._{Form} ·990

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)

OMB No 1545-0047

2004

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A	or the	2004 calenda	ır year, o	r tax year beginning	, and	a enaing		
В	Check If	applicable	Please	C Name of organization	•	•	D Employer ide	ntification number
П	Address	change	use IRS	Center for Ecoliteracy			94-2911417	
一	Name cl	-	label or	Number and street (or P.O box if m	ail is not delivered to street address	Room/suite		mber
一	Initial ref	-	print or type.	2528 San Pablo Avenue			510-845-4595	
鬥			See Specific	City or town	State or country	 ZIP + 4		-45-d. Do-b. [V]
님	Final ret		Instruc-	•	5.5.5 S. 555,		F Accounting m	لنتا اسيا
닏	Amende	d return	tions.	Berkeley	CA	94702	Other (spe	Cify) ►
Ш	Applicat	ion periding		on 501(c)(3) organizations and 4947(a		H and I are	not applicable to secti	
			trusts	must attach a completed Schedule A	(Form 990 or 990-EZ).	H(a) Ist	his a group return for	affiliates? Yes X No
G	Nebsit	e: ▶ ww	w.ecolite	eracy.org		H(b) If "\	Yes," enter number of	affiliates ► N/A
						H(c) Are	all affiliates included?	Yes No
J	Organiza	ation type (check	k only one)	► X 501(c) (3) ◀ (inse	ert no.) 4947(a)(1) or 527	1 ''	'No," attach a list. See	instructions.)
K	Check he	ara 🛌	if the oma	nization's gross receipts are normally no	t more than \$25,000. The	H(d) is t	his a senarate return f	iled by an organization
				th the IRS; but if the organization receiv		1	rered by a group ruling	· — —
	_			ancial data. Some states require a co	-	<u> </u>	oup Exemption Number	
				····				
					4 400 00			rganization is not required
				o, 9b, and 10b to line 12	1,106,96			90, 990-EZ, or 990-PF).
Pa	t I			ses, and Changes in Net A		(See pag	e 18 of the inst	tructions.)
	1	Contribution	ns, gifts,	grants, and similar amounts re	ceived:			
	а			i		1,1	01,492	
	b	Indirect pub	lic suppo	ort	1b			
Q	C			utions (grants)			10000	
382	l d			through 1c) (cash \$1) 1d	1,101,492
	2	Program se	rvice rev	enue including government fe	es and contracts (from Part	VII, line 93)	. 2	482
	3							0
עבר א ז	4			and temporary cash investmen				4,993
<u>ڄ</u>	5		•	est from securities				0
3	1				1 - 1		8 55.4	
`				98				
ו ו				(loss) (subtract line 6b from li			. 6c	0
7	7			come (describe) 7	0
> 9	ء فا			sales of assets other	(A) Securities	(B) Other	Particular and a	
Revenue	0 4				0 8a	(2) 02.0.	0	
) &	h			pasis and sales expenses	0 8b		0	
)	1 5			h schedule)	0 8c		0	
	"	•	, .	ombine line 8c, columns (A) a			. 8d	0
	9 "			tivities (attach schedule). If any an				
	1 -	Gross rever		•	ount is norn gaming, check he			
	ª		-	ed on line 1a)			0	
	_			es other than fundraising expe			0	
				from special events (subtract			9с	0
				ntory, less returns and allowan				
				• •		-		
				sold		20.100	10c	0
				om sales of inventory (attach sche			11	0
	111	Ciner reven	iue (iroir	Part VII, line 103)			12	1,106,967
	12	notal reven	niece "	lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 1	SEIVED	<u> </u>	13	949,020
w	13	Program se	ivices (I	rom line 44, column (B))	たことでして		. 13	140,505
Expenses	14			eneral (from line 44, column (C	" 			
96	15	rungraising	(Trom III	ne 44, column (D)	1 5 2005 . S		15	64,001
ũ	16	Payments to	o amiliate	es (attach scheduler) INUV.	ר אַ לַמַּחַ י [אַן י י י		16	1 152 526
	17			ld lines 16 and 44 column (A)		· · · · · ·	17	1,153,526
Not Accepte	18			or the year (subtract line 17 fro				-46,559 426,502
90	19			palances at beginning of year				426,592
1	20			et assets or fund balances (att				000.000
2	21	Net assets	or fund b	palances at end of year (combi	ne lines 18, <u>19, and 2</u> 0) .	<u>, , , , , , , , , , , , , , , , , , , </u>	21	380,033

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

613 28

Form **990** (2004)

Functional Expenses and section 4947(a)(1) nonexempt of	charitable tru	ists but optional for o	thers. (See page 22	of the instructions.)	
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) . See Stmt 1			1		
(cash \$ 120,000 noncash \$ 0	<i>'</i>	120,000	120,000		The state of
23 Specific assistance to individuals (attach schedule)	23	0			
Benefits paid to or for members (attach schedule)Compensation of officers, directors, etc.	24	100 101		40.04	
26 Other salaries and wages	25	102,101			
27 Pension plan contributions	26 27	331,976 0	286,255	26,16	9 19,552
28 Other employee benefits	28	78,854	67,184	6.60	5.04
29 Payroll taxes		35,803			
30 Professional fundraising fees	30	00,000	30,304	3,00	2,292
31 Accounting fees	31	6,463		1,81	3 4,650
32 Legal fees	32	0		1,070	7,000
33 Supplies	33	11,455	9,647	1,006	802
34 Telephone	34	7,635	6,287	749	
35 Postage and shipping	35	1,607	1,339	128	
36 Occupancy	36	99,534	82,836	9,277	7,421
37 Equipment rental and maintenance	37	2,527	340	2,187	7
38 Printing and publications	38	15,263	15,263		
39 Travel	39	9,809	8,510	821	
40 Conferences, conventions, and meetings	40	1,522	1,167		355
41 Interest	41	0	45.770	4.00	4.500
= -p	42	19,236	15,773	1,924	
h Duce/hocks/ouhe	43a 43b	97,834	36,413	60,241	
e incurance	43b	2,169 7,120	398 5,838	1,593 712	
d long on dispersal accepts	43d	6,375	5,228	637	
e Miscellaneous	43e	5,014	3,115	1,550	
f See Statement 6	43f	191,229	169,200	11,858	
Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13 — 15	44	1,153,526	949,020	140,505	
Are any joint costs from a combined educational campaign and fundraising sof "Yes," enter (i) the aggregate amount of these joint costs \$ iii) the amount allocated to Management and general \$ Part III Statement of Program Service Accomplishment What is the organization's primary exempt purpose? Educational All organizations must describe their exempt purpose achievements in a clean of clients served, publications issued, etc. Discuss achievements that are not	0; its (See	(ii) the amount a and (iv) the amo page 25 of th cise manner. Sta	llocated to Progra unt allocated to F e instructions.	m services \$undraising \$	Program Service Expenses Required for 501(c)(3) and (4) orgs., and 4947(a)(1)
organizations and 4947(a)(1) nonexempt charitable trusts must also enter the	amount o	of grants and allo			trusts; but optional for others.)
a Goo Glatericit G					
	(Grai	nts and allocati	ons \$, ,	949,020
b					
c		nts and allocati	ons \$		
	(Gra)	nts and allocati	one ¢		
d		no and anddall	лнэ ф		
••••••					
	10	ate and alleget			
e Other program services (attach schedule)		nts and allocation and allocation			

