

**Return of Organization Exempt From Income Tax**

OMB No 1545-0047

**2002**

Department of the Treasury  
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2002 calendar year, or tax year period beginning **APR 1, 2002** and ending **MAR 31, 2003**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	<b>C</b> Name of organization <b>STRYBING ARBORETUM SOCIETY</b>		<b>D</b> Employer identification number <b>94-6050168</b>
		Number and street (or P O box if mail is not delivered to street address) Room/suite <b>9TH AVENUE AT LINCOLN WAY</b>		<b>E</b> Telephone number <b>(415) 661-1316</b>
		City or town, state or country, and ZIP + 4 <b>SAN FRANCISCO, CA 94122</b>		<b>F</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations

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 GEN

M Check  if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

G Web site **WWW.STRYBING.ORG**

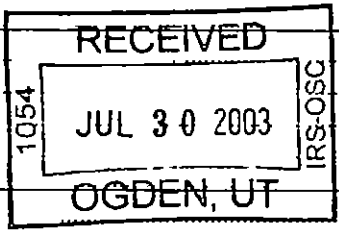
J Organization type (check only one)  501(c) ( 3 ) (insert no)  4947(a)(1) or  527

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 Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **3,400,966.**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

<b>1</b> Contributions, gifts, grants, and similar amounts received <b>a</b> Direct public support <b>b</b> Indirect public support <b>c</b> Government contributions (grants) <b>d</b> Total (add lines 1a through 1c) (cash \$ <b>2,174,479.</b> noncash \$ <b>40,157.</b> )	1a	<b>2,214,636.</b>			
	1b				
	1c				
	1d			<b>2,214,636.</b>	
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93) <b>3</b> Membership dues and assessments <b>4</b> Interest on savings and temporary cash investments <b>5</b> Dividends and interest from securities	2			<b>201,910.</b>
		3			<b>226,416.</b>
	<b>6 a</b> Gross rents <b>b</b> Less rental expenses <b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	6a			
		6b			
	6c				
	<b>7</b> Other investment income (describe <b>GAIN ON SALE OF INVESTMENT</b> ) <b>8 a</b> Gross amount from sale of assets other than inventory <b>b</b> Less cost or other basis and sales expenses <b>c</b> Gain or (loss) (attach schedule) <b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	(A) Securities		(B) Other	
		8a			
		8b			
8c					
8d				<b>72,755.</b>	
<b>9</b> Special events and activities (attach schedule) <b>a</b> Gross revenue (not including \$ <b>0.</b> of contributions reported on line 1a) <b>b</b> Less direct expenses other than fundraising expenses <b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	9a	<b>94,955.</b>			
	9b				
	9c			<b>94,955.</b>	
<b>10 a</b> Gross sales of inventory, less returns and allowances <b>b</b> Less cost of goods sold <b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10a	<b>382,090.</b>			
	10b	<b>121,488.</b>			
	10c		<b>STMT 2</b>	<b>260,602.</b>	
11					
12				<b>3,279,478.</b>	
<b>13</b> Program services (from line 44, column (B)) <b>14</b> Management and general (from line 44, column (C)) <b>15</b> Fundraising (from line 44, column (D)) <b>16</b> Payments to affiliates (attach schedule) <b>17</b> Total expenses (add lines 16 and 44, column (A))	13			<b>2,797,705.</b>	
	14			<b>256,438.</b>	
	15			<b>244,528.</b>	
	16				
	17				<b>3,298,671.</b>
<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12) <b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A)) <b>20</b> Other changes in net assets or fund balances (attach explanation) <b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	18			<b>&lt;19,193.&gt;</b>	
	19			<b>7,976,888.</b>	
	20			<b>&lt;772,087.&gt;</b>	
	21				<b>7,185,608.</b>



