA Expenses/COGS	0 00	7,450 00
534 · Guajome Regional Expenses	0 00	2,568.37
533 · Agua Caliente Expenses	0.00	400 00
532 · Los Penasquitos Expenses	0.00	7,479.43
531 · Dos Picos Expenses	0 00	800 00
529 · AOL	0.00	246 40
237 · SBoE	0 00	2,653.09
530 · Attorney General's Registry of	0 00	25 00
527 · - Costco Renewal Cards	0 00	50.00
General Fund - Expense	519.28	9,044.64
523 · Recreation Rx	0.00	1,399.00
700 · - Independent Contractor	1,300 00	7,650.00
514 · Joseph Cice Fund Exp.	0.00	2,194.35
501 · Office supplies	150 03	526 93
502 · Postage	281 24	457.24
503 · Computer	104 04	348.44
507 · Bank Service Charges	22 00	28 00
508 · Telephone	90 24	631 30
510 · Licenses/Fees	0 00	20 00
511 · Insurance	0 00	1,756 00
Total Expense	<u>12,802 63</u>	<u>83,163 26</u>
Net Ordinary Income	<u>1,249 24</u>	<u>-20,899 43</u>
Net Income	<u><u>1,249.24</u></u>	<u><u>-20,899.43</u></u>

Line 16

	<u>Jul '10 - Jun 11</u>
529 · AOL	246 40
527 · Costco Renewal Cards	50 00
503 · Computer	348.44
508 · Telephone	631 30
511 · Insurance	1,756 00
	<u>3,032.14</u>

Form 990-EZ

Line 6b

Line 6c

Line 6d

	Gross Income - fundraising events	Direct Expenses	Net Income
Movies in the Park	7,829.00	5,353.79	2,475.21
Rancho Guajome Fiestas	7,598.46	7,450.00	148.46
National Trails Day	500.00	0.00	500.00
Lakeside/Spring Valley IHWL	550.00	125.00	425.00
("It's How We Live")	16,477.46	12,928.79	3,548.67

Grants to various San Diego County Parks to stage events ranging from several days to a few hours, from \$75.00 to \$3,000.00. Emphasis is on educational activities and teen centers.

In addition, grants to various San Diego County Parks to purchase amenities not available through county funding, such as signage, special equipment, art restoration, furniture restoration, taxidermy, etc.

Form 990-EZ

	Line 7a Gross Sales	Line 7b Cost of Goods Sold	Line 7c Gross Profit
Gross Firewood Sales	26,195.00	16,362.75	9,832.25
RGA Gift Shop	2,071.99	7,450.00	-5,378.01
San Elijo Gift Shop	1,966.16	1,340.19	625.97
Total	30,233.15	25,152.94	5,080.21

Line 15

Jul '10 - Jun 11

Expense

501 · Office supplies	526 93
502 · Postage	457.24
Total Expense	<u>984 17</u>

Line 16

Jul '10 - Jun 11

529 · AOL	246 40
527 · Costco Renewal Cards	50 00
503 · Computer	348 44
508 · Telephone	631 30
511 · Insurance	1,756 00
	<u>3,032.14</u>

Schedule G			
	Gross Income - fundraising events	Direct Expenses	Net Income
Movies in the Park	7,829.00	5,353.79	2,475.21
Rancho Guajome Fiestas	7,598.46	7,450.00	148.46
National Trails Day	500.00	0.00	500.00
Lakeside/Spring Valley IHWL	550.00	125.00	425.00
("It's How We Live")	16,477.46	12,928.79	3,548.67

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In addition, grants to various San Diego County Parks to purchase amenities not available through county funding, such as signage, special equipment, art restoration, furniture restoration, taxidermy, etc.

Schedule O

4S Ranch Master Association 1099-MISC	1,200.00
General Fund Donations	409.30
Arcadia Publishing Royalties	119.96
Recycling	20.00
Vending Commissions	1,053.40
Total	2,802.66

Schedule O
990 EZ Line 10

Jul '10 - Jun 11

Expense

559 · Wildlife Fund Expenses	1,000.00
558 · Santa Ysabel Expenses	495 00
557 · County Historian Expenses	2,384.70
555 · Lakeside "It's How We Live" Exp	125 00
554 · San Elijo Expenses	650.00
549 · Harville Expenses	100.00
547 · Heise Expenses	955 87
545 · Rancho Guajome Adobe Expenses	1,642 94
543 · Movies in the Park Expenses	5,353 79
541 · San Dieguito Expenses	6,209 21
537 · Felicita Expenses	805 62
534 · Guajome Regional Expenses	2,568.37
533 · Agua Caliente Expenses	400 00
532 · Los Penasquitos Expenses	7,479 43
531 · Dos Picos Expenses	800 00
General Fund - Expense	9,044.64
523 · Recreation Rx	1,399 00
514 · Joseph Cice Fund Exp.	2,194 35
Total Expense	<u>43,607 92</u>

