

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No. 1545-0047

2000Open to Public
Inspection**A** For the 2000 calendar year, OR tax year period beginning **JUL 1, 2000** and ending **JUN 30, 2001****B** Check if applicable:

- ☐ Change of address
☐ Change of name
☐ Initial return
☐ Final return
☐ Amended return (use also for state reporting)

Please use IRS label or print or type See Specific Instructions

C Name of organization**THEODORE PAYNE FOUNDATION
FOR WILDFLOWERS AND NATIVE PLANTS INC.**

Number and street (or P O box if mail is not delivered to street address)

10459 TUXFORD STREET

City or town, state or country and ZIP

SUN VALLEY, CA 91352**D** Employer identification number**95-6095398****E** Telephone number**(818) 768-1802****F** Check ☐ if application pending**G** Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (insert no) ☐ 527
OR ☐ 4947(a)(1)

(H and I are not applicable to section 527 orgs.)

H(a) Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶**H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No
(If "No," attach a list)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Enter 4-digit group exemption no. (GEN) ▶**J** Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) ▶**K** Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.**L** Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ) ▶ ☐**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received	1a	176,446.	1d	178,446.
	a	Direct public support	1b		2	672.
	b	Indirect public support	1c	2,000.	3	
	c	Government contributions (grants)			4	7,639.
	d	Total (add lines 1a through 1c) (cash \$ 178,446. noncash \$)			5	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			6a	
	3	Membership dues and assessments			6b	
	4	Interest on savings and temporary cash investments			6c	
	5	Dividends and interest from securities			7	
	6	Other investment income (describe)				
Expenses	8	Gross amount from sale of assets other than inventory	(A) Securities	(B) Other	8a	
	a	Gross rents			8b	
	b	Less: rental expenses			8c	
	c	Net rental income or (loss) (subtract line 6b from line 6a)			8d	
	7	Other investment income (describe)				
	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including of contributions reported on line 1a)	9a		9c	
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)				
	10	Gross sales of inventory less returns and allowances	10a	198,524.	10c	66,577.
Net Assets	a	Less: cost of goods sold	10b	131,947.	11	
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		STMT 1	12	253,334.
	11	Other revenue (from Part VII, line 103)			13	63,851.
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			14	88,440.
	13	Program services (from line 44, column (B))			15	1,633.
	14	Management and general (from line 44, column (C))			16	
	15	Fundraising (from line 44, column (D))			17	153,924.
	16	Payments to affiliates (attach schedule)			18	99,410.
	17	Total expenses (add lines 16 and 44, column (A))			19	395,129.
	18	Excess or (deficit) for the year (subtract line 17 from line 12)			20	0.
19	Net assets or fund balances at beginning of year (from line 73, column (A))			21	494,539.	
20	Other changes in net assets or fund balances (attach explanation)					
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)					

023001
12-19-00

LHA For Paperwork Reduction Act Notice, see page 1 of the separate Instructions

Form 990 (2000)

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STATEMENT 2

STMT 1

**THEODORE PAYNE FOUNDATION
FOR WILDFLOWERS AND NATIVE PLANTS INC.**

95-6095398

Page 2

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	cash \$ noncash \$	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25	43,083.	10,771.	32,312.
26	Other salaries and wages	26	51,662.	35,281.	16,381.
27	Pension plan contributions	27			
28	Other employee benefits	28	7,779.	3,781.	3,998.
29	Payroll taxes	29	8,867.	4,625.	4,242.
30	Professional fundraising fees	30			
31	Accounting fees	31	2,297.		2,297.
32	Legal fees	32			
33	Supplies	33	2,783.	88.	2,670.
34	Telephone	34	3,269.		3,269.
35	Postage and shipping	35	1,491.	10.	1,415.
36	Occupancy	36			
37	Equipment rental and maintenance	37	5,177.		5,177.
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions and meetings	40			
41	Interest	41	13.		13.
42	Depreciation, depletion, etc (attach schedule)	42	3,030.	1,315.	1,715.
43	Other expenses (itemize)				
a		43a			
b		43b			
c		43c			
d		43d			
e	SEE STATEMENT 3	43e	24,473.	7,980.	14,951.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15	44	153,924.	63,851.	88,440.
					1,633.

