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)

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

OMB No 1545-0047

Open to Public Inspection

A	For th	e 2002 calend	dar year, o	or tax year beginning Ju	l 1	, 2002,	and e	nding Jun 3	30		2003
		applicable		C Name of organization					D Empl	oyer ide	ntification Number
	Made	dress change	Please use IRS label	ECOVENTURE					94	-333	5236
	∏ _{Nai}	me change	or print or type	Number street (or P O box r	f mail is not delivered to	street addr)	Roor	π/suite	E Telep	hone nu	mber
	\blacksquare	ual return	See specific	1904 FRANKLIN ST	REET		91	0 609	(5	10) 4	444-4078
	H _{EID}	al return	instruc tions.	City town or country		State		code + 4		unting	Cash X Accrual
	\vdash	ended return		OAKLAND		CA	94	612			pecify)
	H	plication pending	• Sector	on 501(c)(3) organizations	and 4947(aV1) no			H and I are not applic			
			chant	table trusts must attach a	completed Sched	ule A		H (a) is this a grou			
		_	(Form	n 990 or 990-EZ)				H (b) II Yes enter	•		. – –
<u>G</u>	Web s	site *		 	_		- 1	H (C) Are all affilia			Yes X No
J		nization type				—		(If No attac			ctions)
	` —	k only one)		X 501(c) 3 ◀ (in		· —	527	H (d) Is this a sepa	rate return	illed by	an
K	_		-	nization's gross receipts ar	-			organization			
				eed not file a return with the ie in the mail, it should file				I Enter 4 di	at GEN		<u> </u>
	Some	states requi	re a comp	lete return			· -		-	proaniz	ation is not required
$\overline{}$	Gross	receints Add	d lines 6b	, 8b, 9b, and 10b to line 12	▶ 134 948						D, 990 EZ, or 990 PF)
Pa				nses, and Changes in		Fund B	alan	ces (See Instru	clions)		
<u>. 4</u>				ents, and similar amounts		-		(// // // // // // // // // // // //			
		Direct public		enter announts (l 1a	130	, 944		
		•					1 b		,		
		b Indirect public support c Government contributions (grants) 1c									
	d Total (add lines la through 1c) (cash \$ 130,944 noncash \$)							1 d	130,944		
	2 Program service revenue including government fees and contracts (from Part VII, line 93)								2	22012	
		-		assessments	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Ì	3	
		-		d temporary cash investme	nis					4	
			-	from securities						5	
	_	Gross rents	a microsi	nom secondes			6a	1			
		Less rental e	exnenses				6 b	 		Ì	
	1		•	oss) (subtract line 6b from	line 6a)			1		6c	
_	1	Other investr	-	• •)	7	
REVENUE					(A) Sec	urilies	T^-	(B) Othe	:r		· · · · · · · · · · · · · · · · · · ·
Ě	8a	Gross amour than inventor		les of assets other			8a	 	_	1 1	
ָרָי ;	b Less cost or other basis and sal			sis and sales expenses			86	 			
• E.		Gain or (loss) (a		•	-		80		_	1	
				nbine line 8c, columns (A)	and (B))		<u> </u>	<u> </u>		84	
?		•		tivities (attach schedule)	(-//						
•		Gross revenu			0 of cont	tributions					
-	-	reported on I	-				9 a	. 1	,764		
	Ь	•	=	other than fundraising exp	enses		91		,259	1	
	l c	Net income of	or (loss) fr	om special events (subtrac	ct line 9b from line	9a)		See L-9		9c	495
	l			ry, less returns and allowa			10 a	2	,240		
	l	Less cost of					10 b		,674	1	
	l		-	ales of inventory (attach schedule) (subtract line 10b froi	n line 10a)				10 c	566
				art VII, fine 103)	•		1	FIVED	7	11	
	12	Total revenu	e (add line	es 1d, 2, 3, 4, 5, 6c, 7, 8d,	9c, 10c, and 11)		<u> </u>		i	12	131,015
_	13			n line 44, column (B))		-		Įč	וֹמַ	13	121,348
EXPENSES	14	Management	t and gene	eral (from line 44, column i	(C))	2 DI	EC 2	4 2003	143-05(14	6,331
Ë	15			44, column (D))					2	15	1,875
Š	16	Payments to	affiliates	(attach schedule)		$\bigcap i$	717		-1	16	
5	17	=		ines 16 and 44, column (A)}	<u> </u>	ازال	<u> </u>		17	129,554
	18			the year (subtract line 17 f				-		18_	1,461
N S	19			ances at beginning of year		ımn (A))				19	57
N S	20			assets or fund balances (at						20_	
Š	21	_		ances at end of year (com		and 20)				21	1,518

