Short Form Return of Organization Exempt From Income Tax

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

For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

OMB No 1545 1150

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	Fort	ne 2002 calendar year, or tax year beginning , 2002, and	ending		,	
В	Check	f applicable C		D Em	ployer Id	lentification number
[.	Addres	s change Please CALIFORNIA NATIVE GRASS ASSOCIATION	68-0239825			
	Name	thange label or P O BOX 72405	_	phone n		
	Initial	elum DAVIS. CA 95617-6405	(530) 753-6802			
	Final r	labacine i	1.	,50,	733 0002	
<u> </u>	=	ed return Instruc- tions		-		- 1 (OEND -
1		tion pending	<u> </u>			igit (GEN) >
_		Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).	G Accounting Other (spec	ıfy) ►		
			H Check ► [anization is not
ı		site > N/A	_	attach ogn pe	Sched	lule B (Form 990,
<u> </u>		zation type (check only one) — X 501(c) (3) ◄ (insert no) 4947(a)(1) or 527				
K		k \(\bigcup \left\) if the organization's gross receipts are normally not more than \$25,000. The organization received a Form 990 Package in the mail, it should file a return wollete return.				
ī	Add	ines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file	Form 990			50.005
		ad of Form 990 EZ			▶\$	68,026.
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balar	1Ces (See Instruc	tions)		0.110
	1	Contributions, gifts, grants, and similar amounts received		}	1	9,110
	2	Program service revenue including government fees and contracts		}	2	39,140 16,457
	3	Membership dues and assessments		}	4	10,437
	4 5	Investment income Gross amount from sale of assets other than inventory 5a	.1	}	 - -	
		Gross amount from sale of assets other than inventory Less cost or other basis and sales expenses 58				
		Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	<u> </u>		5c	
į	6	Special events and activities (attach schedule)		 		
, , , ,	il ".	Gross revenue (not including \$ 2,110 of contributions				
į	i °	reported on line 1)	3,1	25		
		Less direct expenses other than fundraising expenses 68				
Ö		Net income or (loss) from special events and activities (line 6a less line 6b)			6 c	323
≱		Gross sales of inventory, less returns and allowances 7a	1	_ }		
₹	•	Less cost of goods sold 71				
SCANNED		Gross profit or (loss) from sales of inventory (line 7a less line 7b)	<u> </u>	\neg	7 c	
D	8	Other revenue (describe > SEE STATEMENT 2		\	8	123
~	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8).		-′ _▶ ⊦	9	65,164
APR					10	05,104
	10	Grants and similar amounts paid (attach schedule)			11	
8	11	Benefits paid to or for members Salaries, other compensation, and employee benefits)-	12	
12	12	Professional fees and other payments to independent contractors		-	13	1,315
2003	۱	Occupancy, rent, utilities, and maintenance EIVED		<u>, </u>	14	1,836
_	15	Printing, publications, postage, and shipping) -	15	18,500
5	16	Printing, publications, postage, and shipping Other expenses (describe > SEE STATEMENT 3		-	16	91,215
	17	Total expenses (add lines 10 maugh 168 1 3 2003 19		· >-	17	112,866.
_	18	Europe or (defeat) for the word (ide Q logs line 17)			18	-47,702
Ñ	§ 19	Net assets or fund balances at beginning a Dear (orph-line 27, column (A)) (must figure reported on prior year's return).	agree with end of	year	19	63,073.
N E T	S E 20	Other changes in net assets or fund balances (attach explanation). SEE	STATEMENT 4	ŀ	20	2,497
	T 20 S 21	Net assets or fund balances at end of year (combine lines 18 through 20)	SIMILIMINI 4	▶	21	17,868
	art II	Balance Sheets — If Total assets on line 25, column (B) are \$250,000 or mo	ore file Form 990 i			
<u>I.</u>	artii	(See Instructions)	(A) Beginning			(B) End of year
2	2 Ca:	h, savings, and investments		864	22	9,307.
		d and buildings			23	<u> </u>
		er assets (describe SEE STATEMENT 5	9.	333	24	8,560
	25 Total assets 66, 197.					17,867
_		al liabilities (describe - SEE STATEMENT 6)		124	26	0
		assets or fund balances (line 27 of column (B) must agree with line 21)		073	27	17,868.