FILMEC AUG 06 2003 Revenue

**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	0.	0.	0.
26 Other salaries and wages	26	897,920.	641,616.	139,887.
27 Pension plan contributions	27			
28 Other employee benefits	28	119,588.	93,788.	19,212.
29 Payroll taxes	29	75,853.	55,348.	11,191.
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33	223,677.	196,734.	16,128.
34 Telephone	34	35,719.	29,100.	347.
35 Postage and shipping	35	31,244.	22,971.	3,672.
36 Occupancy	36	38,677.	14,202.	11,200.
37 Equipment rental and maintenance	37	63,027.	42,101.	9,750.
38 Printing and publications	38			
39 Travel	39	20,548.	16,225.	2,468.
40 Conferences, conventions, and meetings	40	12,425.	3,761.	3,544.
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42	102,880.	102,880.	
43 Other expenses not covered above (itemize) a _____ b _____ c _____ d _____ e <b>SEE STATEMENT 4</b>	43a 43b 43c 43d 43e	1,677,113.	1,578,979.	39,039.
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15	44	3,298,671.	2,797,705.	256,438.

Joint Costs Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  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? <input type="checkbox"/>	Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others.)
<b>MAINTENANCE OF BOTANICAL GARDENS</b> 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.)	
<b>a GARDENS - DEVELOPMENT AND IMPROVEMENT OF NEW PLANTS, SIGNAGE, LABELING</b>  (Grants and allocations \$ _____)	411,095.
<b>b EDUCATION - EDUCATION AND INTERPRETIVE PROGRAMS FOR THE GARDENS; CLASSES, WORKSHOPS &amp; TOUR</b>  (Grants and allocations \$ _____)	343,634.
<b>c PUBLICATIONS/PUBLICATIONS - VARIOUS: CALENDAR, CATALOG, ANNUAL REPORT, NEWSLETTER, GARDEN BROCHURES, ETC. FOR THE PUBLIC</b>  (Grants and allocations \$ _____)	118,091.
<b>d VARIOUS: RESOURCE LIBRARY, NURSERY &amp; PLANT COLLECTIONS, BOOKSTORE</b>  (Grants and allocations \$ _____)	710,779.
<b>e Other program services (attach schedule) STATEMENT 5</b> (Grants and allocations \$ _____)	1,214,106.
<b>f Total of Program Service Expenses (should equal line 44, column (B), Program services)</b>	2,797,705.

**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	
<b>Assets</b>	45 Cash non-interest-bearing	244,029.	45	640,686.	
	46 Savings and temporary cash investments	855,257.	46	747,285.	
	47 a Accounts receivable	47a 59,433.			
	b Less allowance for doubtful accounts	47b	1,723.	47c	59,433.
	48 a Pledges receivable	48a			
	b Less allowance for doubtful accounts	48b		48c	
	49 Grants receivable			49	
	50 Receivables from officers, directors, trustees, and key employees			50	
	51 a Other notes and loans receivable	51a			
	b Less allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use		47,642.	52	36,748.
	53 Prepaid expenses and deferred charges		26,137.	53	54,582.
	54 Investments - securities <b>STMT 6</b>	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	6,284,746.	54	5,138,815.
	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 497,240.				
b Less accumulated depreciation	57b 804,222.	<209,686.>	57c	<306,982.>	
58 Other assets (describe <b>LIBRARY &amp; DEFERRED CHARGES</b> )		974,476.	58	1,001,194.	
59 <b>Total assets</b> (add lines 45 through 58) (must equal line 74)		8,224,324.	59	7,371,761.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	247,436.	60	186,153.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	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 <b>LIBRARY &amp; DEFERRED CHARGES</b> )		65		
66 <b>Total liabilities</b> (add lines 60 through 65)		247,436.	66	186,153.	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	4,997,053.	67	3,954,367.	
	68 Temporarily restricted	2,849,944.	68	3,091,350.	
	69 Permanently restricted	129,891.	69	139,891.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
73 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		7,976,888.	73	7,185,608.	
74 <b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)		8,224,324.	74	7,371,761.	

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.



