Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2022

		••	Do not enter social security numbers on this form as	•					
Department of the Treasury Internal Revenue Service			Go to www.irs.gov/Form990 for instructions and th	-	•	Open to Public Inspection			
A For the 2022 calendar year, or tax year beginning OCT 1, 2022 and ending SEP 30, 2023									
B	heck if	C Name of	organization		D Employer identific	cation number			
a									
		ge GREE	NBELT ALLIANCE/PEOPLE FOR OPEN SPAC	CE					
	_chang	ge Doing bi	usiness as and street (or P.O. box if mail is not delivered to street address)	Room/suite	94-1676747 E Telephone number				
	returr								
	Final return/ termin-827BROADWAY310415-543-67								
	ated Amer	nded OAVT	own, state or province, country, and ZIP or foreign postal code AND , CA 94607		G Gross receipts \$	2,899,347.			
	_lreturr ☐Appli		nd address of principal officer: AMANDA BROWN-STEVEN	S	H(a) Is this a group re	? Yes X No			
	_ltion pend		AS C ABOVE	~	H(b) Are all subordinates in				
11	ax-ex	empt status:		r 🗌 527		list. See instructions			
	Vebsi		GREENBELT.ORG		H(c) Group exemption				
KF	orm o	f organization:	X Corporation Trust Association Other	L Year of	of formation: 1958 N	State of legal domicile: CA			
Pa	art I	Summary							
	1		e the organization's mission or most significant activities: GREEN						
nce D		CHAMPIO	N OF THE PLACES THAT MAKE THE BAY A	AREA S	PECIAL. WE	DEFEND			
Governance	2	Check this bo	x if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass				
ove	3	Number of vot	ing members of the governing body (Part VI, line 1a)			16			
	4	Number of ind	ependent voting members of the governing body (Part VI, line 1b)			16			
Activities &	5	Total number	20						
viti	6	Total number	of volunteers (estimate if necessary)		6	51			
<u>k</u> cti	7 a	Total unrelated	d business revenue from Part VIII, column (C), line 12			0.			
<u>م</u>	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	7b	0.				
					Prior Year	Current Year			
Ð	8	Contributions	and grants (Part VIII, line 1h)		1,464,419.	2,072,219.			
nue	9	Program servi	ce revenue (Part VIII, line 2g)		95,443.	219,548.			
Revenue	10	Investment ind	come (Part VIII, column (A), lines 3, 4, and 7d)		108,044.	86,949.			
œ	11	Other revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		313,398.	432,380.			
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,981,304.	2,811,096.			
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.			
ŝ	15		compensation, employee benefits (Part IX, column (A), lines 5-10) \dots		1,529,567.	1,594,864.			
xpenses	16a	Professional fu	undraising fees (Part IX, column (A), line 11e)		0.	0.			
- dx	b	Total fundraisi	ng expenses (Part IX, column (D), line 25) 541,03	0.					
Ш	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		303,538.	484,136.			
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,833,105.	2,079,000.			
	19	Revenue less	expenses. Subtract line 18 from line 12		148,199.	732,096.			
OC OC				Beg	ginning of Current Year	End of Year			
sets alan	20	Total assets (F	Part X, line 16)		4,136,361.	5,401,820.			
Net Assets or Fund Balances	21	Total liabilities	(Part X, line 26)		129,730.	399,713.			
ENe	22	Net assets or	fund balances. Subtract line 21 from line 20		4,006,631.	5,002,107.			
Pa	art II	•							
Und	er pen	alties of perjury,	I declare that I have examined this return, including accompanying schedules	and stateme	nts, and to the best of my	knowledge and belief, it is			
true,	corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of which	ch preparer	has any knowledge.				

Sign	Signature of officer		Date						
Here	AMANDA BROWN-STEVENS, EXE								
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature	Date						
Paid	KEVIN T. WILSON			self-employed P01313212					
Preparer	Firm's name NOVOGRADAC & COMP.	ANY LLP		Firm's EIN 94-3108253					
Use Only	Firm's address 2033 . MAIN STREE								
	WALNUT CREEK, CA		Phone no. 925 - 949 - 4252						
May the IRS discuss this return with the preparer shown above? See instructions									
232001 12-1	EVALUATE THE For Paperwork Reduction Act Notice, see the separate instructions.								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2022) GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 2
Pa	t 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:
	GREENBELT ALLIANCE IS THE CHAMPION OF THE PLACES THAT MAKE THE BAY
	AREA SPECIAL. WE DEFEND NATURAL AND AGRICULTURE LANDSCAPES FROM
	DEVELOPMENT WHILE HELPING CREATE GREAT CITIES AND NEIGHBORHOODS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$500,658. including grants of \$) (Revenue \$17,856.)
	SUCCESSFULLY PROMOTED POLICIES CREATING VIBRANT, ECONOMICALLY AND
	ENVIRONMENTALLY SUSTAINABLE NEIGHBORHOOD AND PROTECTING OPEN SPACES
	THROUGHOUT THE SAN FRANCISCO BAY AREA. KEY ACCOMPLISHMENTS INCLUDE:
	ACCELERATING CLIMATE RESILIENCE: WE'RE DEVELOPING PLANNING GUIDANCE,
	INNOVATIVE POLICY STRATEGIES, AND KEY PARTNERSHIPS THAT WILL BOLSTER
	CAPACITY AND SUPPORT LOCAL AND REGIONAL EFFORTS TO IMPLEMENT EQUITABLE,
	CLIMATE-RESILIENT LAND-USE DECISIONS.
4b	(Code:) (Expenses \$ 364,368. including grants of \$) (Revenue \$ 304,083.)
	SUCCESSFULLY PROMOTED POLICIES CREATING VIBRANT, ECONOMICALLY AND
	ENVIRONMENTALLY SUSTAINABLE NEIGHBORHOODS AND PROTECTING OPEN SPACES
	THROUGHOUT THE SAN FRANCISCO BAY ARE. KEY ACCOMPLISHMENTS INCLUDE:
	CLIMATE RISK RESEARCH: WE'RE PRODUCING ORIGINAL RESEARCH THAT WILL
	GUIDE REGIONAL CONSERVATION AND LAND-USE ADVOCACY, THAT WILL IN TURN
	CREATE POLICIES THAT INCORPORATE CLIMATE RISKS AND ADAPTATION MEASURES,
	WHILE AVOIDING DEVELOPMENT IN HIGH-RISK AREAS.
4.	(Code:) (Expenses \$ 378,356. including grants of \$) (Revenue \$315,755.)
40	(Code:) (Expenses \$378,356. including grants of \$) (Revenue \$)
	ENVIRONMENTALLY SUSTAINABLE NEIGHBORHOODS AND PROTECTING OPEN SPACES
	THROUGHOUT THE SAN FRANCISCO BAY ARE. KEY ACCOMPLISHMENTS INCLUDE:
	INCOOLOGI IND DAW INANCIDED DAI AND. ALI ACCOMPTIBIMENTO INCEGDE.
	CLIMATE SMART DEVELOPMENT: WE'LL PROMOTE EQUITABLE, CLIMATE RESILIENCE
	THROUGH SUSTAINABLE, MIXED, AFFOTABLE, RESILIENT, TRANSIT-ORIENTED
	DEVELOPMENT WITHIN EXISTING URBAN AND SUBURBAN AREAS.
Δd	Other program services (Describe on Schedule O.)
ти	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 1,243,382.
	Form 990 (2022)

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Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 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		X
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	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more 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 reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI 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	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
<i></i>	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	<u>_</u>		v
	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 assistance to			v
<i>.</i>	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 Part IX,			
40	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
~-	complete Schedule G, Part III	19		X X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	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			- v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	