Reporting of Joint Costs Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation?

☐ Yes ☒ No

 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____ (ii) the amount allocated to Program services \$ _____
 (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? ► SEE STATEMENT 4

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
 (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts but optional for others.)

a	SEE STATEMENT 5				
			(Grants and allocations \$)		15,963.
b	OFF SITE EDUCATIONAL PROGRAMS:				
	(1) EXHIBITIONS				
	(2) LECTURES TO OTHER ORGANIZATIONS				
			(Grants and allocations \$)		6,385.
c	SEE STATEMENT 6				
			(Grants and allocations \$)		31,925.
d	HEADQUARTERS AND GROUNDS: (1) DEMONSTRATION GARDENS- GUIDED TOURS, SELF GUIDED TOURS (2) LIBRARY AND MUSEUM (3) BIRD SANCTUARY (4) WILDFLOWER HILL				
			(Grants and allocations \$)		9,578.
e	Other program services (attach schedule)		(Grants and allocations \$)		
f	Total of Program Service Expenses (should equal line 44 column (B), Program services)				63,851.

Part IV Balance Sheets

Note Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	44,757.	45	43,493.
	46 Savings and temporary cash investments	84,322.	46	191,961.
	47 a Accounts receivable	47a 2,993.		
	b Less allowance for doubtful accounts	47b	1,121.	47c 2,993.
	48 a Pledges receivable	48a		48c
	b Less allowance for doubtful accounts	48b		
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		51c
	b Less allowance for doubtful accounts	51b		
	52 Inventories for sale or use	96,580.	52	86,302.
	53 Prepaid expenses and deferred charges	4,963.	53	2,611.
	54 Investments - securities	☐ Cost ☐ FMV	54	
	55 a Investments - land, buildings, and equipment basis	55a		
	b Less accumulated depreciation	55b	55c	
56 Investments - other		56		
57 a Land, buildings, and equipment basis	57a 190,522.			
b Less accumulated depreciation STMT 8	57b 11,942.	179,833.	57c 178,580.	
58 Other assets (describe ☐ SEE STATEMENT 9)		58	4,590.	
59 Total assets (add lines 45 through 58) (must equal line 74)	411,576.	59	510,530.	
Liabilities	60 Accounts payable and accrued expenses	16,091.	60	14,495.
	61 Grants payable		61	
	62 Deferred revenue	356.	62	1,496.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ☐)		65	
	66 Total liabilities (add lines 60 through 65)	16,447.	66	15,991.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☐ and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ☒ and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds	214,703.	70	199,113.
	71 Paid-in or capital surplus, or land, building, and equipment fund	177,082.	71	177,082.
	72 Retained earnings, endowment, accumulated income, or other funds STMT 7	3,344.	72	118,344.
	73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)	395,129.	73	494,539.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	411,576.	74	510,530.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes in Part III, the organization's programs and accomplishments.

N/A	Yes	No
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- 91 The books are in care of ► RHONDA KESS Telephone no ► 818 768-1802
Located at ► 10459 TUXFORD STREET SUN VALLEY, CA ZIP code ► 91352

- 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ☐
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A

Part VII Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a CLASSES/BUS TOURS/MTGS			03	672.	
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	7,639.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					66,577.
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		8,311.	66,577.
105 Total (add line 104, columns (B), (D), and (E))					74,888.

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	SEE STATEMENT 11

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

accompanying schedules and statements, and to the best of my knowledge and belief, it is true, information of which preparer has any knowledge. (Important: See General Instruction W.)

1/12/02 Michael G. Sovch Treasurer

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2000

Name of the organization **THEODORE PAYNE FOUNDATION
FOR WILDFLOWERS AND NATIVE PLANTS INC.**

Employer identification number
95 6095398

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	0	

Part III Statements About Activities

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions.	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.?	3	X
4 a Do you have a section 403(b) annuity plan for your employees?	4a	X
b Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See page 2 of the instructions.)		