Part VI Other Information

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
77 Were any changes made in the organizing or governing documents but not reported to the IRS?
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
78 b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year?
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?
80 b If "Yes," enter the name of the organization and check whether it is exempt or nonexempt.
81 a Enter direct or indirect political expenditures. See line 81 instructions.
81 b Did the organization file Form 1120-POL for this year?
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82 b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II.
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?
83 b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84 a Did the organization solicit any contributions or gifts that were not tax deductible?
84 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?
85 b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85 c Dues, assessments, and similar amounts from members
85 d Section 162(e) lobbying and political expenditures
85 e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85 f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85 g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85 h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12
86 b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) organizations Enter a Gross income from members or shareholders
87 b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
89 b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
89 c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89 d Enter Amount of tax on line 89c, above, reimbursed by the organization
90 a List the states with which a copy of this return is filed
90 b Number of employees employed in the pay period that includes March 12, 2002
91 The books are in care of Telephone no
Located at ZIP + 4

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

**Part VII Analysis of Income-Producing Activities** (See page 31 of the instructions)

Note 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 <b>EDUCATION</b>					168,821.
b <b>OTHER</b>					33,089.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					226,416.
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					208,204.
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					72,755.
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					94,955.
102 Gross profit or (loss) from sales of inventory					260,602.
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		0.	1,064,842.
105 Total (add line 104, columns (B), (D), and (E))					1,064,842.

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** (See page 32 of the instructions)

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)
93A	PROVIDED EDUCATIONAL AND INTERPRETIVE PROGRAMS FOR THE GARDENS
93B	AS WELL AS FUNDRAISING FOR GARDEN DEVELOPMENT AND ADVOCACY, AND MAINTENANCE OF A HORTICULTURAL LIBRARY OPEN TO THE PUBLIC

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 32 of the instructions)

(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** (See page 33 of the instructions)

- (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

Note: ("Yes" to (a) or (b)) See Form 9970 and Form 4790 (instructions)

completing schedules and statements and to the best of my knowledge and belief it is true information of which preparer has any knowledge  
 7-15-03  J. Michael McKechnie, Exec. Dir.  
 Date Type or print name and title  
 Check if Preparer's SSN or PTIN

**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-(See separate instructions.)**  
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2002**

Name of the organization

STRYBING ARBORETUM SOCIETY

Employer identification number

94 6050168

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

(See page 1 of the 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
SOPHIA PENEYRA ----- 9TH AVENUE AT LINCOLN WAY, SF, CA9412235	FINANCE MGR	68,000.		
J. MICHAEL MCKECHNIE ----- 9TH AVENUE AT LINCOLN WAY, SF, CA9412235	EXEC DIR	85,000.		
KEN HAROOTUNIAN ----- 9TH AVENUE AT LINCOLN WAY, SF, CA9412235	DEV DIR	90,000.		
-----				
-----				
-----				
Total number of other employees paid over \$50,000 ▶	0			

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

(See page 2 of the 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** (See page 2 of the instructions )

	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 ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B ) 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		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions )		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below )		X
4 Do you have a section 403(b) annuity plan for your employees?		X
<b>Note</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		

**Part IV Reason for Non-Private Foundation Status** (See pages 3 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 )
- 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 )

**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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total			
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	3,355,791.	86,232.	901,577.	778,871.	5,122,471.			
16 Membership fees received	243,566.	66,411.	238,110.	199,408.	747,495.			
17 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	475,684.	112,753.	538,642.	424,582.	1,551,661.			
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	177,357.	44,447.	181,601.	155,223.	558,628.			
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	7,720.	1,843.	SEE STATEMENT 10 21,858.	3,538.	34,959.			
23 Total of lines 15 through 22	4,260,118.	311,686.	1,881,788.	1,561,622.	8,015,214.			
24 Line 23 minus line 17	3,784,434.	198,933.	1,343,146.	1,137,040.	6,463,553.			
25 Enter 1% of line 23	42,601.	3,117.	18,818.	15,616.				
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a	N/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 sum of all these excess amounts.				26b	N/A		
	c Total support for section 509(a)(1) test. Enter line 24, column (e)				26c	N/A		
	d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____				26d	N/A		
	e Public support (line 26c minus line 26d total)				26e	N/A		
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26f	N/A %		
27 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)	0.
	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.							
	(2001)	0.	(2000)	0.	(1999)	0.	(1998)	0.
	c Add Amounts from column (e) for lines 15 <u>5,122,471.</u> 16 <u>747,495.</u> 17 <u>1,551,661.</u> 20 _____ 21 _____				27c	7,421,627.		
	d Add Line 27a total <u>0.</u> and line 27b total <u>0.</u>				27d	0.		
	e Public support (line 27c total minus line 27d total)				27e	7,421,627.		
	f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)				27f	8,015,214.		
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				27g	92.5942%		
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27h	6.9696%		
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.							
	NONE							

**Part V Private School Questionnaire** (See page 7 of the instructions )

N/A

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

		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?		
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?		
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? 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?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? 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?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? 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?		
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.		
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		





FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 1

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPECIAL EVENTS	94,955.		94,955.		94,955.
TO FM 990, PART I, LINE 9	94,955.		94,955.		94,955.