Form 990 (2022) GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 4 Part 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	22		х
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	- 22		- 23
23	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			
2.14	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		
	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			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	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? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to 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? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 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 the Schedule L, Part 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			v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	28c		х
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	200		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
	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 I	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
•	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
1 01	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		100	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

Pai	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 2a 20	-							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
b									
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								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>							
6a									
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b		_					
7	Organizations that may receive deductible contributions under section 170(c).			37					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year	1_							
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		┼───					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g							
g L									
h o	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	8							
9	sponsoring organization have excess business holdings at any time during the year?	0							
э а		9a							
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
a	Initiation fees and capital contributions included on Part VIII, line 12 10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1							
11	Section 501(c)(12) organizations. Enter:	1							
	Gross income from members or shareholders 11a								
	Gross income from other sources. (Do not net amounts due or paid to other sources against	1							
	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							
	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 13b								
с	Enter the amount of reserves on hand 13c								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
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		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
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.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		<u> </u>					
	If "Yes " complete Form 6069								

GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE

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

	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 16			
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	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, 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		Х
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:			
а	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 the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	•		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
	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	Х	
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 on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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 on 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 CA			
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)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other <i>(explain on Schedule O)</i>			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d financ	ial	
	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			
	GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE, INC - 415-543-6771			
	827 BROADWAY, #310, OAKLAND, CA 94607			

Form 990 (2022) GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94–1676747	Page 7						
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated							
Employees, and Independent Contractors							
Check if Schedule O contains a response or note to any line in this Part VII							

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B) (C) Average Position							(D)	(E) Reportable	(F)
Name and title	Average	(do not check more than one				than c		Reportable	Estimated	
	hours per week	box, offic	box, unless person is both an officer and a director/trustee)		compensation from	compensation from related	amount of other			
	(list any	tor						the	organizations	compensation
	hours for	· direc				pa		organization	(W-2/1099-MISC/	from the
	related	tee or	ustee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ll trus	nal tr		loyee	om pi		1099-NEC)		and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(4)	line)	Ind	lns	Off	Key	Hig em	For			
(1) AMANDA BROWN-STEVENS	37.50							145 000	0	0
EXECUTIVE DIRECTOR				X				147,000.	0.	0.
(2) SARAH CARDONA	37.50							100 001	•	•
DEPUTY DIRECTOR						х		137,991.	0.	0.
(3) NORA CULLINEN	37.50							105 0.00		•
DIRECTOR OF MAJOR GIFTS						х		105,362.	0.	0.
(4) ZOE SIEGEL	37.50									-
DIRECTOR OF SPECIAL PROJEC						Х		102,524.	0.	0.
(5) LYNNE DEEGAN MCGRAW	1.00									
BOARD CHAIR, EXECUTIVE COM		Х		Х				0.	0.	0.
(6) ANU NATARAJAN	1.00									
CHAIR, EXECUTIVE COMMITTEE		Х						0.	0.	0.
(7) JON HARVEY	1.00									
VICE CHAIR, EXECUTIVE COMM		Х		Х				0.	0.	0.
(8) ELLIOT EVERS	1.00									
CHAIR, EXECUTIVE COMMITTEE		Х						0.	0.	0.
(9) LAUREL PREVETTI	1.00									
VICE CHAIR, EXECUTIVE COMM		Х						0.	0.	0.
(10) DAN MARKS	1.00									
EXECUTIVE COMMITTEE		Х		Х				0.	0.	0.
(11) CRAIG HARTMAN	1.00									
EXECUTIVE COMMITTEE		Х		Х				0.	0.	0.
(12) JOSH HURWITZ	1.00									
CHAIR, FINANCE COMMITTEE		Х		Х				0.	0.	0.
(13) JOHN GIBBS	1.00									
BOARD MEMBER		Х						0.	Ο.	0.
(14) DOUG JOHNSON	1.00									
BOARD MEMBER		Х						0.	Ο.	0.
(15) ROBERT JOHNSON	1.00									
BOARD MEMBER		Х						0.	Ο.	0.
(16) JAKE MACKENZIE	1.00									
BOARD MEMBER		х						0.	Ο.	0.
(17) DEE SWANHUYSER	1.00									
BOARD MEMBER		х						0.	0.	0.

								OR OPEN SPACE		576'	747	Page 8
Part VII Section A. Officers, Directors, Trus		oloy	ees,	anc	l Hig	ghes	st C	ompensated Employed	s (continued)			
(A) Name and title	(B) Average hours per week	box	not cl , unles	Pos heck i ss per	rson i) than o s both pr/trus	n an	(D) Reportable compensation from	(E) Reportable compensatio from related	n	(F Estim amou oth	ated int of
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MIS 1099-NEC)	s	comper from organiz and re organiz	nsation the zation elated
(18) LANEY THORNTON	1.00											•
BOARD MEMBER	1.00	Х						0.		0.		0.
(19) CORINNE WINTER BOARD MEMBER	1.00	x						0.		0.		0.
(20) HEATHER WOOTEN	1.00											
BOARD MEMBER		х						0.		0.		0.
										_		
1b Subtotal								<u>492,877.</u> 0.		0.		0.
c Total from continuation sheets to Part VI <u>d</u> Total (add lines 1b and 1c)								492,877.		0.		0.
2 Total number of individuals (including but n									000 of reportable			••
compensation from the organization						,			,			4
											Ye	es No
3 Did the organization list any former officer,	-			•	-		Ŭ					
line 1a? If "Yes," complete Schedule J for s											3	<u> </u>
4 For any individual listed on line 1a, is the su and related organizations greater than \$150								-	-		4	x
5 Did any person listed on line 1a receive or a												
rendered to the organization? <i>If "Yes." com</i>	-				-			-			5	Х
Section B. Independent Contractors	-											
1 Complete this table for your five highest con the organization. Report compensation for t	•								, ,	ensat	ion from	
(A) Name and business	address	NC	ONE	2				(B) Description of s	services	С	(C) ompensa	tion
2 Total number of independent contractors (ir		nt lin	niter	t to t	thor	e lie	ted	above) who received m	ore than			
\$100,000 of compensation from the organiz	0			0	(1103 (22376, mis roomod m				