SEE STATEMENT 12

Part IV Reason for Non-Private Foundation Status (See pages 2 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5** ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 5.)
- 7** ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **►** _____
- 10** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions - and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

THEODORE PAYNE FOUNDATION

Schedule A (Form 990 or 990-EZ) 2000 **FOR WILDFLOWERS AND NATIVE PLANTS INC.** 95-6095398 Page 3**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.
Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	108,781.	86,375.	93,493.	74,891.	363,540.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose	185,438.	146,767.	162,691.	135,156.	630,052.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	2,760.	975.	1,702.	2,631.	8,068.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
23 Total of lines 15 through 22	296,979.	234,117.	257,886.	212,678.	1,001,660.
24 Line 23 minus line 17	111,541.	87,350.	95,195.	77,522.	371,608.
25 Enter 1% of line 23	2,970.	2,341.	2,579.	2,127.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 7,432.
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts. SEE STATEMENT 13					26b 93,962.
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 371,608.
d Add: Amounts from column (e) for lines 18 8,068. 19 22 93,962.					26d 102,030.
e Public support (line 26c minus line 26d total)					26e 269,578.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 72.5436%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year: (1999) N/A (1998) (1997) (1996)					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (1999) N/A (1998) (1997) (1996)					
c Add: Amounts from column (e) for lines 15 16 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants For an organization described in line 10, 11, or 12, that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See page 5 of the instructions.)

SEE STATEMENT 14

Part V**Private School Questionnaire****(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

N/A

29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

Yes No

29

30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

30

31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?

31

If "Yes," please describe, if "No," please explain (If you need more space attach a separate statement)

32 Does the organization maintain the following

a Records indicating the racial composition of the student body, faculty, and administrative staff?

32a

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

32b

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

32c

d Copies of all material used by the organization or on its behalf to solicit contributions?

32d

If you answered "No" to any of the above, please explain (If you need more space attach a separate statement)

33 Does the organization discriminate by race in any way with respect to

a Students' rights or privileges?

33a

b Admissions policies?

33b

c Employment of faculty or administrative staff?

33c

d Scholarships or other financial assistance?

33d

e Educational policies?

33e

f Use of facilities?

33f

g Athletic programs?

33g

h Other extracurricular activities?

33h

If you answered "Yes" to any of the above, please explain (If you need more space attach a separate statement)

34 a Does the organization receive any financial aid or assistance from a governmental agency?

34a

b Has the organization's right to such aid ever been revoked or suspended?

34b

If you answered "Yes" to either 34a or b, please explain using an attached statement

35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

35

Schedule A (Form 990 or 990-EZ) 2000

Part VI-A Lobbying Expenditures by Electing Public Charities

(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

- Check here ☐ If the organization belongs to an affiliated group
Check here ☐ If you checked "a" above and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500 000 20% of the amount on line 40 Over \$500 000 but not over \$1 000 000 \$100,000 plus 15% of the excess over \$500 000 Over \$1 000 000 but not over \$1 500 000 \$175 000 plus 10% of the excess over \$1 000 000 Over \$1 500 000 but not over \$17 000 000 \$225 000 plus 5% of the excess over \$1 500,000 Over \$17 000 000 \$1 000 000	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	
Caution If there is an amount on either line 43 or line 44, you must file Form 4720			

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 9 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum through the use of

- a Volunteers
b Paid staff or management (include compensation in expenses reported on lines c through h)
c Media advertisements
d Mailings to members, legislators, or the public
e Publications, or published or broadcast statements
f Grants to other organizations for lobbying purposes
g Direct contact with legislators their staffs, government officials, or a legislative body
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
i Total lobbying expenditures (add lines c through h)

Yes	No	Amount
		0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

N/A

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

[illegible]

▶ ☐ Yes ☒ No

N/A

[illegible]