Part III Statement of Program Service Accomplishments (see Instructions) Responses With the department prumpt seems provided, the Interference of Program Service (see Instructions) Part IV List of Microsoft (see Instructions) SEE STATEMENT 8 O. O Sombition On Journal of State of Interference of	Form	990 EZ (2002) CALIFORNIA NATI	VE GRASS ASSOCIATI	ON	68	- <u>02</u> 3	3 <u>9825</u>	P	age 2
Describe what was achieved in carrying out the organizations seared purposes. In a clear and corcise manner. 229 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 230 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 240 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 251 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 252 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 253 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 254 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 255 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 266 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 275 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 276 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 277 MORKSHOPS: PRESENTATION OF BURN RESTORATION AND OTHER TOPICAL 278 MORKSHOPS: TO INTERESTED PARTIES 279 MORKSHOPS: OF MORKSHOPS: TO INTERESTED PARTIES 280 MEMBERSHIP 290 30, 642. 30 MEMBERSHIP 31 Other program services (attach schedule) SEE STATEMENT 7 (Grants \$ 131 a 40, 558 a 131 a 40, 558 a 132 a 100, 644									
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	76				 _ ·				
	43			lieu of Form 1041 - Ch					

during the tax year

| 43 | N/A
| accompanying schedules and statements and to the best of my knowledge and belief, it is ed on all information of which preparer has any knowledge

| 04/04/03, Janice S. Bridge Director

SCHEDULE A (Form 990 or 990-EZ)

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 Chantable Trust

Supplementary Information — (See separate instructions)

2002

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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

Name of the organization CAT TRODUITS NAME TO CRACE ACCOCTAMENT	OM.		68-0239825	number
CALIFORNIA NATIVE GRASS ASSOCIATION Part Compensation of the Five Higher (See instructions List each one if there	est Paid Employees Othe	er Than Officers,		Trustees
(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 and deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000		0		
Compensation of the Five Higher (See instructions List each one (whether	r individuals or firms) If there a	are none, enter 'None	itessional Serv	ices
(a) Name and address of each independent contra	ector paid more than \$50,000	(b) Type	of service	(c) Compensation
NONE				
		_		
		-		
Total number of others receiving over		0		

Sche	dule	A (Form 990 or 990 EZ) 2002 CALIFORNIA NATIVE GRASS ASSOCIATION 68-0	239825		F	Page 2
Par	t III	Statements About Activities (See Instructions)			Yes	No
1	Duri to in	ing the year, has the organization attempted to influence national, state, or local legislation, including any attenfluence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid	mpt			
		ncurred in connection with the lobbying activities. \$ N/A	{			ĺ
	•	st equal amounts on line 38, Part VI A, or line i of Part VI B)	-	1		X
	orga	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI A. Other anizations checking 'Yes,' must complete Part VI B AND attach a statement giving a detailed description of the bying activities.				
2	Sub:	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or witlable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or prineficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)	h any ncipal			
a	Sale	e, exchange, or leasing of property?		2a		Х
b	Len	ding of money or other extension of credit?	-	2b		х
c	Furr	nishing of goods, services, or facilities?	-	2с		х_
d	l Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	-	2d		Х
е	Trac	nsfer of any part of its income or assets?	; -	2e		х
3 4		es the organization make grants for scholarships, fellowships, student loans, etc? (See Note below) you have a section 403(b) annuity plan for your employees?	-	3		X
Note gran	· Atta	ach a statement to explain how the organization determines that individuals or organizations receiving loans from it in furtherance of its charitable programs 'qualify' to receive payments	ſ			
Par	<u>t IV</u>	Reason for Non-Private Foundation Status (See instructions)	•			
The (orgar	nization is not a private foundation because it is. (Please check only ONE applicable box.)				
5	Ň	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)				
6	П	A school Section 170(b)(1)(A)(ii) (Also complete Part V)				
7	П	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)				
8	П	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)				
9	П	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the ho	ospital's n	ame	, city.	1
	_	and state ►	•			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit (Also complete the Support Schedule in Part IV A.)	Section 1	70(b)	(1)(A)(iv)
11 a		An organization that normally receives a substantial part of its support from a governmental unit or from the g Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV A)	eneral pu	blic		
11 b		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 from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33 from gross investment income and unrelated business taxable income (less section 511 tax) from businesses organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV A.)	1-1/3% of i	ts su	ppor	epts
13	_	An organization that is not controlled by any disqualified persons (other than foundation managers) and support described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section section 509(a)(3))	orts organ 509(a)(2)	ızatıc (Se	ons e	
		Provide the following information about the supported organizations (See instruction	ns)			
		(a) Name(s) of supported organization(s)	(t	-)) _, Lii	ne nu	mper
				iror	n abo	ve
			_			
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)				