	<u>1 990 (</u>			ALL	IANCE/PE	OPLE FOR OF	PEN SPACE	94-1676	747 Page 9
Pa	rt VII	Statement of Re	venue						
		Check if Schedule O	contains a re	sponse	or note to any lin		(5)	(0)	
							(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
						Total revenue		business revenue	from tax under
									sections 512 - 514
ts s	1 a	Federated campaigns		a					
un.	b			b]			
⊡ on	с	Fundraising events		c		1			
ifts r A	d	Related organizations		d		1			
, G nila	e	• • • • • •		e		1			
Sin	f	All other contributions, gifts,	· · ·	<u> </u>		1			
utio	•	similar amounts not included	-	f 2,	072,219.				
Contributions, Gifts, Grants and Other Similar Amounts	~	Noncash contributions included in		g \$	0,2,219.	-			
no:	y L	—				2,072,219.			
O a	n	Total. Add lines 1a-1f	<u></u>		Business Code	2,012,219.			
	_				541900	125,372.	105 270		
ice	2 a	SERVICE FEES					125,372.		
er v	b	MEMBERSHIP DU		SSE	713990	94,176.	94,176.		
n S ent	С								
Program Service Revenue	d								
rog F	е								
đ	f	All other program service							
	g	Total. Add lines 2a-2f				219,548.			
	3	Investment income (includ	ding dividend	s, intere	est, and				
		other similar amounts)				86,949.			86,949.
	4	Income from investment of	of tax-exempt	bond p	proceeds				
	5	Royalties	· . <u></u>						
			(i) F	Real	(ii) Personal				
	6 a	Gross rents	6a						
	b		6b						
	с	Rental income or (loss)	6c			1			
	d	Net rental income or (loss							
		Gross amount from sales of		urities	(ii) Other				
		assets other than inventory	7a			1			
	h	Less: cost or other basis				1			
e	, N	and sales expenses	7b						
Revenue	~	Gain or (loss)	70 7c			-			
eve			· · · · · · · · · · · · · · · · · · ·						
		Net gain or (loss)							
Other	8 a	Gross income from fundraisi	ng events (not						
0									
		contributions reported on	-		519,317.				
		Part IV, line 18				-			
		Less: direct expenses		····	88,251.	121 066			121 066
		Net income or (loss) from				431,066.			431,066.
	9 a	Gross income from gamin							
		Part IV, line 19							
		Less: direct expenses							
		Net income or (loss) from		ities	T				
	10 a	Gross sales of inventory, I	less returns						
		and allowances			9				
	b	Less: cost of goods sold		10	D				
	с	Net income or (loss) from	sales of inver	ntory .					
(2)					Business Code				
Miscellaneous Revenue	11 a	MISCELLANEOUS	INCOM	Ξ	900099	1,314.	1,314.		
ne	b								
ella	c								
ŝŝ	d	All other revenue							
Σ	e	Total. Add lines 11a-11d			·	1,314.			
	12	Total revenue. See instruction				2,811,096.	220,862.	0.	518,015.

. _

	an E01/a)/2) and E01/a)/4)	lata all activities All all	u overeningtions and the	anlata anti (A)	
Secti	on 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a response	se or note to any line in .	this Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(D) Program service expenses	Management and general expenses	Fundraising 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				
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	339,325.	212,363.	34,557.	92,405.
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	978,614.	612,456.	99,662.	266,496.
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	170,173.	106,501.	17,330.	46,342.
10	Payroll taxes	106,752.	66,810.	10,871.	29,071.
11	Fees for services (nonemployees):	20077020			
	Management				
	Legal				
		66,953.		66,953.	
	Accounting				
	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	183,847.	115,059.	18,723.	50,065.
40	column (A), amount, list line 11g expenses on Sch 0.)	103,04/•		TO''I 772	50,005.
12	Advertising and promotion	66,982.	41,918.	6,822.	18,242.
13	Office expenses	00,902.	41,910.	0,022.	10,442.
14	Information technology				
15	Royalties	78,607.	49,196.	8,005.	21 106
16		12,012.	7,518.	1,223.	<u>21,406.</u> 3,271.
17	Travel	IZ,UIZ•	/,510.	±,443•	3,411.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	28,389.	19 969	2 0 0 1	7 7 1
19	Conferences, conventions, and meetings	40,309.	17,767.	2,891.	7,731.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		C 001		0 11
23	Insurance	9,957.	6,231.	1,015.	2,711.
24	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 0.)	05 206		05 206	^
а	PRESENT VALUE DISCOUNT	25,306.	0.	25,306.	0.
b	EQUIPMENT	6,699.	4,193.	682.	1,824.
С	SERVICES CHARGES AND FE	4,518.	2,828.	460.	1,230.
d	GRANTS (EDUCATIONAL)	866.	542.	88.	236.
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,079,000.	1,243,382.	294,588.	541,030.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2022) GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE
Part IX Statement of Functional Expenses

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GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-	1676747 Page 11
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		Check if Schedule O contains a response or note to any line in this Par	t X			
				(A) Beginning of year		(B) End of year
	Γ.			Beginning of year		End of year
	1	Cash - non-interest-bearing		1,332,356.	1	1 112 961
	2	Savings and temporary cash investments		1,332,330.	2	1,442,861.
Assets	3	Pledges and grants receivable, net			3	537,785.
	4	Accounts receivable, net			4	93,312.
	5	Loans and other receivables from any current or former officer, director				
		trustee, key employee, creator or founder, substantial contributor, or 3	5%			
		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)(E			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use	····· -	20 000	8	05 104
	9	Prepaid expenses and deferred charges		30,727.	9	25,104.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a	0.	0		
		Less: accumulated depreciation 10b		0.	10c	
	11	Investments - publicly traded securities		0 741 400	11	2 010 040
	12	Investments - other securities. See Part IV, line 11	····· -	2,741,496.	12	3,016,646.
	13	Investments - program-related. See Part IV, line 11	E E E E E E E E E E E E E E E E E E E		13	
	14	Intangible assets		21 700	14	006 110
	15	Other assets. See Part IV, line 11	I	31,782.	15	286,112.
	16	Total assets. Add lines 1 through 15 (must equal line 33)		4,136,361.	16	5,401,820.
	17	Accounts payable and accrued expenses		129,730.	17	179,074.
	18	Grants payable			18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities	····· -		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
es	22	Loans and other payables to any current or former officer, director,				
oiliti		trustee, key employee, creator or founder, substantial contributor, or 3	5%			
Liabilities		controlled entity or family member of any of these persons	····· -		22	
	23		····· -		23	
	24	Unsecured notes and loans payable to unrelated third parties	····· -		24	
	25	Other liabilities (including federal income tax, payables to related third				
		parties, and other liabilities not included on lines 17-24). Complete Part	X	0.		220 620
		of Schedule D	·····		25	<u>220,639.</u> 399,713.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X	·····	129,730.	26	535,115.
ŝ						
nce	07	and complete lines 27, 28, 32, and 33.		2,768,416.	07	3 010 679
ala	27	Net assets without donor restrictions	Г	1,238,215.	27	3,010,679. 1,991,428.
Net Assets or Fund Balances	28	Net assets with donor restrictions	H	1,230,213.	28	1,991,420.
		Organizations that do not follow FASB ASC 958, check here	-			
or F	00	and complete lines 29 through 33.			00	
ts or	29	Capital stock or trust principal, or current funds			29	
SSE	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
∍t A	31			4,006,631.	31	5,002,107.
ž	32	Total net assets or fund balances		4,136,361.	32	5,401,820.
	33	Total liabilities and net assets/fund balances		4,100,001.	33	<u> </u>

5,401,820. Form **990** (2022)

Form	n 990 (2022) GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE	94-16	76747	Page 1	12
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	2,811		
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	2,079		
3	Revenue less expenses. Subtract line 2 from line 1	. 3		,096	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,006	-	
5	Net unrealized gains (losses) on investments	5	263	,380	•
6	Donated services and use of facilities	6			_
7	Investment expenses	7			
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0	•
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	5,002	,107	•
Pa	rt XII Financial Statements and Reporting			_	_
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes No	<u> </u>
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 on Sched	ule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>	<u>. </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	/ed 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	x	_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	ate 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	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on S	chedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	X	<u>. </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re	quired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