INVESTMENT INCOME 2010 - 11**Morgan Stanley**

First Quarter	July 1 - September 30, 2010	74.26
Second Quarter	October 1 - December 31, 2010	10.20
Third Quarter	January 1 - March 31, 2011	9.56
	April 1, 2011 - April 30, 2011	0.13
	May 1, 2011 - May 31, 2011	0.54
	June 1, 2011 - June 30, 2011	0.60
		95.29

INVESTMENT INCOME 2010 - 11**US Bank**

September 2, 2011	Grace Aspiras called U.S. Bank (800-872-2657). She was told that San Diego County Parks Society made \$1,203.32 for fiscal year 2010-11. Sending out a statement to verify this amount would cost \$6.00 per quarterly statement, and Grace did not want to spend the money on this.	1,203.32
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TOTAL INVESTMENT INCOME**1,298.61**

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COUNTY PARKS SOCIETY

91908-0957



Morgan Stanley Smith Barney LLC. Member SIPC.

Your Financial Advisor

Branch Phone: 800 228 9505

JEFF FINK
401 "B" STREET
SUITE 2300
SAN DIEGO CA 92101
619 238 1226

Website: www.smithbarney.com

Global Markets Inc. Member SIPC.

Last period	This period	%
\$ 65,653.76	\$ 65,728.02	100.00
\$ 65,653.76	\$ 65,728.02	100.00

This period		This year	
Taxable	Non-taxable	Taxable	Non-taxable
\$ 74.26	\$ 0.00	\$ 97.14	\$ 0.00
\$ 74.26	\$ 0.00	\$ 97.14	\$ 0.00

This period	This year
\$ 0.00	

Cash, money fund, bank deposits

This period	This year
Opening balance	\$ 65,653.76
Withdrawals	0.00 (10,000.00)
Money fund earnings reinvested	74.26
Closing balance	\$ 65,728.02

A free credit balance in any securities account may be paid to you on demand.
Although properly accounted for, these funds may be used for business purposes.

Portfolio summary

	This period	This year
Beginning total value (excl. accr. int.)	\$ 65,653.76	\$ 75,630.88
Net security deposits/withdrawals	0.00	0.00
Net cash deposits/withdrawals	0.00	(10,000.00)
Beginning value net of deposits/withdrawals	65,653.76	65,630.88
Total value as of 9/30/2010 (excl. accr. int.)	\$ 65,728.02	\$ 65,728.02
Change in value	\$ 74.26	\$ 97.14



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COUNTY PARKS SOCIETY

91908-0957

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JEFF FINK
401 "B" STREET
SUITE 2300
SAN DIEGO CA 92101
619 238 1226

Website: www.smithbarney.com



ip Global Markets Inc. Member SIPC.

Last period	This period	%
\$ 65,728.02	\$ 65,738.22	100.00
\$ 65,728.02	\$ 65,738.22	100.00

This period		This year	
Taxable	Non-taxable	Taxable	Non-taxable
\$ 10.20	\$ 0.00	\$ 107.34	\$ 0.00
\$ 10.20	\$ 0.00	\$ 107.34	\$ 0.00

This period	This year
\$ 0.00	

Cash, money fund, bank deposits

	This period	This year
Opening balance	\$ 65,728.02	
Withdrawals	0.00	(10,000.00)
Money fund earnings reinvested	10.20	
Closing balance	\$ 65,738.22	

A free credit balance in any securities account may be paid to you on demand.
Although properly accounted for, these funds may be used for business purposes.

Portfolio summary

	This period	This year
Beginning total value (excl. accr. int.)	\$ 65,728.02	\$ 75,630.88
Net security deposits/withdrawals	0.00	0.00
Net cash deposits/withdrawals	0.00	(10,000.00)
Beginning value net of deposits/withdrawals	65,728.02	65,630.88
Total value as of 12/31/2010 (excl. accr. int.)	\$ 65,738.22	\$ 65,738.22
Change in value	\$ 10.20	\$ 107.34



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COUNTY PARKS SOCIETY

31908-0957



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JEFF FINK
401 "B" STREET
SUITE 2300
SAN DIEGO CA 92101
619 238 1226
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Global Markets Inc. Member SIPC.

Last period	This period	%
\$ 65,738.22	\$ 65,747.78	100.00
\$ 65,738.22	\$ 65,747.78	100.00

This period		This year	
Taxable	Non-taxable	Taxable	Non-taxable
\$ 9.56	\$ 0.00	\$ 9.56	\$ 0.00
\$ 9.56	\$ 0.00	\$ 9.56	\$ 0.00

This period	This year
\$ 0.00	

Cash, money fund, bank deposits

This period
Opening balance
\$ 65,738.22
Money fund earnings reinvested
9.56
Closing balance
\$ 65,747.78

A free credit balance in any securities account may be paid to you on demand.
Although properly accounted for, these funds may be used for business purposes.