Do not include amounts reported on line

(C) Management

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

(B) Program

	<u> </u>		services	and general	(D) Fulluraising						
22 Grants and allocations (att sch)		_		"							
(cash \$											
non cash \$) 22										
23 Specific assistance to individuals	· · · · · · · · · · · · · · · · · · ·										
24 Benefits paid to or for members		3,300	3 300								
25 Compensation of officers, directo	· —	66,523	3,300 62,564	3,959	0						
26 Other salaries and wages27 Pension plan contributions	——	00,323	02,304	3,333	_						
28 Other employee benefits	· · · · · · · · · · · · · · · · · · ·										
29 Payroll taxes	29	8,324	7,826	498	0						
30 Professional fundraising for		430									
	31	811	0	811							
•	32	011									
32 Legal fees	33		-								
33 Supplies	34	2,598	2,522	76	0						
34 Telephone		3,484	3,432	52							
35 Postage and shipping 36 Occupancy	35 36	11,902	11,159	743	0						
• •		11,302	11,133								
37 Equipment rental and mar	38	3,178	3,178	0	0						
38 Printing and publications		1,669	1,669	0	0						
39 Travel	39	1,003	1,0031	U .	U U						
40 Conferences, conventions, and m	· ·										
41 Interest	41										
42 Depreciation, depletion, etc (attai	· ·										
43 Other expenses not covered abov	, , , <u> </u>	10 675	17 900	0	1 075						
a CONSULTANTS	43a	19,675	17,800	0	1,875						
b PUBLIC EDUCATION		724	689	35	0						
c OFFICE EXPENSE	43c	3,037	2,915	122	0						
d ORGANIZING EXPEN		25	0	25	0						
e TRANSPORTATION	(LOCAL) 43e	622	622	0	0_						
Total functional expenses (add Organizations completing colu- carry these totals to lines 13	mns (B) (D),										
		129,554	121,348	6,331_	1,875						
Joint Costs Check ► if yo	-				· 🗆 🖂						
Are any joint costs from a comb					► Yes X No						
		'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 \$	i) the amount allocated			, and (iv) th	e amount allocated						
·	rogram Service A	to management and ger Accomplishments	neral \$, and (iv) th	e amount allocated						
What is the organization's nrime	rogram Service A	to management and ger Accomplishments STATEMENT A	TTACHED	, and (iv) th	e amount allocated Program Service Expenses						
What is the organization's nrime	rogram Service A	to management and ger Accomplishments STATEMENT A	TTACHED	, and (iv) th	e amount allocated Program Service Expenses						
What is the organization's primi All organizations must describe clients served, publications issuizations and 4947(a)(1) nonexe	Program Service A ary exempt purpose? their exempt purpose ued, etc. Discuss achie impt charitable trusts i	to management and ger Accomplishments STATEMENT A	TTACHED	, and (iv) th	e amount allocated						
What is the organization's nrime	Program Service A ary exempt purpose? their exempt purpose ued, etc. Discuss achie impt charitable trusts i	to management and ger Accomplishments STATEMENT A	TTACHED	, and (iv) th	e amount allocated Program Service Expenses						
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Form 990 (2002)

Part IV Balance Sheets (See Instructions)