Department of the Treasury			Public Cha omplete if the organ 494 At Go to www.irs.gov/l	OMB No. 1545-0047 2022 Open to Public Inspection								
Name of	the organizati	on							identification number			
				ANCE/PEOPLE B				9	4-1676747			
Part I	Reason	for Public C	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructior	IS.				
The orgar 1 2 3 4	A church, cor A school des A hospital or	nvention of chi cribed in sect i a cooperative earch organiza	urches, or associatio ion 170(b)(1)(A)(ii). (hospital service orga	For lines 1 through 12, cl n of churches described Attach Schedule E (Form anization described in se njunction with a hospital	in sectio n 990).) ection 170	n 170(b)(1 (b)(1)(A)(ii	i).)(iii). Enter	the hospital's name,			
5	An organizati	on operated fo	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental u	nit describe	ed in			
	section 170(b)(1)(A)(iv). (Complete Part II.)											
6 7 8 9	 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 											
	-	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or			
10 X	university:											
	See section	509(a)(2). (Cor	mplete Part III.)			-						
11 12	An organizati more publicly lines 12a thro	on organized a supported or ugh 12d that o	and operated exclusi ganizations describe describes the type of	vely to test for public saf vely for the benefit of, to d in section 509(a)(1) o f supporting organization	perform the section of and comp	he function 5 09(a)(2) . plete lines	ns of, or to ca See section 12e, 12f, and	509(a)(3). (12g.	Check the box on			
a				upervised, or controlled	• • • •	-						
		•		gularly appoint or elect a	majority o	f the direc	tors or truste	es of the su	ipporting			
b [Type II. A s control or n organization	supporting org nanagement o n(s). You mus	f the supporting organized for the support of the s	or controlled in connect anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported			
-). You must complete F					u ,			
d	 Type III no that is not f requiremen Check this 	n-functionally unctionally int t (see instructi box if the orga	r integrated. A supp egrated. The organiz ions). You must con anization received a v	porting organization oper- ation generally must sati nplete Part IV, Sections written determination from nally integrated supportin	ated in con isfy a distri A and D, m the IRS	nnection w ibution rec and Part that it is a	vith its suppor quirement and V.	an attentiv				
f Ent	er the number (
		••	about the supporte	d organization(s)								
	(i) Name of suppo organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the orga in your governi Yes	nization listed ng document? No	(v) Amount o support (see in		(vi) Amount of other support (see instructions)			
Total							1					

Schedule A (Form 990) 2022 GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 2

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.)

See	ction A. Public Support					_	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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,						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	(0) 2010	(6) 2010	(0) 2020			(i) iotai
8	Gross income from interest,						
0							
	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 VI.)						
11	Total support. Add lines 7 through 10						
12	,					12	
13	First 5 years. If the Form 990 is for the	•			-		
0	organization, check this box and stop						
	ction C. Computation of Publi					T T	
	Public support percentage for 2022 (I		•	(7)		14	%
	Public support percentage from 2021					15	%
16 a	33 1/3% support test - 2022. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	nore, check this b	ox and
	stop here. The organization qualifies	as a publicly supp	orted organizatior	۱ ۱			
b	33 1/3% support test - 2021. If the o	-			d line 15 is 33 1/3%	or more, check t	his box
	and stop here. The organization qual	ifies as a publicly s	supported organiz	ation			
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	ere. Explain in Part	VI how the organ	ization
	meets the facts-and-circumstances te	st. The organizatio	on qualifies as a pu	ublicly supported o	organization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	s 10% or
	more, and if the organization meets the	ne facts-and-circun	nstances test, che	ck this box and s	top here. Explain i	in Part VI how the	
	organization meets the facts-and-circl	umstances test. Th	ne organization qu	alifies as a publicly	y supported organi	zation	
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	nd see instruction	ns

Schedule A (Form 990) 2022

Part II

Schedule A (Form 990) 2022 GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 1185271 2366317. 1771085. 1464419. 2072219. 8859311. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 451,224. 459,028. 479,453. 740,149. 2574599. organization's tax-exempt purpose 444,745. 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 2817541. 2230113. 1943872. 2812368.11433910. 1630016. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 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 n c Add lines 7a and 7b 0 11433910. 8 Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (b) 2019 (d) 2021 (e) 2022 (a) 2018 (c) 2020 (f) Total 9 Amounts from line 6 2817541 2230113. 1943872. 2812368.11433910. 1630016. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 54,730. 77,584. 319,153. 86,949. 582,897. 44,481. and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 54,730. 44,481. 77,584. 319,153. 86,949. 582,897. c Add lines 10a and 10b 11 Net income from unrelated business activities not included on 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.) 1684746. 2862022. 2307697. 2263025. 2899317.12016807. **13** Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 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 95.15 % Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 15 95.16 Public support percentage from 2021 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 4.85 17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 % 4.84 18 Investment income percentage from 2021 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not _____X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization gualifies 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 A (Form 990) 2022

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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 **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited 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.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** 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 in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- **10a** 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 line 10b below.*
 - **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.)

Yes No

1

Schedule A (Form 990) 2022 GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 5 Part IV Supporting Organizations (continued)

				<u> </u>		oonunuo	u)											
																	Yes	No
11	Has the	e organiza	tion acc	epted a g	ift or cor	tribution f	rom any	y of the	e follo	lowing p	ersons	?						
а	A perso	on who dir	ectly or	indirectly	controls	, either ald	one or to	ogether	er with	th perso	ns desc	cribed	on line	s 11b an	d			
	11c be	low, the g	overnin	g body of	a suppor	ted organ	ization?	•								11a		
b	A famil	y member	of a pe	rson desc	ribed on	line 11a a	bove?									11b		
с	A 35%	controlled	entity	of a perso	n describ	ed on line	11a or 1	11b ab	bove?	? If "Ye	es" to lir	ne 11a,	, 11b, c	r 11c, p	rovide			
		p Part VI.														11c		
Sec	tion B	. Type I	Supp	orting C	rganiz	ations												
																	Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>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 officers, directors, or trustees were allocated among the</i>		
	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,		
		2	

Supervised	<i>i. or controlled</i> i	line supporting	i organization.	
Section C. T	ype II Suppo	orting Orga	anizations	

 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
 Image: Control organization is control organization is control or managed
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See	ction D. All Type III Supporting Organizations			
			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			
	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		
3	By reason of the relationship described on line 2, above, 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.

С		The organization supported a g	governmental entity.	Describe in Part VI how	you supported a governmental en	tity (see instruction <u>s).</u>
---	--	--------------------------------	----------------------	-------------------------	---------------------------------	----------------------------------

- 2 Activities Test. Answer lines 2a and 2b 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 on line 2a, above, 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 lines 3a and 3b 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? *If* "Yes" or "*No*" *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.*

3

2a

2b

3a

Yes No

Part V

GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount				Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990) 2022

GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 7

Sche Par		IANCE/PEOPLE F((a)(3) Supporting Orga			4-1676747 Page 7
		(d)(d) oupporting orga		<u>iea)</u>	Current Year
<u>Secu</u>	on D - Distributions	matauraaaa		1	Current rear
2	Amounts paid to supported organizations to accomplish exer Amounts paid to perform activity that directly furthers exemp			- 1	
2	organizations, in excess of income from activity	n purposes or supported		2	
3	Administrative expenses paid to accomplish exempt purpose	2	3		
4	Amounts paid to acquire exempt-use assets		5	4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ıs	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
с	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022 GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE C	CHEDULE C Political Campaign and Lobbying Activities					OMB No. 1545-0047			
(Form 990)									
		f the organization is described b				Open to Public			
Department of the Treasury Internal Revenue Service	-	to www.irs.gov/Form990 for ins				Inspection			
Internal Revenue Service If the organization answ • Section 501(c)(3) org • Section 501(c) (othe • Section 527 organiz If the organization answ • Section 501(c)(3) org • Section 501(c)(3) org If the organization answ Tax) (See separate inst • Section 501(c)(4), (5) Name of organization	wered "Yes," on ganizations: Comp r than section 50 ations: Complete wered "Yes," on ganizations that h ganizations that h wered "Yes," on ructions), then), or (6) organizat	Form 990, Part IV, line 3, or Form plete Parts I-A and B. Do not comp 11(c)(3)) organizations: Complete Part Part I-A only. Form 990, Part IV, line 4, or Form have filed Form 5768 (election und have NOT filed Form 5768 (election Form 990, Part IV, line 5 (Proxy ions: Complete Part III.	m 990-EZ, Part V, line olete Part I-C. arts I-A and C below. m 990-EZ, Part VI, lin er section 501(h)): Col n under section 501(h) Tax) (See separate in E FOR OPEN	e 46 (Political Camp Do not complete Par ne 47 (Lobbying Acti mplete Part II-A. Do n)): Complete Part II-B. nstructions) or Form SPACE	t I-B. vities), tl ot comp Do not c 990-EZ Employ	tivities), then hen lete Part II-B. complete Part II-A. , Part V, line 35c (Proxy er identification number 94–1676747			
Part I-A Compl	ete if the org	anization is exempt under	section 501(c) o	or is a section 52	?/ orga	nization.			
2 Political campaign	activity expendit	ation's direct and indirect political ures gn activities							
Part I-B Compl	ete if the org	anization is exempt under	section 501(c)(3	8).					
		incurred by the organization under			\$				
		incurred by organization managers							
		n 4955 tax, did it file Form 4720 fo							
4a Was a correction m	nade?					Yes No			
b If "Yes," describe in		<u> </u>			044.346				
-		anization is exempt under		-		3).			
		by the filing organization for secti			\$				
		ization's funds contributed to othe	r organizations for see	ction 527					
exempt function ac					\$				
	-	. Add lines 1 and 2. Enter here and			¢				
		1120-POL for this year?				Yes No			
		ployer identification number (EIN)							
made payments. For contributions received	or each organizat ved that were pro	ion listed, enter the amount paid f omptly and directly delivered to a s additional space is needed, provide	rom the filing organiza eparate political orga	ation's funds. Also en nization, such as a se	ter the a	mount of political			
(a) Name	9	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ente	n's c	(e) Amount of political ontributions received and promptly and directly delivered to a separate political organization. If none, enter -0			

Schedule C (Form 990) 2022	GREENB	ELT A	LLIANCE/PEO	PLE FOR OPEN	N SPAC 94-1	676747 Page 2						
section 501(h)).	anization	15 exem	ipt under section		a Form 5700 (ele							
	tion belongs	to an affil	iated group (and list in	Part IV each affiliated	group member's name	, address, EIN,						
expenses, and shar	expenses, and share of excess lobbying expenditures).											
B Check if the filing organiza	tion checked	l box A an	nd "limited control" pro	ovisions apply.								
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)											
1a Total lobbying expenditures to influ	uence public	opinion (c	arassroots lobbving)		64.							
b Total lobbying expenditures to influ	-				822.							
c Total lobbying expenditures (add lir	•				886.							
d Other exempt purpose expenditure					2,166,365.							
e Total exempt purpose expenditures					2,167,251.							
f Lobbying nontaxable amount. Ente					258,363.							
If the amount on line 1e, column (a) o			bying nontaxable am									
Not over \$500,000			the amount on line 1e.									
Over \$500,000 but not over \$1,000	0.000		0 plus 15% of the exce	ess over \$500.000.								
Over \$1,000,000 but not over \$1,50	-		0 plus 10% of the exce									
Over \$1,500,000 but not over \$17,0			0 plus 5% of the exces									
Over \$17,000,000		\$1,000,0										
		<u> </u>										
g Grassroots nontaxable amount (en	ter 25% of lir	ne 1f)			64,591.							
h Subtract line 1g from line 1a. If zero		,			0.							
i Subtract line 1f from line 1c. If zero		0			0.							
j If there is an amount other than zer												
reporting section 4911 tax for this					Γ	Yes No						
			raging Period Under									
(Some organizations the					of the five columns be	low.						
	See t	he separa	ate instructions for lir	nes 2a through 2f.)								
	Lobbyi	ng Exper	ditures During 4-Yea	ar Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 20	19	(b) 2020	(c) 2021	(d) 2022	(e) Total						
2a Lobbying nontaxable amount	236	,405.			258,363.	494,768.						
b Lobbying ceiling amount (150% of line 2a, column(e))						742,152.						
c Total lobbying expenditures	27	,868.			886.	28,754.						
d Grassroots nontaxable amount	59	,101.			64,591.	123,692.						
e Grassroots ceiling amount (150% of line 2d, column (e))						185,538.						
f Grassroots lobbying expenditures	27	,868.			64.	27,932.						

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 GREENBELT ALLIANCE/PEOPLE FOR OPEN SPAC 94-1676747 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(h)).

For e	For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	olobbying activity.	Yes	Νο	Amo	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec	tion		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			4. ¹ a		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."				3, is	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic					
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
	Total					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical				
	expenditures next year?		. 4			
5	Taxable amount of lobbying and political expenditures. See instructions					
Par	t IV Supplemental Information					
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A	, lines 1 a	nd 2 (See		

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D)
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Department of the Treasury Internal Revenue Service

(Form 9	90)
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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. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

	GREENBELT ALLIANCE			94-1676747
Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fu	nds or Acco	ounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 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 v	L writing that the assets held in donor :	dvised funds	
5	are the organization's property, subject to the organization's	-		Yes No
~				
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor o			
Da				
Pa			990, Part IV, Iir	ne 7.
1	Purpose(s) of conservation easements held by the organization	· · · <i>m</i>		
	Preservation of land for public use (for example, recrea	·		cally important land area
	Protection of natural habitat	Preservati	on of a certifie	d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the f	orm of a conse	
	day of the tax year.		_	Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
с	Number of conservation easements on a certified historic stru	ucture included in (a)		2c
d	Number of conservation easements included in (c) acquired a	after July 25,2006, and not on a		
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rel			tion during the tax
	year			
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the per		a of	
	violations, and enforcement of the conservation easements it			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			
-	;,			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing cons	ervation easer	ments during the year
•				nonto danng trio your
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section	170(h)(4)(B)(i)	
Ŭ	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation			
5	balance sheet, and include, if applicable, the text of the footr			
	organization's accounting for conservation easements.			
Pa		Art. Historical Treasures, o	r Other Sim	nilar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 95		ent and balance	ce sheet works
	of art, historical treasures, or other similar assets held for put	· •		
	service, provide in Part XIII the text of the footnote to its finar			
b	If the organization elected, as permitted under FASB ASC 95			beet works of
D	art, historical treasures, or other similar assets held for public			
				i public service,
	provide the following amounts relating to these items:			¢
	(i) Revenue included on Form 990, Part VIII, line 1			
~				
2	If the organization received or held works of art, historical tre		ancial gain, pro	oviae
	the following amounts required to be reported under FASB A	-		
а	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			\$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 09-01-22