Portfolio summary

	This period	This year
Beginning total value (excl. accr. int.)	\$ 65,738.22	\$ 65,738.22
Net security deposits/withdrawals	0.00	0.00
Net cash deposits/withdrawals	0.00	0.00
Beginning value net of deposits/withdrawals	65,738.22	65,738.22
Total value as of 3/31/2011 (excl. accr. int.)	\$ 65,747.78	\$ 65,747.78
Change in value	\$ 9.56	\$ 9.56



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COUNTY PARKS SOCIETY

91908-0957



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401 "B" STREET
SUITE 2300
SAN DIEGO CA 92101
619 238 1226
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Global Markets Inc. Member SIPC.

	Last period	This period	%
	\$ 65,747.78	\$ 65,749.93	100.00
	0.00	.02	
	\$ 65,747.78	\$ 65,749.95	100.00
est)	\$ 65,747.78	\$ 65,749.93	

This period		This year	
Taxable	Non-taxable	Taxable	Non-taxable
\$ 2.15	\$ 0.00	\$ 11.71	\$ 0.00
\$ 2.15	\$ 0.00	\$ 11.71	\$ 0.00

	This period	This year
	\$ 0.00	

Cash, money fund, bank deposits	This period
Opening balance	\$ 65,747.78
Money fund earnings credited	2.02
Money fund earnings reinvested	.13
Closing balance	\$ 65,749.93

A free credit balance in any securities account may be paid to you on demand. Although properly accounted for, these funds may be used for business purposes.

Portfolio summary	This period	This year
Beginning total value (excl. accr. int.)	\$ 65,747.78	\$ 65,738.22
Net security deposits/withdrawals	0.00	0.00
Net cash deposits/withdrawals	0.00	0.00
Beginning value net of deposits/withdrawals	65,747.78	65,738.22
Total value as of 4/29/2011 (excl. accr. int.)	\$ 65,749.93	\$ 65,749.93
Change in value	\$ 2.15	\$ 11.71



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COUNTY PARKS SOCIETY

91908-0957



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401 "B" STREET
SUITE 2300
SAN DIEGO CA 92101
619 238 1226
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Branch Phone: 800 228 9505

Global Markets Inc. Member SIPC.

	Last period	This period	%
	\$ 65,749.93	\$ 58,750.47	100.00
	.02	.05	
	\$ 65,749.95	\$ 58,750.53	100.00
est)	\$ 65,749.93	\$ 58,750.47	

This period		This year	
Taxable	Non-taxable	Taxable	Non-taxable
\$.54	\$ 0.00	\$ 12.25	\$ 0.00
\$.54	\$ 0.00	\$ 12.25	\$ 0.00

This period		This year	
\$ 0.00			

Cash, money fund, bank deposits	This period	This year
Opening balance	\$ 65,749.93	
Withdrawals	(7,000.00)	(7,000.00)
Money fund earnings reinvested	.54	
Closing balance	\$ 58,750.47	

A free credit balance in any securities account may be paid to you on demand.
Although properly accounted for, these funds may be used for business purposes

Portfolio summary	This period	This year
Beginning total value (excl. accr. int.)	\$ 65,749.93	\$ 65,738.22
Net security deposits/withdrawals	0.00	0.00
Net cash deposits/withdrawals	(7,000.00)	(7,000.00)
Beginning value net of deposits/withdrawals	58,749.93	58,738.22
Total value as of 5/31/2011 (excl. accr. int.)	\$ 58,750.47	\$ 58,750.47
Change in value	\$.54	\$ 12.25



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COUNTY PARKS SOCIETY

91908-0957



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JEFF FINK

401 "B" STREET

SUITE 2300

SAN DIEGO CA 92101

619 238 1226

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	Last period	This period	%
	\$ 58,750.47	\$ 58,751.07	100.00
	.06	.02	
	\$ 58,750.53	\$ 58,751.09	100.00
rest)	\$ 58,750.47	\$ 58,751.07	

This period		This year	
Taxable	Non-taxable	Taxable	Non-taxable
\$.60	\$ 0.00	\$ 12.85	\$ 0.00
\$.60	\$ 0.00	\$ 12.85	\$ 0.00

	This period	This year
	\$ 0.00	

Cash, money fund, bank deposits

	This period	This year
Opening balance	\$ 58,750.47	
Withdrawals	0.00	(7,000.00)
Money fund earnings reinvested	60	
Closing balance	\$ 58,751.07	

A free credit balance in any securities account may be paid to you on demand.
Although properly accounted for, these funds may be used for business purposes.

Portfolio summary

	This period	This year
Beginning total value (excl. accr. int.)	\$ 58,750.47	\$ 65,738.22
Net security deposits/withdrawals	0.00	0.00
Net cash deposits/withdrawals	0.00	(7,000.00)
Beginning value net of deposits/withdrawals	58,750.47	58,738.22
Total value as of 6/30/2011 (excl. accr. int.)	\$ 58,751.07	\$ 58,751.07
Change in value	\$.60	\$ 12.85