Schedule B
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Supplementary Information for line 1d of Form 990 or
line 1 of Form 990-EZ (see instructions)

OMB No 1545-0047

2000Name of organization **THEODORE PAYNE FOUNDATION
FOR WILDFLOWERS AND NATIVE PLANTS INC.**Employer identification number
95-6095398Organization type (check one)-Section ☒ 501(c)(3) (enter number) ☐ 527 or ☐ 4947(a)(1) nonexempt charitable trust**A Section 501(c)(7), (8), or (10) organizations-**Check this box if the organization had no charitable contributors who contributed more than \$1,000 during the year (But see General rule below) ☐Enter here the total gifts received during the year for a religious, charitable, etc., purpose **\$****Note: This form is generally not open to public inspection except for section 527 organizations.****General Instructions****Purpose of Form**

Schedule B (Form 990 or 990-EZ) is used by organizations required to file Form 990, Return of Organization Exempt From Income Tax, or Form 990-EZ, Short Form Return of Organization Exempt From Income Tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ).

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ. Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization.

Who Must File Schedule B (Form 990 or 990-EZ)

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 990-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ.

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ.

Caution Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ).**Public Inspection**

Schedule B (Form 990 or 990-EZ) is

- Open to public inspection for a section 527 political organization
- Generally not open to public inspection for the other organizations that must file this form

If a non-section 527 organization files a copy of Form 990 or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state unless a schedule of contributors is specifically required by the state. States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ.

See the Instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ).

Contributors Required To Be Listed On Part I**"Contributor"** includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations.**General rule.** Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling \$5,000 or more for the year. Also complete Part II for a noncash contribution. In determining the \$5,000 amount, total all of the contributor's gifts of \$1,000 or more for the year.**Section 501(c)(3) organizations.** For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the Regulations under sections 509(a)(1)/170(b)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))-

List in Part I only those contributors whose contribution of \$5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1.6033-2(a)(2)(iii)(a)).

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990. The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the

greater of \$5,000 or \$14,000 (2% of \$700,000). Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization exceeded \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For *noncharitable* contributions to one of these organizations, list in Part I contributors who gave \$5,000 or more as described in the General rule discussed above.

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))-

List in Part I each contributor whose contributions total more than \$1,000 during the year that were for a religious, charitable, etc., purpose. To determine the \$1,000 aggregate all of a contributor's gifts for the year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that received any charitable contributions and listed any charitable contributors on Part I must also complete Part III.

If section 501(c)(7), (8), or (10) organization received charitable gifts but is not required to list any charitable contributors on Part I, check the box on line A at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

Specific Instructions**Note.** You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.**Part I.** In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year, and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).**Part II.** In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.**Part III.** Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc., purposes, must complete Parts I through III for those persons whose gifts totaled more than \$1,000 during the year. Show also, in the heading of Part III, total gifts that were \$1,000 or less and were for a religious, charitable, etc., purpose. Complete this information only on the first Part III page.

If an amount is set aside for a religious, charitable, etc., purpose, show in column (d) how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

Name of organization

THEODORE PAYNE FOUNDATION
FOR WILDFLOWERS AND NATIVE PLANTS INC.

Employer identification number

95-6095398

Part I Contributors

(a) No	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
4		\$ 100,000.	Individual ☒ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
6		\$ 15,000.	Individual ☒ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
7		\$ 15,000.	Individual ☒ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
8		\$	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
9		\$	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
10		\$	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)

SCHEDULE A	IDENTIFICATION OF EXCESS CONTRIBUTIONS INCLUDED ON PART IV, LINE 26B	STATEMENT 13
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*** NOT OPEN TO PUBLIC INSPECTION ***

CONTRIBUTOR'S NAME	TOTAL CONTRIBUTION	EXCESS CONTRIBUTION
	20,000.	12,568.
	9,290.	1,858.
	42,500.	35,068.
	10,000.	2,568.
	10,000.	2,568.
	9,060.	1,628.
	40,000.	32,568.
	10,000.	2,568.
	10,000.	2,568.
TOTAL EXCESS CONTRIBUTIONS TO SCHEDULE A, LINE 26B		93,962.