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 <u>(b)</u> 2000 (d) 1998 (a) 2001 (c) 1999 (e) Total beginning in) Gifts, grants, and contributions received (Do not include unusual grants. See line 28.) 47,544 1,967 3,362 115 52,988 21,100 18,205 14,615 8,550 62.470 16 Membership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 51,330 22,596 9,015. 51,577. 134,518 charitable, etc, purpose 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 organ 3 ization after June 30, 1975 3. Net income from unrelated business 19 activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 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 Other income Attach a schedule. Do not include gain or (loss) from sale of capital assets SEE STMT 4,333. 8,102 3,769 124,310. 76,913 39,178. 17,680. Total of lines 15 through 22 258.081 Line 23 minus line 17 72,980. 25,336 16,582 8,665. 123,563 1,243. 769 392 177. 25 Enter 1% of line 23 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24 26 a b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26 b c Total support for section 509(a)(1) test. Enter line 24, column (e) 26 c 19 d Add Amounts from column (e) for lines 26 d 26 e e Public support (line 26c minus line 26d total) f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26 f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person' **Do not file this list with your return.** Enter the sum of such amounts for each year (2001) ______ 0. (2000) _____ 0. (1999) _____ 0. (1998) _____ b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records 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.) Do not file this list with your return. 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 <u>Ū</u> _ (1999) _ (1998) _ _ _ _ _ 15 c Add Amounts from column (e) for lines 16 134,518. 27 c 249,976 and line 27b total 27 d 0 d Add. Line 27a total e Public support (line 27c total minus line 27d total). 27 e 249,976 f Total support for section 509(a)(2) test. Enter amount from line 23, column (e) 258,081 g Public support percentage (line 27e (numerator) divided by line 27f (denominator)). 27 g 96 86 % 27 h h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
			Yes	No
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?	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)			
	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?	32 b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c	_	
	d Copies of all material used by the organization or on its behalf to solicit contributions?	32 d		
	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?	33 a		
	b Admissions policies?	33 b		
	c Employment of faculty or administrative staff?	33 c		<u> </u>
į	d Scholarships or other financial assistance?	33 d		
	e Educational policies?	33 e		
	f Use of facilities?	331		
ı	g Athletic programs?	33 g	 	<u> </u>
	h Other extracurricular activities?	33 h	<u> </u>	
	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?	34 a		
	b Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement	34 b		
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		