ra	T IV	Balance Sheets (See page 25 of the instructions.)			
	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
	45	Cashnon-interest-bearing	0		20,875
	46	Savings and temporary cash investments	505,136	46	385,350
	47 a	Accounts receivable			
	l .	Less: allowance for doubtful accounts 47b 0	1.029	47c	13,909
		Pledges receivable			
	49	Less: allowance for doubtful accounts 48b 0	14,214		0
	50	Grants receivable	75,000	49	
		(attach schedule)	0	50	o
/ 0	51 a	Other notes and loans receivable (attach		2.70	
Assets		schedule)			
S	4	Less: allowance for doubtful accounts 51b 0		51c	0
	52 53	Inventories for sale or use	3,563		3,111
	54	Prepaid expenses and deferred charges	7,298 0		0
		Investments—land, buildings, and		34	<u> </u>
		equipment: basis			
	ь	Less: accumulated depreciation (attach			
		schedule)		55c	0
	56	Investments—other (attach schedule)	0	56	0
		Land, buildings, and equipment: basis 57a 66,468 Less: accumulated depreciation (attach			
		schedule) See Statement 2 57b 37,822	28,204	57c	28,646
	58	Other assets (describe Deposits)	15,177		9,027
	59	Total assets (add lines 45 through 58) (must equal line 74)	649,621		460,918
i	60 61	Accounts payable and accrued expenses	14,154 208,875		11,010 69,875
	62	Deferred revenue	200,070		00,070
SR.	63	Loans from officers, directors, trustees, and key employees (attach	-		
E C		schedule)	0		0
Liabilities		Tax-exempt bond liabilities (attach schedule)		64a	0
_	65	Mortgages and other notes payable (attach schedule)		64b 65	0
	65	Other liabilities (describe	<u></u>	03	<u> </u>
	66	Total liabilities (add lines 60 through 65)	223,029	66	80,885
	Orga	nizations that follow SFAS 117, check here X and complete lines			
		67 through 69 and lines 73 and 74.			
8	67	Unrestricted	197,766		245,212
and	68	Temporarily restricted	228,826		134,821
Ba	69 Orga	Permanently restricted	0	09	
2	Orga	complete lines 70 through 74.			
Ę	70	Capital stock, trust principal, or current funds	0	70	
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, and equipment fund	0	71	
88	72	Retained earnings, endowment, accumulated income, or other funds	0	72	
¥	73	Total net assets or fund balances (add lines 67 through 69 or			
ž		lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	426,592	73	380,033
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)	649,621		460,918
		()	,,	لــــــــــــــــــــــــــــــــــــــ	

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.

Form 99		Center for Eco	olitera		94-2911417	
Part I			Par		iliation of Expenses	
	Financial Statements with Rev Return (See page 27 of the instr			Financi Return	al Statements with Ex	xpenses per
	Total revenue, gains, and other support	detions.)	a		and losses per	
a		a N/A	# a	•		a N/A
b	Amounts included on line a but not	a INA	b		ar statements	a jiv/A
b	on line 12, Form 990:					
(1)	Net unrealized gains			on line 17, Ford (1) Donated service		
(1)	on investments \$		8	and use of faci		
(2)	Donated services and			(2) Prior year adjust	· · · · · · · · · · · · · · · · · · ·	
(2)	use of facilities \$			reported on line		
(3)	Recoveries of prior			Form 990		
(3)	year grants \$	h. H		(3) Losses reporte		
(4)	Other (specify):			line 20, Form 9		
(4)	e			(4) Other (specify)		
	ę	100	Ä	(4) Other (specify)	•	
	Add amounts on lines (1) through (4)	b (1	• • • • • • • • • • • • • • • • • • • •	<u>ə</u>	Parliane Land
	7.00 amounts on mos (1) amough (4)	" 	4	Add amounts o	n lines (1) through (4)	b 0
С	Line a minus line b	اءا ر	c		ne b	c 0
d	Amounts included on line 12.		d			
•	Form 990 but not on line a:			Form 990 but n	•	artificació describio
(1)	Investment expenses			(1) Investment exp		
(.,	not included on line		Total Control	not included on		
	6b, Form 990 \$		ğ	6b, Form 990		177
(2)	Other (specify):			(2) Other (specify):		
(-/	Curor (opeciny).		Š.	(2) Calci (opcony)	•	
	······				•••••	
	Add amounts on lines (1) and (2) >	d (1	Add amounts o	n lines (1) and (2) . >	d 0
۵	Total revenue per line 12, Form 990		e P		per line 17, Form 990	
•		e N/A	"		•	e N/A
Part V			mple			
· are v	of the instructions.)			y coo (mior odon o	no oven ii not compensa	.ou, ooo pago z
	or the medicality	I		(C) Compensation	(D) Contributions to	(E) Expense
	(A) Name and address	(B) Title and average per week devoted to per		(if not paid,	employee benefit plans &	account and other
			OSILIOIT	enter -0)	deferred compensation	allowances
Name	Zenobia Barlow Str 2528 San Pablo Ave	Title Executive Dir				İ
City	Berkeley ST CA zip 94702	Hr/WK	40	102,101	10,210	0
Name	Str	Title				
City		Hr/WK			, , , , , , , , , , , , , , , , , , , ,	ļ
	Str	Title				
City		Hr/WK		······		
No-	Ct-	THE			i	Í.

(A) Name and address				and average hours k devoted to position	(If not paid, enter -0)	employee benefit plans & deferred compensation	account and other allowances
Name Zenobia Barlow	Str 2528	San Pablo Ave	Title I	Executive Director		·	
City Berkeley	ST CA	zip 94702	Hr/WK	40	102,101	10,210	0
Name	Str		Title		·		
City	ST	ZiP	Hr/WK				
Name	Str		Title				
Cıty	ST	ZIP	Hr/WK				
Name	Str		Title				
City	ST	ZIP	Hr/WK				
Name	Str		Title				
City	ST	ZIP	Hr/WK				
Name Board of Directors	Str		Title				
City See Statement 4	ST	ZIP	Hr/WK			· · · · · · · · · · · · · · · · · · ·	
Name	Str		Title		Ì		
City	ST	ZIP	Hr/WK				
Name	Str		Title				
City	ST	ZIP	Hr/WK				
Name	Str		Title			}	
City	ST	ZIP	Hr/WK				
Name	Str		Title				
City	ST	ZIP	Hr/WK				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ► X No If "Yes," attach schedule—see page 28 of the instructions.