Schedule D (Form 990) 2022

3 Using the organization sacquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that app): Public exhibition Provide a description of the organization is collections and explain how they further the organization is exempt purpose in Part XIII. 2 Provide a description of the organization is collections and explain how they further the organization is exempt purpose in Part XIII.	Sche Par		LT ALLIANCE collections of Art				94–16 r Assets			age 2	
a Public exhibition d Cano or exchange program b Scholary research e Other	3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that make s	significant	use of its				
b Scholary research e Other c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, dd the organization is collections and explain how they further the organization is exempt purpose in Part XIII. 6 During the year, dd the organization aclicit or receive donations of art, historical treasures, or other similar assets to to solid to raise funds article at a most of norm 980, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on form 980, Part X, line 21. b If Yes, "explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year f Ending balance d 2,855,972. do ddition soluring the year 100 ther organization include an amount to nForm 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 980, Part X, line 21, for escrow or custodial account liability? do the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes do the regenerity Interministic and the organization answered 'Yes' on Form 980, Part X, line 10. <td< th=""><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></td<>											
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 6 Derint W 7 Pertor M 7 Sector and Cutodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part K. line 9.1. 7 18 19 Is the organization and part, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X. line 21. 19 Is the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X. 10 Thesi's explain the arrangement in Part XIII check here if the explanation has been provided on Part XIII 20 Det for Yes' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII 21 Det the organization include an amount on Form 990, Part X. line 21, for escrow or custodial account liability? 21 Det the organization include an amount on Form 990, Part X. line 21, for escrow or custodial account liability? 22 Do the organization include an amount on Form 990, Part X. 23 Det organization include an amount on Form 990, Part X. 24 Detromeree Turbel S. 25 91 26 Indowment Fundes. 27 3.004, 328. 2.004 128. 2.697, 420. 2.731, 353. 2.740, 655. 3.0	а		d								
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization is collection? Part W Escrow and Custodial Arrangements. Complete if the organization answered "Ves" on Form 980, Part X, line 9, or reported an amount on Form 980, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X? Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X? Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X? Segmining balance Lee and the year Itel Itel	b		e	Other							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets Yes No Part IV Excrow and Custodial Arrangements. Complete if the organization is collection? Yes no Is the organization angement in Part X, line 21. Is the organization angement in Part XII and complete the following table: Yes No b If "Yes," explain the arrangement in Part XII and complete the following table: Amount Id	С										
To be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, fusdee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following table: Amount c Beginning balance Ic Amount c Id Id Id Id d Additions during the year Id Id Id Id 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b If 'Yes', seghian the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Im Im Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. Im Immediation for the part is the comparise table (b) Four years back (c) four years			•	•	•		se in Part	XIII.			
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X (Decempent) Image: Complete the following table: Im										٦	
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? No b If 'Yes,' explain the arrangement in Part XIII and complete the following table: Amount 1d 1d 1d 1d 1d 1d 2d Additions during the year 1d 2d Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. (a) Current year (b) Prior years back. (d) Three years back. 1d 1d	Dor										
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Image: Control of Contor of Control of Control of	Far			ete if the organizatio	n answered "Yes" or	n Form 990), Part IV, I	ine 9, or			
on Form \$90, Part X? Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1d d Additions during the year 1d e Distributions during the year 1d a Distributions during the year 1d e Distributions during the year 1d a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization inswered "Yes" on Form 990, Part X, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10. 1000 no00. 1, 762, 237. t Beginning of year balance (a) Current year< (b) Prove year (c) Prove year (c) Prove years back (c) Prove years back (c) Four years back (c) Prove years back (c) Pr	-					in altrala al					
b If "Yes," explain the arrangement in Part XII and complete the following table:	18							7 ¥22			
c Beginning balance Id d Additions during the year Id e Distributions during the year Id 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Image: Check here if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Check here if the explanation answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance 2, 859, 972. 3, 004, 328. 2, 667, 420. 1, 779, 923. 1, 762, 237. b Contributions 11, 203. 474, 115. 205, 333. 91, 676. c Other expenditures for facilities 139, 520. 264, 636. 157, 207. 297, 836. 73, 990. c Part and programs 139, 520. 264, 636. 157, 207. 2, 779, 923. 1, 779, 923. c Premanet endowment <th>h</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th> ∟</th> <th>l tes</th> <th></th> <th></th>	h						∟	l tes			
c Beginning balance 1c d Additions during the year 1d e Distributions during the year 1d f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial accounti liability? Yes No b If 'ves' explain the arrangement in Part XIII Check here if the explannts arrangement in Part XII Check here if the explannts arrow or custodial accounti liability? Yes No b If 'ves' explain the arrangement in Part XIII Check here if the explannts arrow or custodial account liability? Yes No b If 'ves' explain the arrow or custodial account liability? Yes No b If 'ves' explain the arrow or custodial account liability? Yes No b If 'ves' explain the arrow or custodial account liability? Yes No b If 'ves' on Form 990, Part X, line 21, for escrew or custodial account liability? Yes No b If 'ves' on Form 990, Part X, line 21, for escrew or custodial account liability? Yes No c Artinistrative expenditures for facilities and programs 119, 077. 1, 000, 000, 900, 928. 2, 687, 420. 1, 779, 923. <tr< th=""><th>b</th><th></th><th>and complete the foll</th><th>owing table.</th><th></th><th></th><th></th><th>Amoun</th><th>t</th><th></th></tr<>	b		and complete the foll	owing table.				Amoun	t		
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f Ending balance											
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (e) Four years back (d) Three years back (e) Four years back (e) Fouryears back (e) Four years back (e) F	-										
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Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 2,859,972. 3,004,328. 2,687,420. 1,779,923. 1,762,237. 10 Contributions 119,077. 1,000,000. c Net investment earnings, gains, and losses 10,901. 1,203. 474,115. 205,333. 91,676. and programs 139,520. 264,636. 157,207. 297,836. 73,990. g End of year balance							······]	
Image: (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 2,859,972. 3,004,328. 2,687,420. 1,779,923. 1,762,237. b Contributions 119,077. 1,000,000. - <th>_</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>	_										
b Contributions 119,077. 1,000,000. c Net investment earnings, gains, and losses 10,901. 1,203. 474,115. 205,333. 91,676. d Grants or scholarships			(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Four	years	back	
b Contributions 119,077. 1,000,000. c Net investment earnings, gains, and losses 10,901. 1,203. 474,115. 205,333. 91,676. d Grants or scholarships	1a	Beginning of year balance	2,859,972.	3,004,328.	2,687,420.	1,7	79,923.	1	,762,	237.	
c Net investment earnings, gains, and losses 10,901. 1,203. 474,115. 205,333. 91,676. d Grants or scholarships				119,077.		1,0	1,000,000.				
e Other expenditures for facilities and programs 139,520. 264,636. 157,207. 297,836. 73,990. f Administrative expenses 139,520. 264,636. 157,207. 297,836. 73,990. g End of year balance 2,731,353. 2,740,895. 3,004,328. 2,687,420. 1,779,923. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % % % % c Term endowment % % % % d The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations 3a(i) X ii) Related organizations 3a(ii) X 3a(iii) X 3a(iii) X d Isosofia So i isosofia 3a(ii) X 3a(ii) X d Isosofia So i isosofia isosofia isosofia isosofia d Description of property (a) Cost or other basis (investm			10,901.	1,203.	474,115.	2	205,333.		. 91,6		
and programs 139,520. 264,636. 157,207. 297,836. 73,990. g End of year balance 2,731,353. 2,740,895. 3,004,328. 2,687,420. 1,779,923. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % % % % c Term endowment % % % % designated or quasi-endowment % % % % % designated or quasi-endowment % % % % % % % % % % % % % %	d	Grants or scholarships									
f Administrative expenses 139,520. 264,636. 157,207. 297,836. 73,990. g End of year balance 2,731,353. 2,740,895. 3,004,328. 2,687,420. 1,779,923. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % % % % c Term endowment % % % % d The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organizations 3a(i) X ii) Related organizations 3a(ii) X 3a(ii) X iii) Related organizations iisted as required on Schedule R? 3b 4 e Description of property (a) Cost or other basis (investment basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land	е	Other expenditures for facilities									
g End of year balance 2,731,353. 2,740,895. 3,004,328. 2,687,420. 1,779,923. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % % % c Term endowment % % designated organization by: % % (i) Unrelated organizations % % (ii) Related organizations % % 4 Describe in Part XIII the intended uses of the organization's endowment funds. % Part VI Land, Buildings, and Equipment. % Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. % 1a Land		and programs									
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment% b Permanent endowment% c Term endowment% main percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations	f	Administrative expenses	139,520.	264,636.	157,207.	2	97,836.	73,990		990.	
a Board designated or quasi-endowment% b Permanent endowment% c Term endowment% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:	g	End of year balance	2,731,353.	2,740,895.	3,004,328.	2,6	87,420.	1	,779,	923.	
b Permanent endowment% c Term endowment% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations listed as required on Schedule R? (iii) Land, Buildings, and Equipment. 2 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. 1a Land (a) Cost or other basis (other) (b) Cost con ther basis (other) (c) Accumulated depreciation b Buildings	2	Provide the estimated percentage of the curr	rent year end balance	e (line 1g, column (a)) held as:						
c Term endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (ii) Related organizations (ii) Related organizations (iii) Related orga	а	Board designated or quasi-endowment		_%							
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other	b	Permanent endowment	%								
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organization set (related organization's endowment funds. (iii) Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (c) Accumulated depreciation (d) Book value (e) Cost or other (c) Accumulated (d) Book value (e) Cost or other (f) Book value (g) Cost or other<th>С</th><th>Term endowment</th><th>%</th><th></th><th></th><th></th><th></th><th></th><th></th><th></th>	С	Term endowment	%								
organization by: Yes No (i) Unrelated organizations 3a(i) X (ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3b 3b Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value 0 Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 1a Land 1a 1a Land 1a 6 Buildings 1a Land 1a 1a Land 1a 1a 6 Buildings 1a			•								
(i) Unrelated organizations 3a(i) X (ii) Related organizations 3a(ii) X (iii) Related organizations 3a(ii) X (ii) Related organizations 3a(ii) X (iii) Related organizations 3a(i) X (ii) Related organizations 3a(i) X (iii) Related organizations 3b (iii) Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value basis (investment) basis (other) (c) Accumulated (d) Book value (c) Leasehold improvements (c) Leasehold improvements (c) Leasehold improvements (c) Other (c) Other (c) Other (c) Other	3a		ssion of the organiza	tion that are held ar	nd administered for t	he		ſ	Vee	Na	
(ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land 1a Land 1a Land 1a Land b Buildings 1a Land 1a Land 1a Land c Leasehold improvements 1a Land 1a Land 1a Land		0								NO	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land									<u>^</u>	v	
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	h	(II) Related organizations	tiona listad os raquir	ad on Cohodulo D2						Λ	
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	-							30			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land				wittent funds.							
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land				. Part IV. line 11a. S	ee Form 990. Part X	line 10.					
b Buildings	Description of property (a) Cost or other (b) Cost or other (c) Accumulated (c)						(d) Boo	k valu	e		
b Buildings	1a	Land									
c Leasehold improvements d Equipment e Other											
d Equipment											
e Other											
	<u>Total</u>	. Add lines 1a through 1e. <i>(Column (d) must</i> e	qual Form 990, Part)	X. column (B). line 1	0c.)					0.	