Note.	Wh	ere required, attached schedules and amounts within umn should be for end of year amounts only	the description	(A) Beginning of year		(B) End of year
	45	Cash — non interest-bearing		48,792	45	22,157
	46	Savings and temporary cash investments			46	
	47 a	Accounts receivable	47a 662			
	b	Less allowance for doubtful accounts	47b	2,391	47 c	662
	48 a	Pledges receivable	48a			
	b	Less allowance for doubtful accounts	486		48 c	
	49	Grants receivable			49	
A S S E T S	50	Receivables from officers, directors, trustees, and ke employees (attach schedule)	ey		50	
S	51 a	Other notes & loans receivable (attach sch)	51 a			
5		Less allowance for doubtful accounts	51 b		51 c	
	52	inventories for sale or use		1,685	52	168
- 1	53	Prepaid expenses and deferred charges	ſ		53	217
	54	Investments – securities (attach schedule)	► Cost FMV	· · · · · · · · · · · · · · · · · · ·	54	
	55 a	Investments – land, buildings, & equipment basis	55a			
	b	Less accumulated depreciation (attach schedule)	55b		55 c	
	56	Investments – other (attach schedule)			56	
		Land, buildings, and equipment basis	57a			
	b	Less accumulated depreciation (attach schedule)	57 b		57 c	
	58	Other assets (describe - REFUNDABLE DEPO		58	2,500	
		Total assets (add lines 45 through 58) (must equal I	52,868	59	25,704	
		Accounts payable and accrued expenses	1,760	60	1,376	
Ļ l	61	Grants payable		· <u>—</u> -	61	•
LIABILITIES	62	Deferred revenue		42,413	62	22,810
וַיִּי	63	Loans from officers, directors, trustees, and key employees (attach	n schedule)	8,638	63	· · · · · · · · · · · · · · · · · · ·
וַנָּ	64 a	Tax-exempt bond liabilities (attach schedule)			64 a	
į	b	Mortgages and other notes payable (attach schedule)			64 b	
5	65	Other liabilities (describe			65	
		Total liabilities (add lines 60 through 65)		52,811	66	24,186
္ ျပ	rganı	izations that follow SFAS 117, check here 🕨 🔲 a	nd complete lines 67			
Ř		through 69 and lines 73 and 74			-	
Ą	67	Unrestricted			67	
ANOIH-N	68	Temporarily restricted		-	68	
ξ		Permanently restricted			69	
R	rgan	zations that do not follow SFAS 117, check here > 70 through 74	X and complete lines			
P. O. D.	70	Capital stock, trust principal, or current funds			70	
	71	Paid in or capital surplus, or land, building, and equi	pment fund		71	
Ķ	72	Retained earnings, endowment, accumulated income	e, or other funds	57	72	1,518
BALAZCES	73	Total net assets or fund balances (add lines 67 thro 72, column (A) must equal line 19, column (B) must	57	73	1,518	
'	74	Total liabilities and net assets/fund balances (add li	• • • • • • • • • • • • • • • • • • •	52,868	74	25,704

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.