FORM 990

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

STATEMENT 2

INCOME

1. GROSS RECEIPTS . . . . .	382,090	
2. RETURNS AND ALLOWANCES . . . . .		
3. LINE 1 LESS LINE 2 . . . . .		382,090
4. COST OF GOODS SOLD (LINE 13) . . . . .	121,488	
5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . .		260,602

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR . . . . .	47,642	
7. MERCHANDISE PURCHASED . . . . .		
8. COST OF LABOR . . . . .		
9. MATERIALS AND SUPPLIES . . . . .	110,594	
10. OTHER COSTS . . . . .		
11. ADD LINES 6 THROUGH 10 . . . . .		158,236
12. INVENTORY AT END OF YEAR . . . . .	36,748	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12). . . . .		121,488

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 3

DESCRIPTION	AMOUNT
UNREALIZED LOSS ON INVESTMENTS	<772,087.>
TOTAL TO FORM 990, PART I, LINE 20	<772,087.>

FORM 990 OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
CONSULTANT	212,131.	152,938.	15,623.	43,570.
OTHER EXPENSES	101,948.	83,047.	11,798.	7,103.
MEMBERSHIP COSTS	18,305.	18,305.		
FOOD, BEVERAGE AND CATERING	47,744.	40,466.	1,389.	5,889.
INSURANCE	9,729.	2,335.	7,394.	
PROMOTION AND PUBLICATIONS	54,923.	53,254.	200.	1,469.
DUES AND SUBSCRIPTIONS	4,237.	1,943.	2,185.	109.
DOE EXPENSE	0.			
LANDSCAPE DESIGN	42,793.	42,793.		
RECRUITMENT	63,111.	61,706.	450.	955.
CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF THE ENVIRONMENT, PROGRAM EXPENSES	882,192.	882,192.		
CITY AND COUNTY OF SAN FRANCISCO RECREATION AND PARK DEPARTMENT, COUNTY FAIR BUILDING RENOVATION	240,000.	240,000.		
TOTAL TO FM 990, LN 43	1,677,113.	1,578,979.	39,039.	59,095.

FORM 990	OTHER PROGRAM SERVICES	STATEMENT	5
DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES	
CITY AND COUNTY OF SAN FRANCISCO, DEPARTMENT OF THE ENVIRONMENT, PROGRAM EXP CAPITAL CAMPAIGN		1,088,042. 126,064.	
TOTAL TO FORM 990, PART III, LINE E		1,214,106.	

FORM 990	NON-GOVERNMENT SECURITIES			STATEMENT	6
SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
DODGE & COX MUTUAL FUDNS	5,138,815.				5,138,815.
TO 990, LN 54 COL B	5,138,815.				5,138,815.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	7
DESCRIPTION	AMOUNT		
COSTS OF GOODS SOLD	110,594.		
TOTAL TO FORM 990, PART IV-B	110,594.		

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT	8
DESCRIPTION	AMOUNT		
COSTS OF GOODS SOLD	<110,594.>		
TOTAL TO FORM 990, PART IV-A	<110,594.>		