Schedule D (Form 990) 2022

	LLIANCE/PEOPL	E FOR OPEN	SPACE 94	-1676747	Page 3
Part VII Investments - Other Securities.					
Complete if the organization answered "Yes					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or en	d-of-year market \	/alue
(1) Financial derivatives					
(2) Closely held equity interests					
(3) Other					
(A) VANGUARD INVESTMENT	3,014,391.		EAR MARKET		
(B) SECURITIES	2,255.	END-OF-Y	EAR MARKET	VALUE	
(C)					
(D)					
(E)					
(F)					
<u>(G)</u>					
(H)	3,016,646.				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.					
Complete if the organization answered "Yes" (a) Description of investment					
	(b) Book value		aluation: Cost or en	u-oi-year market v	alue
(1) (2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.					
Complete if the organization answered "Yes'	on Form 990, Part IV, line	11d. See Form 990,	Part X, line 15.	-	
) Description			(b) Book va	
(1) DEPOSITS					<u>,624.</u>
(2) RIGHT OF USE				250	,488.
(3)					
(4)					
(5)					
(6)					
(7)					
<u>(8)</u>					
(9)	45.			286	,112.
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	ie 15.)			200	,112.
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f. See Form	n 990 Part X line 25		
(a) Description of lightlity			1000, 1 4117, 1110 20	(b) Book va	alue
(1) Federal income taxes					
(2) LONG TERM LEASE LIABILITY				220	,639.
(3)					/ • • • • •
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 25.)			220	,639.
2. Liability for uncertain tax positions. In Part XIII, provide				•	
organization's liability for uncertain tax positions unde		-		-	I X

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2022 GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE	94-	1676747 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	
	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	3,162,727.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a 263, 380.		
b	Donated services and use of facilities 2b		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.) 2d 88,251.		
е	Add lines 2a through 2d	2e	351,631.
3	Subtract line 2e from line 1	3	2,811,096.
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		
b	Other (Describe in Part XIII.) 4b		-
С	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,811,096.
Pa	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	letur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	2,167,251.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.) 2d 88,251.		00 051
е	Add lines 2a through 2d	2e	88,251.
3	Subtract line 2e from line 1	3	2,079,000.
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 4a		
b	Other (Describe in Part XIII.) 4b		
С	Add lines 4a and 4b	4c	0.
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) t XIII Supplemental Information.	4c 5	0. 2,079,000.

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

PART V, LINE 4:

CONTRIBUTIONS RECEIVED BY DONORS WHO HAVE RESTRICTED THEIR DONATIONS TO
THE PERMANENT ENDOWMENT ARE ADDED TO THE PERMANENT ENDOWMENT FUND AND
FUNDS WILL BE USED AS DESIGNATED BY THE DONORS. IF BEQUESTS ARE NOT
RESTRICTED, THE BOARD HAS A POLICY THAT 75% OF SUCH BEQUESTS WILL BE
DESIGNATED AS QUASI ENDOWMENT FUNDS, WHICH WILL BE USED FOR OPERATIONS AND
OTHER USES AS DESIGNATED BY THE BOARD OF DIRECTORS.

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER INTERNAL

REVENUE CODE SECTION 501(C)(3) AND FROM CALIFORNIA INCOME AND FRANCHISE

TAXES UNDER REVENUE AND TAXATION CODE SECTION 23701(D). IN ADDITION, THE

GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 5 Schedule D (Form 990) 2022 Part XIII Supplemental Information (continued) ORGANIZATION HAS RECEIVED A RULING FROM THE INTERNAL REVENUE SERVICE THAT IT IS NOT A PRIVATE FOUNDATION. THE ORGANIZATION IS REGISTERED WITH THE REGISTRY OF CHARITABLE TRUSTS OF THE OFFICE OF THE ATTORNEY GENERAL OF THE STATE OF CALIFORNIA. THE PREPARATION OF FINANCIAL STATEMENTS IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRES THE ORGANIZATION TO REPORT INFORMATION REGARDING ITS EXPOSURE TO VARIOUS TAX POSITION TAKEN BY THE ORGANIZATION. THE ORGANIZATION HAS DETERMINED WHETHER ANY TAX POSITIONS HAVE MET THE RECOGNITION THRESHOLD AND HAS MEASURED THE ORGANIZATION'S EXPOSURE TO THOSE TAX POSITIONS. MANAGEMENT BELIEVES THAT THE ORGANIZATION HAD ADEQUATELY ADDRESSED ALL RELEVANT TAX POSITIONS AND THAT THERE ARE NO UNRECORDED TAX LIABILITIES. FEDERAL TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO EXAMINE AND AUDIT THE PREVIOUS THREE YEARS OF TAX RETURNS FILED. CALIFORNIA TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO EXAMINE AND AUDIT THE PREVIOUS FOUR YEARS OF TAX RETURNS FILED. ANY INTEREST OR PENALTIES ASSESSED TO THE ORGANIZATION ARE RECORDED IN OPERATING EXPENSES. NO INTEREST OR PENALTIES FROM FEDERAL OR STATE TAX AUTHORITIES WERE RECORDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. PART XI, LINE 2D - OTHER ADJUSTMENTS:

RECLASSIFICATION OF FUNDRAISING EVENTS REVENUE 88,251.