Form 99	90 (2004)	Center for Ecoliteracy 94-2911417			Page 5		
Part '	VI	Other Information (See page 28 of the instructions.)		Yes	No		
76	Did the	e organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		×		
77	Were	any changes made in the organizing or governing documents but not reported to the IRS?			×		
		s," attach a conformed copy of the changes.					
78 a	Did the	e organization have unrelated business gross income of \$1,000 or more during the year covered by this return? .	. 78	a .	x		
b		s," has it filed a tax return on Form 990-T for this year?		N/A			
79		here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	. 79		×		
80 a		organization related (other than by association with a statewide or nationwide organization) through common					
		ership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	. 80	3	X		
b		s," enter the name of the organization ► N/A					
	. <u>N/A</u>	and check whether it is exempt or nonexempt.					
		direct and indirect political expenditures. See line 81 instructions 81a	0				
		e organization file Form 1120-POL for this year?	. 811	<u> </u>	X		
82 a		ne organization receive donated services or the use of materials, equipment, or facilities at no charge	. 828	Í			
L	or at substantially less than fair rental value?						
D		s," you may indicate the value of these items here. Do not include this amount					
92 -		/enue in Part I or as an expense in Part II. (See instructions in Part III.) . 82b N/A		O-2 COMPANIES			
		e organization comply with the public inspection requirements for returns and exemption applications? e organization comply with the disclosure requirements relating to quid pro quo contributions?					
		e organization comply with the disclosure requirements relating to quid pro quo contributions?			 		
		s," did the organization include with every solicitation an express statement that such contributions	. 046		X		
-		s were not tax deductible?	. 84t	N/A	CONTRACTOR OF THE PARTY.		
85)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		**			
b	Did the	e organization make only in-house lobbying expenditures of \$2,000 or less?	. 85t				
		s" was answered to either 85a or 85b, do not complete 85c through 85h below unless the					
		ization received a waiver for proxy tax owed for the prior year.					
С	Dues, a	assessments, and similar amounts from members					
đ	Section	n 162(e) lobbying and political expenditures 85d N/A	į				
8	Aggreg	gate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A					
		le amount of lobbying and political expenditures (line 85d less 85e)					
		the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A			
		ion 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to)				
		sonable estimate of dues allocable to nondeductible lobbying and political expenditures for the		1			
		ing tax year?	. 85h	N/A			
		(7) orgs. Enter: a Initiation fees and capital contributions included on line 12					
87		receipts, included on line 12, for public use of club facilities					
		income from other sources. (Do not net amounts due or paid to other					
		es against amounts due or received from them.)					
		time during the year, did the organization own a 50% or greater interest in a taxable corporation or					
		rship, or an entity disregarded as separate from the organization under Regulations sections			l		
		701-2 and 301.7701-3? If "Yes," complete Part IX	. 88		X		
		(3) organizations. Enter: Amount of tax imposed on the organization during the year under:					
	section	n 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶	0				
b	501(c)((3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction					
		the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach					
		ement explaining each transaction	. 89b		<u> </u>		
		Amount of tax imposed on the organization managers or disqualified persons during the year under					
		ns 4912, 4955, and 4958					
		Amount of tax on line 89c, above, reimbursed by the organization			0		
90 a	List the	e states with which a copy of this return is filed CA					
b	Numbe	er of employees employed in the pay period that includes March 12, 2004 (See instructions.)			8		
		ooks are in care of ► Name The Organization Telephone no. ► 510-					
		ed at ► 2528 San Pablo Avenue City Berkeley ST CA 7IP + 4 ► 94702		•			
92	Section	od at ► 2528 San Pablo Avenue City Berkeley ST CA ZIP + 4 ► 94702 In 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here					
		nter the amount of tax-exempt interest received or accrued during the tax year					
	and bill	10 another of tax-exempt interest received of accrued uniting the tax year 92	// \				

	0 (2004)	Center for Ecoliter			94-2911417	Page 6
Part V	Analysis of Income-Producing Ac			structions.)		
Note:	Enter gross amounts unless otherwise	Unrelated busing	ness income	Excluded by section	on 512, 513, or 514	(E)
indicat	ed.	(A)	(B)	(C)	(D)	Related or exempt function
93	Program service revenue:	Business code	Amount	Exclusion code	Amount	income
а	Book Sales, net					482
b						i
С						
d						
θ						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies .					
94	Membership dues and assessments					
95	Interest on savings and temporary cash investments .			14	4,993	
96	Dividends and interest from securities					
97	Net rental income or (loss) from real estate:		Z. Ziniez	Note that the second		
а	debt-financed property					
b	not debt-financed property					
98	Net rental income or (loss) from personal property					
99	Other investment income					
100	Gain or (loss) from sales of assets other than inventory					
101	Net income or (loss) from special events					
	Gross profit or (loss) from sales of inventory					
103	Other revenue: a					
						<u></u>
d						
0						
104	Subtotal (add columns (B), (D), and (E))				4,993	
	Total (add line 104, columns (B), (D), and (E))				> _	5,475
	<u>ine</u> 105 plus line 1d, Part I, should equal the a					
Part V	Relationship of Activities to the A	ccomplishment	of Exempt P	urposes (See p	age 34 of the ir	structions.)
Line N					to the accomplish	ment
	of the organization's exempt purposes (other			oses).		
<u>93a</u>	Revenue received in exchange for program	related books and	materials.			
						
0 40			31	F-AiAi (O	04 of the in-	
Part I			Disregarded			
Part IX	(A)	(B)	of	(C)	(D)	(E)
Part IX			of Notes			
Part 1	(A) Name, address, and EIN of corporation,	(B) Percentage	of Notes	(C)	(D)	(E) End-of-year
	(A) Name, address, and EIN of corporation,	(B) Percentage	of rest Natu	(C)	(D) Total income	(E) End-of-year assets
	(A) Name, address, and EIN of corporation,	(B) Percentage	of Natu	(C)	(D) Total income 0	(E) End-of-year assets 0
	(A) Name, address, and EIN of corporation,	(B) Percentage	of Natu	(C)	(D) Total income 0	(E) End-of-year assets 0 0
	(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage ownership inte	of Natu % % % %	(C) re of activities	(D) Total income 0 0 0 0	(E) End-of-year assets 0 0 0 0
N/A Part X	(A) Name, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Transfers	Percentage ownership inte	of Natu % % % % Personal Be	(C) re of activities enefit Contracts	(D) Total income 0 0 0 0 (See page 34 of	(E) End-of-year assets 0 0 0 0 he instructions.)
N/A Part X (a) Dic	(A) Name, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Transfers of the organization, during the year, receive any funds, directions.	Percentage ownership inte	of Natu % % % % Personal Be	(C) re of activities enefit Contracts ersonal benefit contra	(D) Total income 0 0 0 0 0 (See page 34 of oct?	(E) End-of-year assets 0 0 0 0 the instructions.)
N/A Part X (a) Did (b) Did	(A) Name, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Transfers of the organization, during the year, receive any funds, direct the organization, during the year, pay premiud	Percentage of ownership inte	of Natu % % % % Personal Be	(C) re of activities enefit Contracts ersonal benefit contra	(D) Total income 0 0 0 0 0 (See page 34 of oct?	(E) End-of-year assets 0 0 0 0 he instructions.)
N/A Part X (a) Did (b) Did	(A) Name, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Transfers of the organization, during the year, receive any funds, direct the organization, during the year, pay premiud for Yes" to (b), file Form 8870 and Form 4720	Percentage ownership inte	of virest Natu	re of activities enefit Contracts ersonal benefit contra	(D) Total income 0 0 0 0 0 (See page 34 of ct?	(E) End-of-year assets 0 0 0 0 the instructions.) Yes × No Yes × No
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SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Name Michael Stone

Str 2528 San Pablo Avenue

(a) Name and address of each employee paid more

than \$50,000

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.)