BAA

Par	t IV-A Reconciliation of Revent Financial Statements wit per Return (See instruction	h Revenue	Pari	Reconcilia Financial S per Return	Statements with	es pe Exp	r Audited enses
a	Total revenue, gains, and other support per audited financial statements	NA a	a	Total expenses and I financial statements		a	N/A
b	Amounts included on line a but not on line 12, Form 990		ь	Amounts included on on line 17, Form 990			
(1)	Net unrealized gains on investments \$		מ)	Donated services and use of facilities \$			
(2)	Donated services and use of facilities \$!	(2)	Prior year adjust ments reported on line 20, Form 990 \$			
• • •	Recoveries of prior year grants \$		`	Losses reported on line 20, Form 990 \$			
	Add amounts on lines (1) through (4)	b		Add amounts on lines (1)	through (4)	b	
c	Line a minus line b	с	С	Line a minus line b	oug (. , ,	c	
d	Amounts included on line 12, Form 990 but not on line a		d	Amounts included on Form 990 but not on	line 17, line a		
(1)	Investment expenses not included on line 6b, Form 990 \$		(1)	Investment expenses not included an line 6b, Form 990 \$	}		
(2)	Other (specify)		(2)	Other (specify)			
	s		<u> </u> 	\$			
	Add amounts on lines (1) and (2)	_d]	Add amounts on line	s (1) and (2)	_d	
e	Total revenue per line 12, Form 990 (line c plus line d)	_e	е	Total expenses per l 990 (line c plus line	d) ▶	_e	
Parl	V List of Officers, Directors,						
	(A) Name and address	(B) Title and average ho per week devoted to position	urs	(C) Compensation (if not paid, enter -0-)	(D) Contributions employee benefi plans and deferre compensation	t	(E) Expense account and other allowances
DOU	JG LINNEY	 	_		Compensation	_ -	
2_8	ALLEY BAY, ALAMEDA, CA	CHAIR PERSON	2	3,300		0	0
RON	IALD NORDHAUS	CHAIR FERSON		3,300	· · · · · · · · · · · · · · · · · · ·	<u>~</u> +-	
	3 BERKELEY WAY, BERKELEY, CA	TREASURER	25	0		0	0
	IUEL SCHUCHAT		寸			\top	
543	6 THOMAS, OAKLAND, CA	VICE CHAIR PERSON	25	0		0 _	0
	IES WHEATON						
142	3 CHETWOOD, OAKLAND, CA	SECRETARY	25	0	ı	0	0
WAR	REN LINNEY	JECKLIANI	- 1			` -	
	9 ST_HELENA ST , SANTA ROSA, CA	=	Ì		u.	ì	
		MEMBER	25	0		0	0
		1					
 75	Did any officer, director, trustee, or ke	y employee receive aggre	nate c	omnersation of more	<u></u>		
, ,	than \$100,000 from your organization \$10,000 was provided by the related of If 'Yes,' attach schedule — see instruc	and all related organization organizations?	ns, of	which more than		- []	Yes X No
BAA		<u></u>				-	Form 990 (2002)