SCHEDULE A	IDENTIFICATION OF UNUSUAL GRANTS DESCRIBED ON PART IV, LINE 28	STATEMENT 14
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*** NOT OPEN TO PUBLIC INSPECTION ***

CONTRIBUTOR'S NAME	DESCRIPTION OF GRANT	DATE OF GRANT	AMOUNT
		01/02/01	100,000.
TOTAL UNUSUAL GRANTS			100,000.

Form **4562**Department of the Treasury
Internal Revenue Service (99)**Depreciation and Amortization**
(Including Information on Listed Property) 990

▶ See separate instructions

▶ Attach this form to your return

OMB No 1545-0172

2000Attachment
Sequence No **67**

Name(s) shown on return

Business or activity to which this form relates

Identifying number

THEODORE PAYNE FOUNDATION

FOR WILDFLOWERS AND NATIVE PLANTS INC.

FORM 990 PAGE 2

95-6095398

Part I Election To Expense Certain Tangible Property (Section 179) Note If you have any "listed property," complete Part V before you complete Part I.

- | | | |
|---|---|-----------|
| 1 Maximum dollar limitation. If an enterprise zone business, see instructions | 1 | 20,000. |
| 2 Total cost of section 179 property placed in service. See instructions | 2 | |
| 3 Threshold cost of section 179 property before reduction in limitation | 3 | \$200,000 |
| 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- | 4 | |
| 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions | 5 | |

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

- | | | |
|--|----|--|
| 7 Listed property. Enter amount from line 27 | 7 | |
| 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 Tentative deduction. Enter the smaller of line 5 or line 8 | 9 | |
| 10 Carryover of disallowed deduction from 1999 | 10 | |
| 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 | 11 | |
| 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 | 12 | |
| 13 Carryover of disallowed deduction to 2001. Add lines 9 and 10, less line 12 | 13 | |

Note. Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.**Part II MACRS Depreciation For Assets Placed in Service Only During Your 2000 Tax Year (Do not include listed property.)****Section A - General Asset Account Election**

- 14 If you are making the election under section 168(f)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See instructions. ☐

Section B - General Depreciation System (GDS) (See instructions.)

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
15 a 3 year property						
b 5-year property		1,663.	5 YRS.	HY	200DB	333.
c 7 year property		114.	7 YRS.	HY	200DB	17.
d 10 year property						
e 15 year property						
f 20 year property						
g 25 year property			25 yrs		S/L	
h Residential rental property	/		27 5 yrs	MM	S/L	
	/		27 5 yrs	MM	S/L	
i Nonresidential real property	/		39 yrs	MM	S/L	
	/			MM	S/L	

Section C - Alternative Depreciation System (ADS) (See instructions.)

16 a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year	/		40 yrs	MM	S/L	

Part III Other Depreciation (Do not include listed property.) (See instructions.)

- | | | |
|---|----|--------|
| 17 GDS and ADS deductions for assets placed in service in tax years beginning before 2000 | 17 | 665. |
| 18 Property subject to section 168(f)(1) election | 18 | |
| 19 ACRS and other depreciation | 19 | 2,015. |

Part IV Summary (See instructions.)

- | | | |
|---|----|--------|
| 20 Listed property. Enter amount from line 26 | 20 | |
| 21 Total. Add deductions from line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter here and on the appropriate lines of your return. Partnerships and S corporations see instructions | 21 | 3,030. |
| 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs | 22 | |

LHA For Paperwork Reduction Act Notice, see the separate instructions

Form 4562 (2000)

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 23a, 23b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution See instructions for limits for passenger automobiles)

23a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **23b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