(c) Compensation

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

OMB No 1545-0047

(e) Expense

account and other

allowances

(d) Contributions to

employee benefit plans &

deferred compensation

Internal Revenue Service Name of the organization **Employer Identification number** Center for Ecoliteracy 94-2911417 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.")

(b) Title and average hours

per week devoted to position

City Berkeley	ST CA	Т.	itle Editor/Writer			
Zip 94702	Country	A	vg hr/wk 40	60,923	6,092	o
Name James Koulia	as					
Str 2528 San Pa	ablo Ave.		Communications			
City Berkeley	ST CA	Т	itle Projects Manager			
Zip 94702	Country	A	vg hr/wk 40	58,490	5,849	0
Name Janet Brown						
Str 2528 San Pa	blo Ave.		ļ			
City Berkeley	ST CA	TI	ttle Program Officer			
Zip 94702	Country	l A	vg hr/wk 40	77,987	7,799	0
Name		· [
Str						
City	ST	Ti	tte			
Zip	Country	A	vg hr/wk	•		
Name						
Str						
City	ST	Ti	tle			
Zip	Country	A	vg hr/wk			
Total number of other	employees paid over		· · · · · · · · · · · · · · · · · · ·			
\$50,000 .	<u> </u>		0			
Part II Comp	ensation of the F	ive Highes	st Paid Independent	Contractors for Pr	ofessional Service	S
(See p	page 2 of the instru	ictions. List	each one (whether in	dividuals or firms).	If there are none, er	nter "None.")
(a) Name and	address of each independ	ent contractor p	aid more than \$50,000	(b) Tvo	e of service	(c) Compensation
Name Karen Brown	·	<u></u>	Check here if a business	1,7,2,		
Str 21 Marina Bly			Oncok hore ii a basiness[-		
City San Rafael	<u> </u>				ľ	
•	IP 94901	Country		Graphic and Web I	Design	72,287
Name Margo Crabtr	 		Check here if a business			
Str 313 Townser				7		
City Aptos				-1		
	IP 95003	Country		Researcher		55,765
Name			Check here if a business		*···	
Str						
City				-1		
-	IP .	Country				
Name	**************************************		Check here if a business			
Str						
City				•1		
	IP .	Country				
Name			Check here if a business			
Str				7		
City				1		
	IP	Country				
	s receiving over \$50,00					
professional services	=	>				

Pai	rt III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	att or	empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities	1		x
	Org org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of blobbying activities.		• ()	Ţ+
2	sul wit ow	tring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any obstantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or hany taxable organization with which any such person is affiliated as an officer, director, trustee, majority mer, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)			
а	Sa	le, exchange, or leasing of property?	2a		X
b		nding of money or other extension of credit?	2b		Х
c d		rnishing of goods, services, or facilities?	2c 2d	Х	X
8	Tra	insfer of any part of its income or assets?	2ө		х
3 a	Do	you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			
		determine that recipients qualify to receive payments.) See Statement 5	3a	X	
D 4a		you have a section 403(b) annuity plan for your employees?	3b	Х	
7 4		the use or distribution of funds?	4a	l	Х
b		you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X
Par		Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.) ization is not a private foundation because it is: (Please check only ONE applicable box.)			
5	٦	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	Ħ	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	H	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	H	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	H	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's			
3		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.)			
11 a	X	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.)			
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 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 of from about 1 to 1 to 2 to 2 to 2 to 3 to 3 to 3 to 3 to 3			
	-				
1.4	ر ا	An exemination exemined and encysted to test for multiple cafety. Section 500/aV/A) (Section 500/aV/A)			
17	L	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)			