Parl	V	Other Information (See instructions)			Yes	No		
76	Did th	e organization engage in any activity not previously reported to the IRS? If 'Yes,'		76	- {	V		
_	•	ia detailed description of each activity any changes made in the organizing or governing documents but not reported to the IRS.	,	76 77		<u>X</u> _		
//		s, attach a conformed copy of the changes	· •		 i			
7Ω =		e organization have unrelated business gross income of \$1,000 or more during the year of	covered by this return?	78a	ĺ	X		
		s,' has it filed a tax return on Form 990-T for this year?	overed by this retain	78b		X		
79		here a liquidation, dissolution, termination, or substantial contraction during the If Yes, attach a statement		79		X		
80 =	is the	organization related (other than by association with a statewide or nationwide organization	on) through common		Ī			
001	memb	pership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organ	nization?	80 a		X		
t	If 'Ye	s, enter the name of the organization •		İ	- 1			
		and check whether it is ex	empt or nonexempt					
81 a	Enter	direct or indirect political expenditures. See line 81 instructions	81 a 0					
t	Did th	e organization file Form 1120-POL for this year?		81 Ь		<u> </u>		
82 8	Did th	e organization receive donated services or the use of materials, equipment or facilities a antially less than fair rental value?	t no charge or at	82 a	x	į		
		•						
ı		s, you may indicate the value of these items here. Do not include this amount as ue in Part I or as an expense in Part II. (See instructions in Part III.)	82 b					
83 2	83a Did the organization comply with the public inspection requirements for returns and exemption applications?							
	b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?							
84 a	84a Did the organization solicit any contributions or gifts that were not tax deductible?							
ŀ		s,' did the organization include with every solicitation an express statement that such con	tributions or gifts were	84 b				
	The ten dead the t							
	 85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? b Did the organization make only in house lobbying expenditures of \$2,000 or less? 							
t	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a							
	waive	s' was answered to either 85a or 85b, do not complete 85c through 85h below unless the r for proxy tax owed for the prior year	organization received a					
•	: Dues	assessments and similar amounts from members	85 c					
•	d Section	on 162(e) lobbying and political expenditures	85 d					
•	- Aggre	gate nondeductible amount of section 6033(e)(1)(A) dues notices	85 e					
		ole amount of lobbying and political expenditures (line 85d less 85e)	851					
(g Does	the organization elect to pay the section 6033(e) tax on the amount on line 85f?	,	85 g		<u> </u>		
ļ	h If secti dues a	on 6033(eX1XA) dues notices were sent, does the organization agree to add the amount on line 85f to its reason Hocable to nondeductible lobbying and political expenditures for the following tax year?	able estimate of	85 h				
86	501(0	r)(7) organizations Enter a Initiation fees and capital contributions included on	1			ĺ		
	line 1		86 a					
1	b Gross	receipts, included on line 12, for public use of club facilities	86 b					
87	501(0)(12) organizations Enter a Gross income from members or shareholders	87a			ŀ		
		s income from other sources. (Do not net amounts due or paid to other sources st amounts due or received from them.)	87 b					
88	At an	v time during the year, did the organization own a 50% or greater interest in a taxable co	rporation or partnership,					
	or an	entity disregarded as separate from the organization under Regulations sections 301 770 s,' complete Part IX	01 2 and 301 7701 3?	88		x		
89		(3) organizations Enter Amount of tax imposed on the organization during the year und	der					
		on 4911 > 0 , section 4912 > 0 , section 4						
1	durin	c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess g the year or did it become aware of an excess benefit transaction from a prior year? If "\" ining each transaction.	s benefit transaction 'es,' attach a statement	89 b				
,	c Enter	Amount of tax imposed on the organization managers or disqualified persons during the under sections 4912, 4955, and 4958	•			0		
	-	Amount of tax on line 89c, above, reimbursed by the organization	<u> </u>			<u> </u>		
		he states with which a copy of this return is filed •	. =					
		per of employees employed in the pay period that includes March 12, 2002 (See instruction	ons)	90ь		₇		
		pooks are in care of ► KENNETH LINNEY Telephone nu						
		dat ► 1904 FRANKLIN STREET, OAKLAND CA	ZiP + 4 ► 9461					
92		on 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check	here			▶ 🔲		
		enter the amount of tax-exempt interest received or accrued during the tax year	<u>▶</u> 92					
BAA				Form	990	(2002)		

	es (See instructions business income (B) Amount		tion 512, 513, or 514 (D) Amount	Related or exempt function income
(E))	Amount			Related or exempt function income
				560
				560
				560
				560
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		1 1		<u> </u>
ne armorro r	an line 12 Dart I		_	 -
ha Accor	nnlichment of E	vomet Burnoco	S (See instructions)	
	•			
come is rep	orted in column (E)	of Part VII contribut for such purposes)	ed importantly to the	accomplishment
			CONSERVATION	
NI LIGH	I BULBS TO FE	CONOTE ENERG	CONSCRAVITOR	· · ·
	 -			
				
I - C - L - L -	Carlos and Draw	and all Entities		
				N/
(B)		(C)	(U)	(E)
		of activities	Total	End of year assets
ownership inti	_		income	assets
				
				
fore Ace	'* I	conal Repotit C	Ontracte (See inch	uctions \
				Yes X N
				Yes XN
		n a personal benefi	t contract?	L tes Mu
xamined this re pen (other than i	eturn including accompany officer) is based on all info	ring schedules and statem rmation of which preparer	has any knowledge	nowledge and belief it is
				5/03
			Date	- 1 /
	(B) Percentage ownership int fers Asse directly or in- emiums, di 4720 (see i	Percentage of ownership interest % % % % fers Associated with Perdirectly or indirectly, to pay premiums emiums, directly or indirectly, to see instructions)	Percentage of ownership interest Nature of activities	Percentage of ownership interest Nature of activities Total income % % % fers Associated with Personal Benefit Contracts (See instrictivity or indirectly, to pay premiums on a personal benefit contract? emiums, directly or indirectly, on a personal benefit contract? 4720 (see instructions) tamined this return including accompanying schedules and statements and to the best of my key (other than officer) is based on all information of which preparer has any knowledge