24 Property used more than 50% in a qualified business use

		%						
		%						
		%						

25 Property used 50% or less in a qualified business use

		%				S/L -		
		%				S/L -		
		%				S/L		

26 Add amounts in column (h) Enter the total here and on line 20, page 1

26

27 Add amounts in column (i) Enter the total here and on line 7, page 1

27

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
28 Total business/investment miles driven during the year (DO NOT include commuting miles)						
29 Total commuting miles driven during the year						
30 Total other personal (noncommuting) miles driven						
31 Total miles driven during the year Add lines 28 through 30						
	Yes	No	Yes	No	Yes	No
32 Was the vehicle available for personal use during off-duty hours?						
33 Was the vehicle used primarily by a more than 5% owner or related person?						
34 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons

	Yes	No
35 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
36 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See instructions for vehicles used by corporate officers, directors, or 1% or more owners		
37 Do you treat all use of vehicles by employees as personal use?		
38 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
39 Do you meet the requirements concerning qualified automobile demonstration use?		

Note If your answer to 35, 36, 37, 38, or 39 is "Yes," you need not complete Section B for the covered vehicles

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
40 Amortization of costs that begins during your 2000 tax year					
41 Amortization of costs that began before 2000					
42 Total Add amounts in column (f) See instructions for where to report					

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
11	LAND	VARIESL				104,628.			104,628.			0.
12	BUILDINGS	VARIESL		.000	19	37,705.			37,705.			0.
13	PAINTINGS	VARIESL		.000	19	2,716.			2,716.			0.
14	IRRIGATION SYSTEM	VARIESL		.000	19	8,865.			8,865.			0.
15	LIBRARY	VARIESL		.000	19	642.			642.			0.
16	EQUIPMENT	VARIESL		.000	19	12,211.			12,211.			0.
* 990 PAGE 2 TOTAL OTHER						166,767.		0.	166,767.	0.	0.	0.
PROGRAM SERVICES												
1	IRRIGATION SYSTEM	062594SL		7.00	19	4,193.			4,193.	3,594.		599.
3	NURSERY IMPROVEMENTS	030197SL		7.00	17	2,399.			2,399.	1,158.		343.
4	EQUIPMENT	060197SL		5.00	17	1,610.			1,610.	1,006.		322.
10	LIBRARY	053199SL		7.00	19	237.			237.	34.		34.
18	LIBRARY	022801200DB		7.00	15C	114.			114.			17.
* 990 PAGE 2 TOTAL						8,553.		0.	8,553.	5,792.	0.	1,315.
PROGRAM SERVICES												
MANAGEMENT AND GENERAL												
2	BUILDING IMPROVEMENTS	022394SL		31.00	19	5,000.			5,000.	1,011.		161.
5	EQUIPMENT	120197SL		7.00	19	3,135.			3,135.	738.		448.
6	IMPROVEMENTS	120197SL		7.00	19	1,264.			1,264.	321.		181.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
7	EQUIPMENT	010199	SL	7.00	19	2,358.			2,358.	850.		337.
8	EQUIPMENT	080699	SL	7.00	19	389.			389.	51.		56.
9	IMPROVEMENTS	100199	SL	7.00	19	1,393.			1,393.	149.		199.
17	COMPUTER	013101	200DB	5.00	15B	1,663.			1,663.			333.
	* 990 PAGE 2 TOTAL					15,202.		0.	15,202.	3,120.	0.	1,715.
	MANAGEMENT AND GENERAL					190,522.		0.	190,522.	8,912.	0.	3,030.
	* GRAND TOTAL 990 PAGE 2											
	DEPR											

FORM 990

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 10

STATEMENT 1

INCOME

1. GROSS RECEIPTS	198,524	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		198,524
4. COST OF GOODS SOLD (LINE 13)	131,947	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		66,577

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	96,580	
7. MERCHANDISE PURCHASED	42,107	
8. COST OF LABOR	56,867	
9. MATERIALS AND SUPPLIES	7,849	
10. OTHER COSTS	14,846	
11. ADD LINES 6 THROUGH 10		218,249
12. INVENTORY AT END OF YEAR	86,302	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12)		131,947

FORM 990	COST OF GOODS SOLD - OTHER COSTS	STATEMENT	2
DESCRIPTION	AMOUNT		
PAYROLL TAXES	4,993.		
REPAIR & MAINTENANCE	279.		
BANK CHARGES	2,584.		
SALES EXPENSE	831.		
LICENSES & PERMITS	25.		
TRASH DISPOSAL	1,176.		
TRAVEL/MILEAGE	155.		
TRUCK EXPENSE	134.		
INSURANCE	4,669.		
TOTAL INCLUDED ON FORM 990, PART I, LINE 10B	14,846.		