<u>art</u>	VI-A Lobbying Ex	kpenditures by Electied ONLY by an eligible or	ing Public Charr panization that filed f	ties (See instru Form 5768)	ictions))			N/A	
						ed 'a' and 'li	milad			one sort
ec		zation belongs to an affilia		B [[II you	J Check	eu a anu ii		conu	or provisi	ons apply (b)
		imits on Lobbying E	-			Affiliate tota	d grou	р		completed L electing
	(The term	'expenditures' means am	ounts paid or incurre	ed)						nizations
5		ures to influence public op	• •		36					
7		ures to influence a legislat	ive body (direct lobb)	ying)	37					
3	Total lobbying expenditi	ures (add lines 36 and 37)			38					
9	Other exempt purpose of	•			39					
)		expenditures (add lines 38			40				ļ	
ı	, ,	nount. Enter the amount fr	•							
	If the amount on line 40		obying nontaxable a		1 1				}	
	Not over \$500,000		the amount on line							
	Over \$500,000 but not over \$1,		plus 15% of the excess o	· '						
	Over \$1,000,000 but not over \$		plus 10% of the excess o		41					
	Over \$1,500,000 but not over \$		plus 5% of the excess ov	er \$1,500,000						
	Over \$17,000,000	\$1,000	='							
?		amount (enter 25% of line	•		42					
3		ne 36 Enter -0 if line 42 is			43					
ļ		ne 38 Enter 0 if line 41 is	-	. = 4700	44				 	
	Caution' if there is an a	amount on either line 43 oi			1				Ĺ	
	(Some organ	nizations that made a secti	reraging Period on 501(h) election d the instructions for li	o not have to co	mplete	all of the fiv	ve colu	mns	below	
			Lobbying Expend	ditures During 4	-Year	Averaging P	Period			
	Calendar year (or fiscal year beginning in) ►	(a) 2002	(b) 2001	(c) 2000			d) 199			(e) Total
; 	Lobbying nontaxable amount		-							
; _	Lobbying ceiling amount (150% of line 45(e))									· · · · · · · · · · · · · · · · · · ·
,	Total lobbying expenditures		·						<u></u>	
	Grassroots non taxable amount								ļ	
	Grassroots ceiling amount (150% of line 48(e))								ļ	
	Grassroots lobbying expenditures									
	(For reporting o	ctivity by Nonelectine only by organizations that of	lid not complete Par	t VI A) (See ins		_			N/A	
ıu	ig the year, did the organ npt to influence public op	nization attempt to influence pinion on a legislative matt	e national, state or the control of	local legislation, rough the use of	ıncludı	ng any	Yes	No	Ar	nount
a	Volunteers									
b	Paid staff or manageme	ent (include compensation	in expenses reported	d on lines c thro	ugh h)	[
C	Media advertisements					[
d	Mailings to members, le	gislators, or the public				[
e	Publications, or published	ed or broadcast statements	5			[
f	Grants to other organiza	ations for lobbying purpose	s			[
g	Direct contact with legis	lators, their staffs, governi	ment officials, or a le	egislative body		Į				
		, seminars, conventions, s				ĺ				

I Total lobbying expenditures (add lines c through h.)

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c)

	•		rganizations) or in section 527, relat		,		
a Transf	fers from the reporting or	ganization t	o a noncharitable exempt organization	on of		Yes	No
(i)Ca	ash				51 a (i)	L	<u>X</u>
(iı)O	ther assets				a (iı)		<u>X</u>
b Other	transactions						i
(ı)Sa	ales or exchanges of asse	ets with a no	oncharitable exempt organization		b (i)		<u>X</u>
(iı)Pı	urchases of assets from a	a noncharita	ble exempt organization		b (n)		Х
(in)Re	ental of facilities, equipm	ent, or other	assets		b (m)		X
(iv)Ro	eimbursement arrangeme	ents			b (IV)		Х
, ,	oans or loan guarantees.				b (v)		X
	•	membershi	p or fundraising solicitations		b (vi)		X
			ts, other assets, or paid employees		c	$\vdash \dashv$	X
d If the	answer to any of the abo	ve is 'Yes,'	complete the following schedule. Col	umn (b) should always show the fair m		e of	
the go	ods, other assets, or ser	vices given	by the reporting organization. If the continuous column (d) the value of the gr	umn (b) should always show the fair managerization received less than fair manageds, other assets, or services received	rket value	ın	
(a)	(b)	ngoment, si	(c)	(d)	<u> </u>		
Line no	Amount involved	Name of	noncharitable exempt organization	Description of transfers, transactions, and	sharing arra	ngemeni	ts
N/A		· · · · · ·					
N/A							
			<u>.</u>				
				···			
		·	<u></u>				
				,—,			
				· · · · · · · · · · · · · · · · · · ·			
							