Note: You may use the worksheel in the instructions for converting from the accrual to the cash method of accounting.	Part	IV-A Support Schedule (Complete only if you check	ed a box on line	e 10, 11, or 12.)	Use cash meth	od of a	ccoun	ting.
15 Gifts, grants, and combibutions received. (Do not include unusual grants. See line 28.) 1,228,647 1,861,092 1,989,778 2,315,337 7,194,852 (1.6. Membership fees received from continuous algorithms. See line 28.) 1,228,647 1,861,092 1,899,778 2,315,337 7,194,852 (1.6. Membership fees received from continuous and grants. See line 28. (See line 28. 1.6. Membership fees received from continuous and grants. See line 28. (See line 28. 1.6. Membership fees received from exprents on securities forms and grants. See line 28. (See line 28. 1.6. Membership fees received from payments on securities forms (see line) 152((8)), members, royalfies, and unriested business stable income (fees section 511 taxes) from businesses acquired by the organization steer. June 30, 1975 . 3,310 9,641 31,377 24,592 68,920 Nst income form unrelated business stable line 18								(a) Total
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17 Gross receipts from admissions, merchancles sold or services performed, or turnishing of facilities in any activity that is related to the organizations charatible, led, purpose 8, 239 2,388 6,519 2,604 19,749 18 Gross income from Interest, dividends, amounts received from payments on securities loans (section 51/2(k)5), rents, reyallers, and unrelated business stands in come (less section 511 taxes) from businesses acquired by the organization stress that 93,1975 3,310 9,641 31,377 24,592 66,920 19 Net Income from unrelated business acquired in organization stress that 93,1975 3,310 9,641 31,377 24,592 66,920 19 Net Income from unrelated business acquired in organization stress that 93,1975 19 Net Income from unrelated business acquired in organization stress that 93,1975 19 Net Income from unrelated business acquired in organization to the organization's benefit and either paid to 1 to expended on its behalf 0 19 Net Income from unrelated business acquired in organization by a governmental unit without charge 0 not included in line 18 0 0 1 Tax revenues levided for the organization's benefit and either paid to 1 to expended on the organization by a governmental unit without charge 0 not include any organization by a governmental unit without charge 10 not include any or fees in the second of the organization organization organization by a governmental unit visit organization by a governmental unit visit organization by a governmental unit organization organ	16		1,220,041	1,001,032	1,503,770	2,0	10,007	
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26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts c Total support for section 509(a)(1) test: Enter line 24, column (e) d Add: Amounts from column (e) for lines: 18								
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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts. Left 1 26b 4,329,894 c Total support for section 509(a)(1) test: Enter line 24, column (e)								
governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts. Comparison of the public support for section 509(a)(1) test: Enter line 24, column (e)		•		* **			26a_	145,276
amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts. 26b 4,329,894 c Total support for section 509(a)(1) test: Enter line 24, column (e) Add: Amounts from column (e) for lines: 18 68,920 19 0 Public support (line 26c minus line 26d total) 22 35 26b 4,329,894 Public support (line 26c minus line 26d total) 26 286 2,864,958 F Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person." Do not file this list with your return. Enter the sum of such 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: (2003) 0 (2002) 0 (2001) 0 (2001) D (2000) 0 (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: (2003) 0 (2002) 0 (2001) 0 (2000) 0 c Add: Amounts from column (e) for lines: 15 0 16 0 Public support (line 27c total	b							2.430.54
c Total support for section 509(a)(1) test: Enter line 24, column (e) d Add: Amounts from column (e) for lines: 18 68,920 19 0 e Public support (line 26c minus line 26d total) Public support percentage (lline 26e (numerator) divided by line 26c (denominator)) 26d 2,864,958 f Public support percentage (lline 26e (numerator) divided by line 26c (denominator)) 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: (2003) 0 (2002) 0 (2001) 0 (2000) 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: (2003) 0 (2002) 0 (2001) 0 (2001) 0 (2000) 0 c Add: Amounts from column (e) for lines: 15 0 16 0 17 0 20 0 16 0 Public support (line 27c total minus line 27d total) 0 and line 27b total 0 27f 0 f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)							264	4 220 904
d Add: Amounts from column (e) for lines: 18	_	-		an those excess	amounts		-	
e Public support (line 26c minus line 26d total) 2							200	7,203,007
Public support (line 26c minus line 26d total) f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26e 2,864,958 26f 39.44% 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: (2003)	u			4 329 8	94	•	28d	4 398 849
7 Public support percentage (Iline 26e (numerator) divided by Iline 26c (denominator)). 7 Public support percentage (Iline 26e (numerator) divided by Iline 26c (denominator)). 7 Public support percentage (Iline 27e (numerator) divided by Iline 27f (denominator)). 7 Public support percentage (Iline 27e (numerator) divided by Iline 27f (denominator)). 7 Public support percentage (Iline 27e and page 2003, prepare a list for your records to show the name of, and total amounts for each year from, each "disqualified person." Do not file this Ilst with your return. Enter the sum of such amounts for each year from, each "disqualified person." Do not file this Ilst with your records to show the name of, and amount 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 Ilst 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: (2003)								
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: (2003)	f	• • • • • • • • • • • • • • • • • • • •		nator))		. >		
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: (2003)	27				re received from a	"disqua	ified pe	
(2003) 0 (2002) 0 (2001) 0 (2000) 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: (2003) 0 (2002) 0 (2001) 0 (2000) 0 c Add: Amounts from column (e) for lines: 15 0 16 0 17 0 20 0 16 0 Add. Line 27a total 0 27c 0 d Add. Line 27a total 0 and line 27b total 0 27d 0 Public support (line 27c total minus line 27d total) 0 27e 0 f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) 27f (denominator)) 27g 0.00% h Investment income percentage (line 27e (numerator) divided by line 27f (denominator)) 27h 0.00% 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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								•
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: (2003) 0 (2002) 0 (2001) 0 (2000) 0 c Add: Amounts from column (e) for lines: 15 0 16 0 27c 0 d Add. Line 27a total 0 and line 27b total 0 27d 0 27d 0 e Public support (line 27c total minus line 27d total) 0 27e 0 f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) 27f 0 0 g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27h 0.00% h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h 0.00% 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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		file this list with your return. Enter the sum of such amounts for	or each year:					
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: (2003) 0 (2002) 0 (2001) 0 (2000) 0 c Add: Amounts from column (e) for lines: 15 0 16 0 27c 0 d Add. Line 27a total 0 and line 27b total 0 27d 0 27d 0 e Public support (line 27c total minus line 27d total) 0 27e 0 f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) 27f 0 0 g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27h 0.00% h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h 0.00% 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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		(2003) 0 (2002) 0	(20	01)	0((2000)		0
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: (2003) 0 (2002) 0 (2001) 0 (2000) 0 c Add: Amounts from column (e) for lines: 15 0 16 0 17 0 20 0 21 0 0 21 0 0 27d 0 d Add. Line 27a total 0 and line 27b total 0 27d 0 Public support (line 27c total minus line 27d total) 27e 0 f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) 10 27f 0 0 g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27g 0.00% h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h 0.00% 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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	ь	For any amount included in line 17 that was received from each	person (other than			ist for vo	ur recoi	rds to
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: (2003) 0 (2002) 0 (2001) 0 (2000) 0 c Add: Amounts from column (e) for lines: 15 0 16 0 17 0 20 0 21 0 0 27c 0 d Add. Line 27a total 0 27c total minus line 27d total) 27d 0 e Public support (line 27c total minus line 27d total) 27e 0 f Total support percentage (line 27e (numerator) divided by line 27f (denominator)) 27g 0.00% h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h 0.00% Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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		•	•	•		-		
amounts) for each year: (2003) 0 (2002) 0 (2001) 0 (2000) 0 c Add: Amounts from column (e) for lines: 15 0 16 0 17 0 20 0 21 0 .								omputing the
(2003) 0 (2002) 0 (2001) 0 (2000) 0 c Add: Amounts from column (e) for lines: 15 0 16 0 17 0 20 0 21 0 .			described in (1) or	(2), enter the sum	of these different	ces (the	excess	
c Add: Amounts from column (e) for lines: 15 0 16 0 17 0 20 0 21 0 .		•						
total support (line 27c total minus line 27d total) Total support percentage (line 27e (numerator) divided by line 27f (denominator)) Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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		(2003) 0 (2002) 0	(20)	01)	.0. ((2000)		0
total support (line 27c total minus line 27d total) The public support (line 27c total minus line 27d total) The public support for section 509(a)(2) test: Enter amount from line 23, column (e) The public support percentage (line 27e (numerator) divided by line 27f (denominator)) The public support percentage (line 27e (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) The public support percentage (line 18, column (e) (numerator) divided by line 27f (denom	_	Add: Amounts from column (a) for lines: 45	0 16	0				
d Add. Line 27a total	C		U 10 -	<u> </u>			270	<u> </u>
e Public support (line 27c total minus line 27d total)	а	Add Line 27s total 0 and line	27h total	<u>0</u>				
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)			-					
Public support percentage (line 27e (numerator) divided by line 27f (denominator))	f						\$2.85 (\$3075)500	
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	, u							0.00%
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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						. ▶		
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						ough 200	3, prep	are
		a list for your records to show, for each year, the name of the co	ntributor, the date	and amount of the	e grant, and a brie	f descrip	tion of	

N/A

Part V Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV) 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, Yes No 29 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, 30 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 31 If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: 32a Records documenting that scholarships and other financial assistance are awarded on a racially c Copies of all catalogues, brochures, announcements, and other written communications to the public 32c 32d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: 33 Students' rights or privileges? 33a Admissions policies? . Employment of faculty or administrative staff? 33c 33d Scholarships or other financial assistance? . Educational policies? . Use of facilities? . Athletic programs? . 33g Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 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. 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