FORM 990	OTHER EXPENSES			STATEMENT	3
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
BANK CHARGES	39.		39.		
INSURANCE	2,867.		2,867.		
TAXES AND LICENSES	3,337.		3,337.		
PAYROLL SERVICE	1,289.	877.	412.		
UTILITIES	3,685.		3,685.		
ADVERTISING	1,230.	1,230.			
PHOTO COPY	1,474.	36.	1,438.		
MEMBERSHIP & DUES	901.		503.		398.
MISCELLANEOUS	30.		30.		
NEWSLETTERS	5,147.	4,553.	594.		
EDUCATION TRAINING	100.		100.		
WEB PAGE	531.	531.			
BOARD MATTERS	671.		671.		
CONSULTANTS	25.		25.		
PROMOTION	487.		487.		
EDUCATION PROGRAMS	25.	25.			
WILDFLOWER HOTLINE	443.	443.			
FUND DEVELOPMENT	1,144.				1,144.
VOLUNTEER SERVICES	285.	285.			
JANITORIAL SERVICES	265.		265.		
LICENSES & PERMITS	280.		280.		
PENALTIES	218.		218.		
TOTAL TO FM 990, LN 43	24,473.	7,980.	14,951.	1,542.	

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT	4
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EXPLANATION

TO PROMOTE CONSERVATION OF CALIFORNIA NATIVE PLANTS THROUGH PROPAGATION AND EDUCATION.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	5
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DESCRIPTION OF PROGRAM SERVICE ONE

IN HOUSE EDUCATIONAL PROGRAMS: (1) WILDFLOWER HOTLINE (6000 TELEPHONE CALLS + WEBSITE HITS) ON BLOOMINGS IN SO. CAL.
(2) 3 NEWSLETTERS-7,500 DISTRIBUTED (3) POPPY DAY OPEN HOUSE
(4) TOURS OF GROUNDS (5) CLASSES, SEMINARS, FALL FESTIVAL

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		15,963.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	6
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DESCRIPTION OF PROGRAM SERVICE THREE

NATIVE PLANT HORTICULTURE AND CONSERVATION CENTER: (1)
 BOOKSTORE (2) NURSERY AND SEED SOURCE FOR NATIVE PLANTS
 (3) IN HOUSE PAMPHLETS (4) CONSULTATIONS TO OTHER
 ORGANIZATIONS (5) PROPAGATION (6) NURSERY EDUC. MATERIALS

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE C		31,925.

FORM 990	OTHER FUNDS	STATEMENT	7
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DESCRIPTION	(A) BEGINNING OF YEAR	(B) END OF YEAR
LIBRARY AND PAINTINGS	3,344.	3,344.
ENDOWMENT FUND		100,000.
MEAD FOUNDATION GIFT FOR HORTICULTURAL/NURSERY PROGRAMS		15,000.
TOTAL INCLUDED ON FORM 990, LINE 72	3,344.	118,344.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	8
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
IRRIGATION SYSTEM	4,193.	4,193.	0.
BUILDING IMPROVEMENTS	5,000.	1,172.	3,828.
NURSERY IMPROVEMENTS	2,399.	1,501.	898.
EQUIPMENT	1,610.	1,328.	282.
EQUIPMENT	3,135.	1,186.	1,949.
IMPROVEMENTS	1,264.	502.	762.
EQUIPMENT	2,358.	1,187.	1,171.
EQUIPMENT	389.	107.	282.
IMPROVEMENTS	1,393.	348.	1,045.
LIBRARY	237.	68.	169.
LAND	104,628.	0.	104,628.
BUILDINGS	37,705.	0.	37,705.
PAINTINGS	2,716.	0.	2,716.
IRRIGATION SYSTEM	8,865.	0.	8,865.