	··						
-			,				
descri	bed in section 501(c) of t	the Code (ot	liated with, or related to, one or mor her than section 501(c)(3)) or in sec	e tax exempt organizations tion 527?	► □ Ye	s X	No
UII TES	complete the following	Scriedule	(6)	(5)			
	(a) Name of organization		(b) Type of organization	(c) Description of relatio	nship		
N/A				· · · · · · · · · · · · · · · · · · ·			
N/A			<u> </u>				
							
							
				<u>.</u>			

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property) See separate instructions. Attach to your tax return

2002

OMB No 1545 0172

	(s) shown on return JIFORNIA NATIVE GF	RASS ASSOCIA	TION					dentifying number 68-0239825
	ess or activity to which this form relat						!`	00 0237023
FOF	M 990/990-PF							
Par	t Election To Ex	pense Certair	Tangible Property	Under Sect	ion 179	,		
	Note If you have	any listed propert	y, complete Part V befor	e you complete	Part I			
1	Maximum amount. See ins	tructions for a hig	her limit for certain busir	esses			1	\$24,000
2	Total cost of section 179 property placed in service (see instructions)						2	2
3	Threshold cost of section 1	79 property before	e reduction in limitation				3	\$200,000
4	Reduction in limitation Sul						4	1
5	Dollar limitation for tax yea separately, see instruction		from line 1 If zero or les	s, enter 0 If	married f	ılıng	5	5.
6	(a)	Description of property		(b) Cost (busines	ss use only)	(C) Elected	cost	
7	Listed property Enter the				7		_	_
8	Total elected cost of section		-), lines 6 and 7	7		8	·
9	Tentative deduction Enter						<u> </u>	-
10	Carryover of disallowed de		-				10	
11	Business income limitation		•		•	5 (see instrs)	11	
12	Section 179 expense dedu				_		12	2
	Carryover of disallowed de				▶ 13			
	: Do not use Part II or Part							
Par			nce and Other Dep				, - -	
14	Special depreciation allows tax year (see instructions)	ance for qualified	property (other than liste	d property) pla	ced in se	rvice during the	14	<u>, </u>
15	Property subject to section	168(f)(1) election	(see instructions)				15	
	Other depreciation (includi						16	-
Par			t include listed property)	(See instruction	กร)			
(1		Section					
17	MACRS deductions for ass	ets placed in serv	ice in tax years beginnin	a before 2002			17	7
	If you are electing under so	=		=	ing the ta	x year into	. 🗀	
	one or more general asset					•		
	Section B	- Assets Placed	in Service Dunng 2002 1	ax Year Using	the Gene	ral Depreciatio	n Sys	item
	(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) Conver			(g) Depreciation deduction
19a	3-year property							
	5-year property				<u> </u>			
	7 year property	}	L					
	110 year property							
e	15 year property							
	20 year property				<u> </u>			
	25-year property			25 yrs		S/		
h	Residential rental			27.5 yrs	Mr.			
	property			27 5 yrs	MN			
ı	Nonresidential real			39 yrs	MN			
	property	<u> </u>	<u> </u>		<u> </u>			<u> </u>
	Section C -	Assets Placed in	Service During 2002 Ta	x Year Using t	he Alterna			/stem
<u>20 a</u>	Class life	Į			<u> </u>	S/		
<u>b</u>	12 year			12 yrs		S/		
	40 year	<u> </u>	<u> </u>	40 yrs	<u>M</u> N	1 S/	L	
Par				·			T	
	Listed property Enter amo						21	
	Total Add amounts from line 12, of your return Partnerships and S	corporations — see in	istructions	г	e and on the	appropriate lines	22	1,024
23	For assets shown above ar the portion of the basis atti	nd placed in service in the section of the section	ce during the current yea n 263A costs	r, enter	23			