THE AMOUNT IS PRESENTED AS CONTRA REVENUE ON THE TAX RETURN AND AS A

FUNCTIONAL EXPENSE IN THE AUDITED FINANCIAL STATEMENTS

PART XII, LINE 2D - OTHER ADJUSTMENTS: RECLASSIFICATION OF FUNDRAISING EVENTS REVENUE 88,251.

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming	Activi	ties	OMB No. 1545-0047
(Form 990)	Complete if the	2022						
Department of the Treasury	Open to Public							
nternal Revenue Service	Go t	o www.irs.gov/Form990 for instru	ctions	and th	ne latest informatio	on.		Inspection
Name of the organizatio		LT ALLIANCE/PEOPLE	FOI	2 01	PEN SPACE		Employer ide	entification number
Part I Fundrais		Complete if the organization answe				line 17		
	complete this part		fieu f	65 01	1 FOIIII 990, Fait IV,		. FUIII 990-EA	
•	· ·	ed funds through any of the followir	na activ	rities. (Check all that apply	′.		
a 📃 Mail solicita	•		•		overnment grants			
b Internet and	email solicitations	f Solicita	tion of	gover	nment grants			
c Phone solic	itations	g 🔛 Special						
d 📃 In-person so	olicitations							
2 a Did the organization	on have a written o	r oral agreement with any individual	(incluc	ling of	ficers, directors, tru	istees,	or	
key employees list	ted in Form 990, Pa	art VII) or entity in connection with p	rofessi	onal fi	undraising services?	?	Ye	s 🗌 No
b If "Yes," list the 10) highest paid indiv	viduals or entities (fundraisers) pursu	ant to	agreer	ments under which	the fun	draiser is to b	e
compensated at le	east \$5,000 by the	organization.						
			(iii)	Did		(v)	Amount paid	
(i) Name and addres		(ii) Activity		Did aiser ustody	(iv) Gross receipts	i tò (o	r retained by)	(vi) Amount paid to (or retained by)
or entity (fund	draiser)		or con contribu	trol of	from activity		undraiser ed in col. (i)	organization
				No		-		
			Yes					
			-					
			-					
			<u> </u>			_		
			-					
			1					
Total			<u></u>					
3 List all states in wh or licensing.	ich the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notifie	d it is e	exempt from re	egistration

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

Schedule G (Form 990) 2022

GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-1676747 Page 2

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 gross receipts greater than \$5,000.

					i ente man greee reeerp	ie greater triair ¢e,eeer
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			VARIOUS		1	
			(event type)	(event type)	(total number)	- col. (c))
anc						
Revenue	1	Gross receipts	519,317.			519,317.
Å	·					
	2	Less: Contributions				
	-					
	3	Gross income (line 1 minus line 2)	519,317.			519,317.
	4	Cash prizes				
	5	Noncash prizes				
ŝ		•				
Direct Expenses	6	Rent/facility costs				
adx xpe	ľ					
ш К	7	Food and beverages				
lired	l '					
	8	Entertainment				
	9	Other direct expenses				88,251.
	10	Direct expense summary. Add lines 4 through				88,251.
		Net income summary. Subtract line 10 from li				431,066.
Pa	art I					101,0000
		\$15,000 on Form 990-EZ, line 6a.			oportou more than	
		. ,		(b) Pull tabs/instant		(d) Total gaming (add
iue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						
Ве	1	Gross revenue				
	<u> </u>					
	2	Cash prizes				
ses	_					
en:	3	Noncash prizes				
Direct Expenses		Nonoash ph203				
sct	4	Rent/facility costs				
Dir	1					
		Other direct expenses				
	5		Yes %	Yes %	Yes %	
	6	Volunteer labor	No 76	No	No 100	
	0					
	-	Direct eveneses eveneses, Add lines 0 through	E in column (d)			
	7	Direct expense summary. Add lines 2 through				
		Not coming income summary. Subtract line 7	from line 1 column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
•	-					
9		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming a				Yes No
k) I† "	No," explain:				
		.			•	
		ere any of the organization's gaming licenses re			/ear?	Yes No
		ere any of the organization's gaming licenses re Yes," explain:			/ear?	Yes No
					/ear?	Yes No

Sch	edule G (Form 990) 2022	GREENBELT	ALLIANCE/PEOPLE FOR OPEN SPACE 94-1	L676747	Page 3
11	Does the organization conduct ga	aming activities with r	nonmembers?	Yes	No
12	Is the organization a grantor, bene	eficiary or trustee of a	a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?			Yes	No
13	Indicate the percentage of gaming	g activity conducted i	in:		
á	The organization's facility			13a	%
ł	An outside facility			13b	%
14	Enter the name and address of th	e person who prepare	es the organization's gaming/special events books and records:		
	Name				
15a	Does the organization have a con	tract with a third part	y from whom the organization receives gaming revenue?	Les	L No
ł	If "Yes," enter the amount of gam	ing revenue received	by the organization \$ and the amount		
	of gaming revenue retained by the	e third party \$			
C	If "Yes," enter name and address	of the third party:			
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation	\$			
	Description of convisoo provided				
	Description of services provided				
	Director/officer	Employee	Independent contractor		
17	Mandatory distributions:				
á	Is the organization required under	r state law to make ch	naritable distributions from the gaming proceeds to		
				Yes	No No
ł		•	law to be distributed to other exempt organizations or spent in the		
Da	organization's own exempt activit ITTIV Supplemental Infor		ar\$ ie explanations required by Part I, line 2b, columns (iii) and (v); and Pa		0 10
1 6			vide any additional information. See instructions.	π III, lines 9,	90, 100,
	150, 150, 16, and 170, as	s applicable. Also pro-	vide any additional mormation. See instructions.		

Schodulo G	(Earm 000)	GREENBELT	ALLTANCE / PEOPLE	FOR	OPEN	SPACE	94-1676747	Page 4
Part IV	Supplemental Info	prmation (continued	ALLIANCE/PEOPLE	1 010		DIACH	<u>J4</u> 10/0/4/	Faye 4
		(continued	*)					

SCHEDULE O (Form 990)

Department of the Treasury

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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Internal Revenue Service Name of the organization

GREENBELT ALLIANCE/PEOPLE FOR OPEN SPACE 94-167

Employer identification number 94 - 1676747

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

NATURAL AND AGRICULTURE LANDSCAPES FROM DEVELOPMENT WHILE HELPING

CREATE GREAT CITIES AND NEIGHBORHOODS.

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF FORM 990 MUST BE REVIEWED BY STAFF AND APPROVED BY BOARD OF

DIRECTORS/COMMMITTEE.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICT OF INTEREST STATEMENTS ARE REVIEWD ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15:

CHIEF EXECUTIVE OFFICER SALARY IS REVIEWED ANNUALLY THROUGH THE FINANCE

COMMITTEE AND APPROVAL FROM THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY

AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT OVERSEES THE REVIEW OF THE

AUDIT. THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.