Pai	VI-A Lobbying Expenditures by Electing (To be completed ONLY by an eligible				tions.)	
Chec	k ▶a ☐ if the organization belongs to an affiliated grou				nited control* prov	sions apply.
	Limits on Lobbying I	•			(a) Affiliated group	(b) To be completed for ALL electing
	(The term "expenditures" means a				totals	organizations
36	Total lobbying expenditures to influence public opinion (gr				0	0
37 38	Total lobbying expenditures to influence a legislative body Total lobbying expenditures (add lines 36 and 37)				0	0
39	Other exempt purpose expenditures				0	<u>0</u>
40	Total exempt purpose expenditures (add lines 38 and 39)				0	0
41	Lobbying nontaxable amount. Enter the amount from the f					
		ing nontaxable amo	ount is—		36.0 1. 0	10
	Not over \$500,000	-)		
	Over \$500,000 but not over \$1,000,000\$100,000 p	olus 15% of the exces	ss over \$500,000			
	Over \$1,000,000 but not over \$1,500,000 \$175,000 p	0 41	0	0		
	Over \$1,500,000 but not over \$17,000,000 . \$225,000 p					
	Over \$17,000,000					
42	Grassroots nontaxable amount (enter 25% of line 41)				0	0
43 44	Subtract line 42 from line 36. Enter -0- if line 42 is more the				0	0
44	Subtract line 41 from line 38. Enter -0- if line 41 is more that	an iine 38		44	0	0
	Caution: If there is an amount on either line 43 or line 44,	you must file Form 4	720.			
	4-Year Averag	ing Period Und	er Section 50	1(h)		
	(Some organizations that made a section 5		•		lumns below.	
	See the instructions for li					
		Lobbyl	ng Expenditure	s During 4-Ye	ar Averaging P	eriod
	Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45	Lobbying nontaxable amount	0	0	0	0	0
46	Lobbying ceiling amount (150% of line 45(e))		and the second			0
47	Total lobbying expenditures	0	0	0	0	0
48	Grassroots nontaxable amount	0	0	0	0	0
49	Grassroots ceiling amount (150% of line 48(e))	_ is to be a second of		Carlo Salak		0
50	Grassroots lobbying expenditures		o	ol	اه	0
Par	VI-B Lobbying Activity by Nonelecting Pu					
	(For reporting only by organizations that	at did not comple	te Part VI-A) (See page 11 o	of the instruction	ns.)
	the year, did the organization attempt to influence national of to influence public opinion on a legislative matter or reference.	_		ny	Yes No	Amount
а	Volunteers				Х	
b	Paid staff or management (Include compensation in expen-	ses reported on lines	c through h.) .		X	
C	Media advertisements				X	0
d	Mailings to members, legislators, or the public				X	0
е	Publications, or published or broadcast statements				X	0
f	Grants to other organizations for lobbying purposes				X	0
8	Direct contact with legislators, their staffs, government office	-	•		\\\X\	0
h	Rallies, demonstrations, seminars, conventions, speeches,				X	0
ı	Total lobbying expenditures (Add lines c through h.) If "Yes" to any of the above, also attach a statement giving				Section of Land	0
	in 165 to any or the above, also attach a statement giving	a uctaneu uescriptio	i or the loopying	acuviues.	Sahadula A /Farra 60	0 a= 990-E7\ 2004

Scriedule A	((FOI))1 990 OF 990-E2) 2004		Center for Ecoliteracy	94-2911417		Page 6	
Part VI		-	sfers To and Transaction page 11 of the instructions	ns and Relationships With Noncharitable			
	d the reporting organization	on directly or indir	ectly engage in any of the follow	ving with any other organization described in section 527, relating to political organizations?			
			a noncharitable exempt organiza		Yes	No	
	•		, •			X	
				a(ii)	+-	X	
	ther transactions:			a(ii)	+	 ^	
		of accepte with a ne	enchaditable evennt erganization	b(i)		×	
	-		· -		+	X	
	-			b(ii)	+	X	
•					 		
•					+	X	
•	·				+	X	
_	•		· -			X	
	-	_		3		X	
of in	the goods, other assets, of any transaction or sharing	or services given	by the reporting organization. If now in column (d) the value of the	Column (b) should always show the fair market value the organization received less than fair market value e goods, other assets, or services received:			
(a) Line no	(b) Amount involved	Nome of non	(c) charitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements	hadaa aaaaaaaaa		
Line no	Alliquit involved	148/116 0/ 110/1	Chamable exempt organization	Description of transiers, transactions, and snaming arrang	3011101113		
							
					 		
		- , .			-		
		·····	····				
							
			· · · · · · · · · · · · · · · · · · ·				
de	-	of the Code (othe	ed with, or related to, one or mo r than section 501(c)(3)) or in se	re tax-exempt organizations oction 527?	s X	No	
	(a) Name of organization	1	(b) Type of organization	(c) Description of relationship			
		v					
							
							

Statement 1
Form 990
Part II Line 22
Grants and allocations

Name/address		Amount
River of Words, Berkeley, CA		20,000
Slide Ranch, Muir Beach, CA The Land Institute, Salinas, KS		10,000 10,000
Third World Network, Malaysia International Forum on Globalization		10,000 20,000
David Brower Center, Berkeley, CA		50,000
	TOTAL	120,000