2002	FEDERAL STATEMENTS	PAGE 1
	CALIFORNIA NATIVE GRASS ASSOCIATION	68-0239825
STATEMENT 1 FORM 990-EZ, PART I, I NET INCOME (LOSS) FI SPECIAL EVEN SALES OF LOGO ITEMS	ROM SPECIAL EVENTS LESS GROSS CONTRI- RECEIPTS BUTIONS REVENUE EXPENSES 5,295. 2,110 3,185. 2,862	323.
	TOTAL \$ 5,295 \$ 2,110. \$ 3,185 \$ 2,862	\$ 323.
STATEMENT 2 FORM 990-EZ, PART I, I OTHER REVENUE MISCELLANEOUS	LINE 8 TOTAL \$ \$	123. 123.
STATEMENT 3 FORM 990-EZ, PART I, I OTHER EXPENSES BANK CHARGES CATERING CONFERENCES, CONVENTED CONTRACT SERVICES COPIER CREDIT CARD FEES DEPRECIATION DEVELOPMENT HONORARIA INSURANCE LICENSES & PERMITS MISCELLANEOUS REGISTRATION SUBSCRIPTIONS SUPPLIES TELEPHONE TRAINING TRAVEL VIDEO PRODUCTION WEB SITE	STOTAL S	897 18,211. 1,860 22,005 1,281. 443. 1,024. 5,047. 160. 817. 20. 905. 213 100 10,859. 1,057 3,999 1,923 19,000. 1,394. 91,215.
STATEMENT 4 FORM 990-EZ, PART I, I OTHER CHANGES IN N WRITE OFF OLD BALAN	ET ASSETS OR FUND BALANCES	2,497. 2,497

2002 FE	DERAL STATEMEN	ΓS	PAGE 2				
CALIFO	CALIFORNIA NATIVE GRASS ASSOCIATION						
STATEMENT 5 FORM 990-EZ, PART II, LINE 24 OTHER ASSETS							
INVENTORIES MACHINERY AND EQUIPMENT PREPAID EXPENSES AND DEFERRED C	HARGES	BEGINNING \$ 8,333. 0. 1,000 TOTAL \$ 9,333	\$ 0. 7,560 1,000.				
STATEMENT 6 FORM 990-EZ, PART II, LINE 26 TOTAL LIABILITIES							
ACCOUNTS PAYABLE AND ACCRUED EX CREDIT CARD	PENSES	BEGINNING \$ 338. 2,786. TOTAL \$ 3,124.	\$ 0. \$ 0 \$ 0				
STATEMENT 7 FORM 990-EZ, PART III, LINE 31 STATEMENT OF PROGRAM SERVICE A DESCRIP EDUCATION AND OUTREACH THE DE PRESENTATIONS TO INTERESTED IND BUSINESSES PLANTING	TION VELOPMENT OF MATERIALS		PROGRAM SERVICE EXPENSES 40,280 278. \$ 40,558.				
STATEMENT 8 FORM 990-EZ, PART IV LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES							
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	CONTRI- COMPEN- BUTION T SATION EBP & D	TO ACCOUNT/				
MIKE CONNER 2015 J STREET, SUITE 103 SACRAMENTO, CA 95814	PAST PRESIDENT \$ 2-4	0 \$	0.\$ 0				
ROBIN WILLS 1111 JACKSON STREET OAKLAND, CA 94607	DIRECTOR 1-2	0	0 0				