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOSEPH BARBACCIA 99 MARCELA AVENUE SAN FRANCISCO, CA 94116	CHAIR 0.	0.	0.	0.
TONY FARRELL 6000 HARBORD DRIVE OAKLAND, CA 94611	VICE CHAIR 0.	0.	0.	0.
RAY TALIAFFERRO 2238 HYDE STREET SAN FRANCISCO, CA 94109	VICE CHAIR 0.	0.	0.	0.
BILL GAEDE 3660 21ST STREET SAN FRANCISCO, CA 94114	TREASURER 0.	0.	0.	0.
EVA MONROE 330 CASTENADA AVENUE SAN FRANCISCO, CA 94116	SECRETARY 0.	0.	0.	0.
WALTER S. NEWMAN 3663 WASHINGTON STREET SAN FRANCISCO, CA 94118	DIRECTOR 0.	0.	0.	0.
MOHAMMED NURU 878 JAMESTOWN AVENUE SAN FRANCISCO, CA 94124	DIRECTOR 0.	0.	0.	0.
ELLEN COURTIEN 180 ELM AVENUE MILL VALLEY, CA 94941	DIRECTOR 0.	0.	0.	0.
JOHN SCHARFFERBERGER 914 HEINZ AVENUE BERKELEY, CA 94710	DIRECTOR 0.	0.	0.	0.
ZACHARY S. CONEY 1428 NADINA STREET SAN MATEO, CA 94402	DIRECTOR 0.	0.	0.	0.
LAURA ELCOCK 73 SAN CARLOS AVENUE SAUSALITO, CA 94965	DIRECTOR 0.	0.	0.	0.

MOLLY GAMBLE P.O. BOX 1826 ROSS, CA 94957	DIRECTOR 0.	0.	0.	0.
SUSAN GRAU 556 WEST SANTA INEZ HILLSBOROUGH, CA 94010	DIRECTOR 0.	0.	0.	0.
DUANE KELLY 1515 NW 51ST STREET SEATTLE, WA 98107	DIRECTOR 0.	0.	0.	0.
ROBERT LA ROCCA 760 MARKET STREET, #256 SAN FRANCISCO, CA 94102	DIRECTOR 0.	0.	0.	0.
MARIANNE PETERSON 2600 VALLEJO STREET SAN FRANCISCO, CA 94123	DIRECTOR 0.	0.	0.	0.
DAVID WHITRIDGE 475 SANSOME STREET, 12TH FLOOR SAN FRANCISCO, CA 94111	DIRECTOR 0.	0.	0.	0.
PATRICIA WIPF 3500 21ST STREET SAN FRANCISCO, CA 94114	DIRECTOR 0.	0.	0.	0.
FRANK ALMEDA CALIFORNIA ACADEMY OF SCIENCES, GOLDEN GATE PARK SAN FRANCISCO, CA 94118	EX-OFFICIO 0.	0.	0.	0.
SCOT MEDBURY 9TH AVENUE AT LINCOLN WAY SAN FRANCISCO, CA 94122	EX-OFFICIO 0.	0.	0.	0.
THIP ARK 494 LOS PALMOS DRIVE SAN FRANCISCO, CA 94127	DIRECTOR 0.	0.	0.	0.
I'LEE HOOKER 55 SPRING LANE TIBURON, CA 94920	DIRECTOR 0.	0.	0.	0.
CAROLYN KILLEFER 1661 PINE STREET SAN FRANCISCO, CA 94109	DIRECTOR 0.	0.	0.	0.
STEPHANIE MILLER 172 PARKER AVE, # 204 SAN FRANCISCO, CA 94118	MEMBER-AT-LARGE 0.	0.	0.	0.

RICK RAE 7925 COLONIAL CT PLEASANTON, CA 94588	DIRECTOR 0.	0.	0.	0.
PHILIP S. SCHLEIN 2735 SAND HILL ROAD MENLO PARK, CA 94025	DIRECTOR 0.	0.	0.	0.
PAT STOCKER 866 HERMOSA WAY MENLO PARK, CA 94025	OFFICER 0.	0.	0.	0.
TUAN TRAN 366 SANCHEZ ST SAN FRANCISCO, CA 94114	OFFICER 0.	0.	0.	0.
ERNIE NG 678 SPRUCE STREET SAN FRANCISCO, CA 94118	OFFICER 0.	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		<u>0.</u>	<u>0.</u>	<u>0.</u>

SCHEDULE A	OTHER INCOME			STATEMENT 10
DESCRIPTION	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT
OTHER INCOME	7,720.	1,843.	21,858.	3,538.
TOTAL TO SCHEDULE A, LINE 22	<u>7,720.</u>	<u>1,843.</u>	<u>21,858.</u>	<u>3,538.</u>