Disk: Tax

File: CELTaxSched04xls

Sheet: Grantinfo

Statement 2
Part II, Line 42
Part IV, Line 57b
Fixed Asset Schedule

Vear	or Ecoliteracy Accumulated description	cost	7]	mthd/wee	Dr vre	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	200
year .	description	13 300	+	mulu/yrs	<u>91 713</u> .	*****					1770	177/_	1778	1999	2000	2001	2002	2003	2004
990	computers, printer	13,289	' a	SL/ 5		2,657	2,657	2,657	2,658	2,658	<u> </u>	 						j	i
	(2 SE and I LC macs)		L		¦						i			_				, 	; •
9 91	computers (2 LCIII)	2,554	c	L		2,554		! !	l					i					
	various furniture	803	Ь		314	489	· · · · · · · · · · · · · · · · · · ·	·		T	T	·	T	1			i		T
	Powerbook #1	2,972			†	2,972					i		t	·				 	
991	total at 1991	19,618			 	8,672				 			 					†	
992					 	0,072	11 220				 	 					 		ļ
	total at 1992	19,618			 -	ļ	11,329			<u></u>			ļ	L					<u> </u>
993	total at 1993	19,618			ļ	<u> </u>	ļ	13,987	<u></u>			<u> </u>	<u> </u>					<u> </u>	
994	Powerbook #2	2,842	ь	SL/ 5	l				143	568	568	568	568	425					!
994	total at 1994	22,460					1		16,787	i		I	T						T
n-95	Performa/monitor	2,688		SL/5		!				254	538	538	538	538	282				
995	total at 1995	25,148			 	 				20,267		- 330		- 550	101		 		
					 	 -				20,267							 	 -	
	fax printer/lrw	550		SL/ 5	 	 		l	L		55	110	110	110	110	54		 	
<u>n-96</u>	monitor/lrw	418			l					L	42	84	84	84	84	41		ļ	1
ıg-96	Powerbook #3	2,425		SL/ 5	i	L					162	485	485	485	485	323			1 1
	duplex printer 12/640	2,284	i cl	SL/ 5							114	457	457	457	457	342			Ì
ov-96	tape recorder	845	i	SL/ 5							28	169	169	169	169	141		T	T
996	total at 1996	31,670									21,776							 	
	·	2,395		SL/ 5							21,17,0	439	479	479	479	479	40		
	SuperMac/monitor				 	 				}	ļ					357			
	SuperMac/monitor	1,785		SL/ 5	ļ	ļ						327	357	357	357		30	<u> </u>	ļ
	scannner	679		SL/ 5								113	136	136	136	136	22		
ıg-97	printer 12/640	1,727	e	SL/ 5		<u></u>						115	345	345	345	345	232		ļ
	copier	704	1	SL/ 5		1						35	141	141	141	141	105		ŀ
997	total at 1997	38,960	ΤŢ									3,440							
	equipment disposal	-16,261										- 							†
	SuperMac/monitor	946		SL/ 5								 	110	189	189	189	189	80	
				<u> 3⊔ 3</u>		ļ								107	107	107	107		
	total at 1998	23,645			ļ								3,979					<u> </u>	
b-99	phone system-bfp	1,058										L	<u> </u>	176	212	212	212	212	36
	2 computers-bfp	2,450		SL/ 5	L	L							L	408	490	490	490	490	82
b-99	I computer-bfp	1,225	e	SL/ 5										204	245	245	245	245	41
	used furniture/lamps	1,809										·		242	362	361	362	362	120
			$\overline{}$	SL/ 5									ļ						
ug-99	used furniture/lamps	3,618		3L/ 5							 -	ļ		483	724	724	724	724	240
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	phone system, cableing,		1 1						'			!	ł					}	l
ct-99	computers	49,650	e	SL/ 5]					1	ì	1	1,924	11,544	11,544	11,544	11,544	8,27
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I-00 I-00	equipment disposal computer/bfp	85,149 -5,775 1,927	c e d	SL/5 SL/5										7,352		56 433		56 433	
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il-00 il-00 il-00 p-00	equipment disposal computer/bfp phone/bfp coppier 3computer/bfp computer/bfp	85,149 -5,775 1,927 280 2,165 7,816 1,661	c e d	SL/5 SL/5 SL/5 SL/5										7,352	28 217 1,042	56 433 1,563 332	56 433 1,563 332	56 433 1,563 332	56 43 1,56 33
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Statement 3
Form 990
Part III
Statement of Program Service Accomplishments

The Center for Ecoliteracy (CEL) is dedicated to education for sustainable living. CEL is a public foundation that supports a grant making program for educational organizations and school communities, primarily in the San Francisco Bay Area; convenes networks of its grantees; sponsors projects consistent with its mission; administers donor-advised funds; and manages a publishing imprint, Learning in the Real World[®].

GRANT GIVING: Learning in the Real World

The Center for Ecoliteracy provides financial support to schools and educational organizations engaged in fostering ecological literacy through strategies focusing on "learning in the real world." CEL supports promising programs embedded in schools, communities and ecosystems, and funds those that are both practical and inspirational. Grant giving strategies include: gardens, food, cooking and sustainable agriculture, as well as habitat restoration and watersheds. In 2004, six grants were awarded to six organizations. \$226,284

NETWORKS: Learning in the Real World

The Center for Ecoliteracy nurtures grantee networks consisting of school principals, school-based leadership teams, and support providers as incubators for creative approaches to fostering ecological literacy. CEL convenes meetings, seminars and educational events and provides coaching to selected grantees using the environment as the integrator for curriculum and community. Network meetings, as well as workshops, seminars, and presentations, were held during the year with over 250 participants in attendance.

PUBLICATIONS (print & electronic)

The Center for Ecoliteracy influences a widening circle of decision makers in the fields of education and philanthropy through a publications program which articulates a conceptual framework and applies this framework as the basis for evaluation, publication and dissemination. CEL acts as a publishing resource to selected educational organizations, forming collaborations for the purpose of producing educational materials, including a web site.

\$419,298

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Statement 3
Form 990
Part III
Statement of Program Service Accomplishments

PROJECTS

Rethinking School Lunch (RSL), a program of the Center for Ecoliteracy, continues CEL's history of support for organizations and networks committed to education for sustainability. Along with the 26 contributors to Rethinking School Lunch's 10 chapters, the Center is identifying a growing circle of nationally and internationally recognized thinkers and practitioners who share its commitments and contribute their expertise to its work.

RSL is an online 175-page guide with an ongoing essay series, which builds on the premise that hands-on experience growing and preparing food is a powerful way for children to discover that healthy food tastes good, and to learn about the cycles, seasons, other processes of nature, and the relationship between the health of natural and social systems.

The planning framework of RSL is being applied across a public school system through the School Lunch Initiative at Berkeley, which is a partnership between the Berkeley Unified School District, a midsize district of 9,000+ students, and the Chez Panisse Foundation in collaboration with the Center for Ecoliteracy and Children's Hospital Oakland Research Institute. The School Lunch Initiative will revolutionize school lunch by making food a central part of the academic curriculum. \$135,715

TOTAL PROGRAM EXPENDITURES

\$949,020

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Statement 5
Form 990, Schedule A
Part III, Line 3a
Grant Determination

As a grant-giving organization, we nurture sustainable learning communities using the natural world as our guide. Children have grown their own lunches, designed and planted gradens, and mapped out the cycles and flows in their communities. Each project is unique to the environment in which it occurs, and yet each represents the principles of ecology in action.

We have learned from our work with communities in schools that learning will flourish, on a school-wide or district-wide level, when efforts are made to nurture a collaborative culture throughout the school community; integrate the curriculum around a shared conceptual language; and engage the natural world, especially by exploring the place or ecosystem in which learning is embedded. As a part of this work, we nurture networks of grantees and encourage them to work collaboratively and exchange information and resources.

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Statement 4
Form 990
Part V
Directors and Officers, Trustees and Key Employees

	Average hours per week	Compensation	Contribution to Benefit Plan	Expense Account
Fritjof Capra, Chair	10	29,000	0	0
Peter Buckley, Treasurer	10	0	0	0
Gay Hoagland	2 to 4	0	0	0
David Orr	2 to 4	0	0	0
Zenobia Barlow, Secretary	10	0	0	0

The address for all directors and officers is: 2528 San Pablo Avenue

2528 San Pablo Avenue Berkeley, CA 94702

Directors and Officers serve approximately 4-6 hours per month.