^^	^	^
711	88	-,
<i>-</i>	1,	•

FEDERAL STATEMENTS

PAGE 3

CALIFORNIA NATIVE GRASS ASSOCIATION

68-0239825

STATEMENT 8 (CONTINUED) FORM 990-EZ, PART IV LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
JEANNE WIRKA 5265 PUTAH CREEK ROAD WINTERS, CA 95694	PRESIDENT ELECT 2-4		\$ 0 5	
DAVID KELLEY 216 F STREET #51 DAVIS, CA 95616	DIRECTOR 1-2	0.	0	0
RICHARD NICHOLS 1900 POWELL STREET 12TH FLOOR EMERYVILLE, CA 94608	PRESIDENT 2-4	0	0	0
SHEILA BARRY 700 EMPEY WAY SAN JOSE, CA 95128	DIRECTOR 1-2	0	0.	0.
F. THOMAS BIGLIONE PO BOX 78058 STOCKTON, CA 95267-1358	DIRECTOR 1-2	0.	0.	0
PETER BOFFEY 6144-A INDUSTRIAL WAY LIVERMORE, CA 94550	SECRETARY 2-4	0	0	0
ANN FRANCIS 503 WEST 4TH STREET ALTURAS, CA 96101	DIRECTOR 1-2	0	0	0
KAREN HARVEY PO BOX 2176 LOS BANOS, CA 93635	DIRECTOR 1-2	0.	0	0
PETER HUJIK 11010 FOOTHILL ROAD LOS MOLINOS, CA 96055	DIRECTOR 1-2	0.	0	0
KENT REEVES 2433 42ND STREET SACRAMENTO, CA 95817	DIRECTOR 1-2	0.	0.	0
MARY MC CLANAHAN 8592 N. FULLER AVE FRESNO, CA 93720	TREASURER 2-4	0.	0.	0.
CHRIS ROSE 5265 PUTAH CREEK ROAD WINTERS, CA 95694	DIRECTOR 1-2	0	0.	0

2002 FEDERAL STATEMENTS						PAGE 4			
	ALIFORNIA NATIVE GI	FORNIA NATIVE GRASS ASSOCIATION						68-023982	
STATEMENT 8 (CONTINUED) FORM 990-EZ, PART IV LIST OF OFFICERS, DIRECTOR	S, TRUSTEES, AND KE	Y EMPLO	YEES						
NAME AND ADDRESS	TITLE AVERAGE PER WEEK		COM SA	PEN- TION			EXPI ACCO OT		
ROBERT SNYDER 23 RUSSELL BLVD DAVIS, CA 95616	DIRECTOR 1-2		\$		\$	0		0.	
RICHARD REINER 958 WASHINGTON STREET RED BLUFF, CA 96090	DIRECTOR 1-2			0.		0		0	
		TOTAL	\$	0.	\$	0	\$	0	
STATEMENT 9 FORM 990-EZ, PART V REGARDING TRANSFERS ASS (A) DID THE ORGANIZATION INDIRECTLY, TO PAY PREMIU (B) DID THE ORGANIZATION INDIRECTLY ON A PERSONAL	, DURING THE YEAR, MS ON A PERSONAL B	PAL BENI RECEIVE ENEFIT C PAY PRE	EFIT CC	ONTRAC	TS DIRECTL	_		NO NO	

DESCRIPTION	(A) 2001	(B) 2000	(C) 1999	(D) 1998	(E) TOTAL
SALES OF LOGO ITEMS MISCELLANEOUS RECEIPTS TOTAL	\$ 3,111.	\$ 2,695.	\$ 0	\$ 0.	\$ 5,806.
	1,222	1,074.	0.	0.	2,296
	\$ 4,333.	\$ 3,769	\$ 0.	\$ 0.	\$ 8,102