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 Employer identification number **ECOVENTURE** 94-3335236 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (e) Expense account and other (a) Name and address of each (b) Title and average (c) Compensation (d) Contributions employee paid more than \$50,000 hours per week devoted to position to employee benefit plans and deferred compensation allowances NONE Total number of other employees paid over \$50,000 None 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 Total number of others receiving over \$50,000 for professional services None

Sche	dule	A (Form 990 or 990-EZ) 2002	94-3335 <u>236</u>		P	Page 2
Par	t III	Statements About Activities (See instructions)			Yes	No
1	Duς to π	ing the year, has the organization attempted to influence national, state, or local legislation, including any ifluence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid	y attempt			
	or II	ncurred in connection with the lobbying activities	_	Į.		
	(Mu	st equal amounts on line 38, Part VI A, or line i of Part VI B)	<u> </u>	1		_ X
	orga	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI A. Othe anizations checking. Yes, must complete Part VI-B AND attach a statement giving a detailed description bying activities.	er of the			
2	sub laxa	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with a stantial contributors, trustees, directors, officers, creators, key employees, or members of their families able organization with which any such person is affiliated as an officer, director, trustee, majority owner, officiary? (If the answer to any question is Yes, attach a detailed statement explaining the transactions.)	or with any			
а	Sal	e exchange or leasing of property?	-	2 a	X	<u> </u>
t	Len	ding of money or other extension of credit?	-	2Ь	X	
c	: Fun	nishing of goods, services, or facilities? See Part V. Form 99	<u> </u>	2 c	Х	
c	l Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	, -	2d	X	<u> </u>
e	. Tra	nsfer of any part of its income or assets?	-	2e		Х
3	Doe	es the organization make grants for scholarships, fellowships, student loans, etc² (See Note below)		3		l x
4		you have a section 403(b) annuity plan for your employees?		4		Х
Note gr <u>an</u>	Att	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				
Par	t IV	Reason for Non-Private Foundation Status (See instructions)				
The	orgai	nization 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)				
7		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 hospital's na	ıme,	city,	
		and state >	•			
10		An organization operated for the benefit of a college or university owned or operated by a governmental (Also complete the Support Schedule in Part IV A)	unit Section 170)(b)(1)(A)((iv)
11 a	X	An organization that normally receives a substantial part of its support from a governmental unit or from Section $170(b)(1)(A)(vi)$ (Also complete the Support Schedule in Part IV-A)	the general pub	lic		
111	, 🗌	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, member from activities related to its charitable, etc., functions — subject to certain exceptions, and (2) no more the from gross investment income and unrelated business taxable income (less section 511 tax) from busing organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part III.)	h an 33-1/3% of its esses acquired b	s sup	port	pts
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and 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)(3))	supports organiz ection 509(a)(2)	atioi (See	าร	
		Provide the following information about the supported organizations. (See ins	tructions)			
		(a) Name(s) of supported organization(s)	(t		ne nu n abo	ımber ove
				-		
		An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)	Æorm 000 or Fo	0	20 53	7. 200