THEODORE PAYNE FOUNDATION FOR WILDFLOWER

95-6095398

LIBRARY	642.	0.	642.
EQUIPMENT	12,211.	0.	12,211.
COMPUTER	1,663.	333.	1,330.
LIBRARY	114.	17.	97.
TOTAL TO FORM 990, PART IV, LN 57	190,522.	11,942.	178,580.

FORM 990	OTHER ASSETS	STATEMENT	9
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DESCRIPTION	AMOUNT
PROPAGATION HOUSE-CONSTRUCTION IN PROGRESS	4,590.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	4,590.

FORM 990	PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES	STATEMENT	10
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ANTHONY LA FETRA 10459 TUXFORD STREET SUN VALLEY, CA 91352	DIRECTOR 30 MINUTES	0.	0.	0.
DOUG PATERSON 10459 TUXFORD STREET SUN VALLEY, CA 91352	DIRECTOR 30 MINUTES	0.	0.	0.
JENNIFER M MOK 10459 TUXFORD STREET SUN VALLEY, CA 91352	PRESIDENT 1.5 HOURS	0.	0.	0.
ELLEN MACKEY 10459 TUXFORD STREET SUN VALLEY, CA 91352	VICE PRESIDENT 30 MINUTES	0.	0.	0.
ELIZABETH SCHWARTZ 10459 TUXFORD STREET SUN VALLEY, CA 91352	EXECUTIVE DIRECTOR 40 HOURS	43,083.	0.	0.
ROBERT J. CERNY 10459 TUXFORD STREET SUN VALLEY, CA 91352	SECRETARY 1 HOUR	0.	0.	0.

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BRIAN FLYNN 10459 TUXFORD STREET SUN VALLEY, CA 91352	DIRECTOR 30 MINUTES	0.	0.	0.
MADELEINE LANDRY 10459 TUXFORD STREET SUN VALLEY, CA 91352	DIRECTOR 30 MINUTES	0.	0.	0.
RAND PLEWAK 10459 TUXFORD STREET SUN VALLEY, CA 91352	DIRECTOR 30 MINUTES	0.	0.	0.
MICHAEL SOVICH 10459 TUXFORD STREET SUN VALLEY, CA 91352	TREASURER 3.5 HOURS	0.	0.	0.
MELANIE WINTER 10459 TUXFORD STREET SUN VALLEY, CA 91352	DIRECTOR 30 MINUTES	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		43,083.	0.	0.

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO STATEMENT 11
ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES

102 THE PRIMARY GOAL OF THE PAYNE FOUNDATION IS TO PROMOTE CONSERVATION OF CALIFORNIA NATIVE PLANTS. THE NURSERY PROPAGATES SEVERAL HUNDRED NATIVE PLANT VARIETIES, INCLUDING RARE AND ENDANGERED SPECIES. THE BOOKSTORE STOCKS TITLES ON HORTICULTURE, BOTANY, NATURAL HISTORY AND LANDSCAPING, ESPECIALLY XERISCAPING. SPECIALTY SEED MIXES HAVE BEEN DEVELOPED BY THE FOUNDATION, AS WELL AS INDIVIDUAL PLANT SPECIES. BOOKS/SEEDS ARE SOLD ON SITE AND BY MAIL. CUSTOMERS INCLUDE GENERAL PUBLIC, LANDSCAPERS, NURSERIES, SCHOOLS AND GOVERNMENT AGENCIES.

SCHEDULE A STATEMENT REGARDING ACTIVITIES WITH DIRECTORS, STATEMENT 12
TRUSTEES, PRINCIPAL OFFICERS OR CREATOR
PART III, LINE 2

LINE 2 D: SEE PART V, FORM 990.