Statement 6
Foprm 990, Part II
Statement of Functional Expenses

		Management		
	Program	& General	Fundraising	Total
Repairs and maintenance	2,664	2,018	1,958	6,640
Research/education	59,008		354	59,362
Honorarium	14,500	7,250	7,250	29,000
Graphic design	72,087			72,087
Photography	7,899			7,899
Events	750			750
Transcription/recording	3,128	1,250		4,378
Meals/facility	4,121	1,265	119	5,505
Membership	4,918			4,918
Advertising	125	75		200
Donor cultivation			490	490
Total	169,200	11,858	10,171	191,229

8868 Form

(Rev December 2004)
Department of the Treasury
Internal Revenue Service

(HTA)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you are filing for an Automatic 3	-	•			▶ 🗓
If you are filing for an Additional (r Section 1)					0000
Part I Automatic 3-Month Ex	nave aiready been granted ar ktension of Time—Only s				1 8868.
Automatic 3-Month E	Cterision of Time—Only s	ubititi Original (110	copies rieed	eu)	
Form 990-T corporations requesting All other corporations (including Form Partnerships, REMICs, and trusts must	990-C filers) must use Form	7004 to request an	extension of t	ime to file income tax re	
Electronic Filing (e-file). Form 8868	can be filed electronically if yo	ou want a 3-month	automatic exte	ension of time to file on	e of the
returns noted below (6 months for corp	porate Form 990-T filers). Ho	wever, you cannot f	ile it electronic	cally if you want the add	ditional
(not automatic) 3-month extension, ins	•	ly completed signed	l page 2 (Part	II) of Form 8868. For n	nore
details on the electronic filing of this fo	rm, visit www.irs.gov/efile.				
Type or Name of Exempt Organiza	ilon			Employer identification	n number
print Center for Ecoliteracy				94-2911417	
· · · · · · · · · · · · · · · · · · ·	or suite no. If a P.O. box, see ins	tructions.			
due date for filing your 2528 San Pablo Avenue					
return. See City, town or post onice, sta	ate, and ZIP code. For a foreign a	address, see instruction	ons.		
instructions. Berkeley, CA 94702					
Check type of return to be filed (file		· · · · · · · · · · · · · · · · · · ·	r		
X Form 990	Form 990-T (corporation	•		orm 4720	
Form 990-BL	Form 990-T (sec. 401)	(a) or 408(a) trust)	F∢	orm 5227	
Form 990-EZ	Form 990-T (trust other	er than above)	Fo	orm 6069	
Form 990-PF	Form 1041-A		F	orm 8870	
 The books are in the care of ► The Telephone No. ► 510-845-4595 If the organization does not have a If this is for a Group Return, enter is for the whole group, check this box 	FAX n office or place of business i the organization's four digit G ▶ If it is for part of the	roup Exemption Nu	, check this bomber (GEN)	ox	-
names and EINs of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members the example of all members and all members the example of all members and all members the example of all members and all members are all members and all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all members and all members are all membe		cornoration) extens	sion of time ur	ntil 8/15/2005	
to file the exempt organization re X calendar year 2004	eturn for the organization nam				for:
► tax year beginning	, and en	iding		•	
2 If this tax year is for less than 12	months, check reason:	Initial return	Final return	Change in acco	unting period
3 a If this application is for Form 990 nonrefundable credits. See instr		·	-	•	0
b If this application is for Form 990				· · · · · · · · · · · · · · · · · · ·	
payments made. Include any pri	•			s	0
c Balance Due. Subtract line 3b fi					
with FTD coupon or, if required, instructions	by using EFTPS (Electronic F	ederal Tax Paymer	nt System). Se		0
Caution. If you are going to make an e				-EO and Form 8879-F0	
for payment instructions.					-
For Privacy Act and Paperwork Reduction	n Act Notice, see Instructions.			Form 886	8 (Rev 12-2004)

Form 8368 (R	sy_12-2004)	
• If you a	e filing for an Additional (not automatic) 3-Month Extension, complete only Part	II and check this box .
Note. Only	complete Part II if you have already been granted an automatic 3-month extension of	on a previously filed Form 8868.
art II	e filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Additional (not automatic) 3-Month Extension of Time—Must File Orig	inal and One Conv
Type or	Name of Exempt Organization	Employer identification number
print	Center for Ecoliteracy	94-2911417
File by the extended	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
due date for	2528 San Pablo Avenue	
filing the return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
instructions.	Berkeley, CA 94702	
X Form 9	of return to be filed (File a separate application for each return): Form 990-T (sec. 401(a) or 408(a) trust)	5007
Form		Form 5227
Form	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Form 6069
Form		Form 8870
	not complete Part II if you were not already granted an automatic 3-month exte	neion on a proviously filed Form 9969
	ks are in the care of ► The Organization	ision on a previously med Form 8868.
	ne No. ► 510-845-4595 FAX No. ► 510-849-1439	
If the or	panization does not have an office or place of business in the United States, check t	his box
• If this is	for a Group Return , enter the organization's four digit Group Exemption Number (G	EN) If this is
Er the who	le group, check this box I. If it is for part of the group, check this box	and attach a list with the
	EINs of all members the extension is for.	
_	lest an additional 3-month extension of time until 11/15/2005 alendar year 2004 , or other tax year beginning 1/1/2004	
Se if this		, and ending 12/31/2004 .
	tax year is for less than 12 months, check reason: Initial return Final re	
-	in detail why you need the extension More time is requested to acquire all information and accurate return.	nation needed to complete
		() = P
a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative te	X less any
nonre	fundable credits. See instructions	\$ 0
	application is for Form 990-PF, 990-T, 4720, or 6069, enter any retetable de its ated tax payments made. Include any prior year overpayment allowed as a credit an	
	nt paid previously with Form 8868	d any K
c Balaı	ice Due. Subtract line 8b from line 8a. Include your payment with this for 🔾 🖼 🖟 🗖	direct deposit with
FTD	coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). So	ee instructions. \$ 0
	Signature and Verification	
	of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to t, and complete, and that I am authorized to prepare this form.	the best of my knowledge and belief,
	Per de la transferance	8.11.50
Signature >	Crasby & Kaueda Title > CPAs Notice to Applicant—To Be Completed by the IR	Date ► 8 110S
[T]	Notice to Applicant—To Be Completed by the IR	!S
	we approved this application. Please attach this form to the organization's return.	
	ve not approved this application. However, we have granted a 10-day grace period from the la f the organization's return (including any prior extensions). This grace period is considered to be	
	ise required to be made on a timely return. Please attach this form to the organization's return.	
	ve not approved this application. After considering the reasons stated in item 7, we cannot gra	
an ext	ension of time to file. We are not granting a 10-day grace period.	•
∐ We ca	nnot consider this application because it was filed after the extended due date of the return fo	r which an extension was requested.
Other		
	Ву	EXTENSION APPROVE
Director		Date
	ailing Address — Enter the address if you want the copy of this application for an a	
returned to	an address different than the one entered above. Name	SEP 1 = "
e-man	Crosby & Kaneda, Certified Public Accountants	
Type or	Number and street (include suite, room, or apt. no.) or a P.O. box number	SUBMISSION PROCL
print	1611 Telegraph Ave., Ste 318	
	City or town, province or state, and country (including postal or ZIP code)	
	Oakland, CA 94612	Form 8868 (Rev. 12-2004)
		(101. (2-2004)