	t IV-A Support Schedule (h method of a	accountin	
Cale	You may use the worksheet in the ndar year (or fiscal year nning in)	(a) 2001	erting πom the accrua (b) 2000	ai to the ca. (c 19		<i>accounting</i> (d) 1998		(e) Total
	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	208,236	125,000	-	1,200			394, 436
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 charitable, etc. purpose	491						491
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							
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	208,727	125,000	6	1,200			394,927
24	Line 23 minus line 17	208,236	125,000	6	1,200			394,436
_25		2,087	1,250		612			
26			er 2% of amount in co			•	26 a	7,889
t	Prepare a list for your records to show the supported organization) whose total gifts f return Enter the total of all these excess	or 1998 through 2001 exceed	buted by each person (othe ded the amount shown in hi	er than a gove ne 26a Do no	nmental unit or t file this list w	publicly ith your	26b	284,555
	: Total support for section 509(a)(1		otumn (e)			•	26 c	394,436
•	Add Amounts from column (e) for		-	19				224 555
	5.4 .4 .6	22		26b	284,55		26 d	284,555
	Public support (line 26c minus lin	•				▶	200	109,881 27 86 %
	Public support percentage (line 2 Organizations described on line		ea by line 26c (denom	inator))	-		26 f	21 86 7
	For amounts included in lines 15, name of, and total amounts recei such amounts for each year	16, and 17 that were ved in each year from	, each 'disqualified pe	rson ' Do n	ot file this lis	t with your r	eturn En	ter the sum of
	(2001)	(2000)	(1999)			(1998)		
	For any amount included in line is show the name of, and amount re \$5,000 (Include in the list organic computing the difference between (the excess amounts) for each ye	eceived for each year, zations described in hi the amount received ear	that was more than these 5 through 11, as wand the larger amoun	ne larger of vell as indi- it described	(1) the amou viduals) Do i I in (1) or (2),	unt on line 25 not file this line enter the sur	for the y st with yo m of thesi	ear or (2) our return. After e differences
	(2001)	(2000)	(1999)			(1998)		
•	(2001) Add Amounts from column (e) for 17 Add Line 27a total	r lines 15		16			1 1	
	17	20		21		<u> </u>	27 c	
			d line 27b total				27 d	
	Public support (line 27c total min	•				•	27 e	
	Total support for section 509(a)(2			_	271	-		9
_	g Public support percentage (line 2 n Investment income percentage (,			nominato*\			<u> </u>
	+ moonie percentage (i	10, 001411111 (6) (116		/ (UE	······································	-	. ~ / !!!	,

²⁸ 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

	edule A (Form 990 or 990 EZ) 2002 ECOVENTURE	94 <u>-</u> 3335236	P	age 4
Par	TO be completed ONLY by schools that checked the box on line 6 in Part (V)	N/A		
	· · · · · · · · · · · · · · · · · · ·		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, other governing instrument or in a resolution of its governing body?	, bylaws,		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	brochures,		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media the period of solicitation for students, or during the registration period if it has no solicitation program, in a makes the policy known to all parts of the general community it serves? If "Yes please describe, if No please explain (If you need more space, attach a separate statement)	a during a way that		
	in resiliplease describe, in the please explain (if you need intole 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?	ing 32 c		
ı	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 state	ement)		
33	Does the organization discriminate by race in any way with respect to			
;	a Students' rights or privileges?	33a		
I	b Admissions policies?	33 b		
•	c Employment of faculty or administrative staff?	33c		
ı	d Scholarships or other financiał assistance?	33d		<u> </u>
1	e Educational policies?	33e		_
	f Use of facilities?	331		<u> </u>
·	g Athletic programs?	33 g		
	h Other extracurricular activities?	33 h		
	If you answered. Yes' to any of the above, please explain. (If you need more space, attach a separate sta	tement)		
			1	
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?	34b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement	1.2		
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		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions) (To be completed ONLY by an eligible organization that filed Form 5768)

	_	(To be completed ONLY by a	n eligible organization th	nat filed For	m 576	8)			NA
Chec	.k <mark>► a</mark>	if the organization belongs	to an affiliated group	Check ►	b	ıf y	ou checke	d a and limited conti	rol' provisions apply
	•		bbying Expenditus' means amounts paid)			(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lo	bbying expenditures to influence	e public opinion (grass	roots lobbyi	ng)		36		
37	Total lo	bbying expenditures to influence	ce a legislative body (di	rect lobbyin	g)		37		
38	Total lo	bbying 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 as	mount on line 40 is —	The lobbying non	taxable am	ount is	. –			
	Not ove	er \$500,000	20% of the amoun	nt on line 40)	\neg	- } -		
	Over \$500	0,000 but not over \$1,000,000	\$100,000 plus 15% of	the excess ove	r \$500,0	00			
	Over \$1,0	000 000 but not over \$1,500,000	\$175,000 plus 10% of	the excess ove	r \$1,000	1,000 	- 41		
	Over \$1,5	500,000 but not over \$17,000,000	\$225,000 plus 5% of the	he excess over	\$1,500,	000			
	Over \$	17,000,000	\$1,000,000						
42	Grassro	oots nontaxable amount (enter	25% of line 41)				42		
43	Subtrac	t line 42 from line 36 Enter -0	- if line 42 is more than	line 36			43		
44	Subtrac	ct line 41 from line 38 Enter C	if line 41 is more than	line 38			44		
	Caution	n if there is an amount on eith	er line 43 or line 44 vo	u must file i	Form 4	1720		-	

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)

				,						
			Lobbying Expenditures During 4 -Year Averaging Period							
	Calendar year (or fiscal year beginning in) ►	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total				
45	Lobbying nontaxable amount									
46	Lobbying ceiling amount (150% of line 45(e))									
47	Total lobbying expenditures									
48	Grassroots non taxable amount									
49	Grassroots ceiling amount (150% of line 48(e))	7				. <u>.</u>				
50	Grassroots lobbying expenditures		-							

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

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
- ${\bf b}$ Paid staff or management (Include compensation in expenses reported on lines ${\bf c}$ through ${\bf h}$)
- 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)
 - If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities

Yes	No	Amount
	X	
	Х	
	Х	
	Х	
	Х	
	X X	
	X	

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

51 Did th	e reporting organization of	directly or ind	rectly engage in any o	of the following	with any other organization described ig to political organizations?	ın section	501(c	:)	
					The state of the s		Yes	No	
 a Transfers from the reporting organization to a noncharitable exempt organization of (i) Cash 								X	
	ther assets					51 a (i) a (ii)		Х	
	transactions								
(i) S:	ales or exchanges of asse	ets with a noi	ncharitable exempt org	anization		b (i)		<u> </u>	
(iı)Pe		b (iı)		_X					
(iii)R		b (in)		X					
(iv)R		b (iv)		X					
(v) Lo		b (v)		X					
(vi)P		b (v1)		X					
c Sharir	ng of facilities, equipment	i, mailing list	s, other assets, or paid	l employees	(h) should always about the four man	C C	<u> </u>	<u> </u>	
the go any tr	answer to any of the abov oods, other assets, or serv ansaction or sharing arra	ve is Tes, ci vices given b ingement, sh	y the reporting organiz ow in column (d) the v	ation If the or alue of the goo	mn (b) should always show the fair man ganization received less than fair mark ods, other assets or services received	et value ii) 		
(a) (b)			(c) noncharitable exempt of		(d)				
		 	<u> </u>						
		-							
					-				
		 							
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				···					
		_							
		<u> </u>							
		 							
	<u>i</u>	<u> </u>			<u> </u>				
	organization directly or in tibed in section 501(c) of the s, complete the following		iated with, or related to ner than section 501(c)	o, one or more (3)) or in secti	tax-exempt organizations ion 527?	► [] Ye	es 🛚] No	
<u> </u>		Scriedule	(b)		(c)				
(a) Name of organization			(b) Type of organ	ızatıon	Description of relationship				
									
			-						
·	•								
				<u></u>					
	<u> </u>						_		
				_					
					 				
			<u> </u>		<u></u>				

94-3335236

1

Form 990, Page 1, Part I, Line 9
Special Events and Activities Statement

List of Three Largest Events and Type and Number of Others	Gross Receipts	Less Contributions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
CA INTERFACE POWER & LIGHT	1,764	0	1,764	2,259	-495_
Total	1,764	0	1,764	2,259	-495

Eco Venture EIN #94-3335236 6/30/03

Form 990, Part III Statement of Program Services

In 2002/2003, EcoVenture's activity was focused on two projects. Green Capitol and California Interfaith Power and Light. Green Capitol works with environmental and taxpayer groups to produce educational materials on opportunities for environmentally beneficial tax-shifting. California Interfaith Power and Light is working to mobilize the religious community to become active in the fight against global warming. CIPL helps congregations take a pro-active role in reducing greenhouse gas emissions through conservation and renewable energy.