Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt from Income Tax

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

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

OMB No 1545-0047

2003

Open to Public Inspection

A For the 2003 calendar year, or tax year beginning , 2003, and ending ,

B Check if applicable
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Final return
- [ ] Amended return
- [ ] Application pending

Please use IRS label or print or type. See specific instructions.

AS YOU SOW FOUNDATION
311 CALIFORNIA STREET SUITE 510
SAN FRANCISCO, CA 94104

D Employer Identification Number 94-3169008

E Telephone number 415 391 3212

F Accounting method: [ ] Cash [X] Accrual [ ] 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 [X] No

H (b) If 'Yes,' enter number of affiliates ►

H (c) Are all affiliates included? [ ] Yes [ ] No
(If 'No,' attach a list See instructions)

H (d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

G Web site: ► WWW.ASYOUSOW.ORG

J Organization type (check only one) ► [X] 501(c) 3 ◄ (insert no) [ ] 4947(a)(1) or [ ] 527

I Group Exemption Number ►

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.**

M Check ► [ ] if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ► 1,107,437.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

REVENUE

1	Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a	58,050.		
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash $ 58,050. noncash $)			1d	58,050.
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	1,019,985.
3	Membership dues and assessments			3	
4	Interest on savings and temporary cash investments			4	
5	Dividends and interest from securities			5	2,301.
6a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
7	Other investment income (describe ►)			7	

		(A) Securities		(B) Other		
8a	Gross amount from sales of assets other than inventory	27,101.	8a			
b	Less: cost or other basis and sales expenses	27,655.	8b			
c	Gain or (loss) (attach schedule) STATEMENT 1	-554.	8c			
d	Net gain or (loss) (combine line 8c, columns (A) and (B))				8d	-554.

9	Special events and activities (attach schedule) If any amount is from **gaming**, check here ► [ ]				
a	Gross revenue (not including $ ______ of contributions reported on line 1a)	9a			
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11	Other revenue (from Part VII, line 103)			11	
12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	1,079,782.

EXPENSES

13	Program services (from line 44, column (B))	13	988,478.
14	Management and general (from line 44, column (C))	14	43,988.
15	Fundraising (from line 44, column (D))	15	
16	Payments to affiliates (attach schedule)	16	
17	**Total expenses** (add lines 16 and 44, column (A))	17	1,032,466.

NET ASSETS

18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	47,316.
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	296,158.
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 2	20	18,319.
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	361,793.

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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 (att sch) SEE STM 3 (cash $ 140,500. non-cash $)	22	140,500.	140,500.		
23 Specific assistance to individuals (att sch)	23				
24 Benefits paid to or for members (att sch)	24				
25 Compensation of officers, directors, etc	25	71,000.	71,000.		
26 Other salaries and wages	26	88,358.	88,358.		
27 Pension plan contributions	27	5,767.	5,767.		
28 Other employee benefits	28	8,867.	8,867.		
29 Payroll taxes	29	12,821.	12,821.		
30 Professional fundraising fees	30				
31 Accounting fees	31	6,590.		6,590.	
32 Legal fees	32	377,887.	366,103.	11,784.	
33 Supplies	33	6,819.	6,819.		
34 Telephone	34	7,036.	7,036.		
35 Postage and shipping	35	2,168.	2,168.		
36 Occupancy	36	47,697.	47,697.		
37 Equipment rental and maintenance	37				
38 Printing and publications	38	3,755.	3,755.		
39 Travel	39	14,443.	14,027.	416.	
40 Conferences, conventions, and meetings	40	1,817.	1,817.		
41 Interest	41	462.		462.	
42 Depreciation, depletion, etc (attach schedule)	42	2,275.		2,275.	
43 Other expenses not covered above (itemize)					
a SEE STATEMENT 4	43a	234,204.	211,743.	22,461.	
b	43b				
c	43c				
d	43d				
e	43e				
44 **Total functional expenses** (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	1,032,466.	988,478.	43,988.	0.

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? ► SEE STATEMENT 5

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) & (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others)

	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a AS YOU SOW SUPPORTS CIVIL LITIGATION ON BEHALF OF CONSUMERS AT LARGE IN APPLYING THE DISCLOSURE REQUIREMENTS OF PROPOSITION 65. A STATE LAW TO PROVIDE ADEQUATE LABELING OF HAZARDOUS INGREDIENTS. (Grants and allocations $)	988,478.
b (Grants and allocations $)	
c (Grants and allocations $)	
d (Grants and allocations $)	
e Other program services (Grants and allocations $)	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ►	988,478.

Part IV Balance Sheets (See 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
ASSETS	45 Cash – non-interest-bearing			45	43,118.
	46 Savings and temporary cash investments		170,323.	46	175,242.
	47a Accounts receivable	47a			
	b Less. allowance for doubtful accounts	47b		47c	
	48a Pledges receivable	48a			
	b Less. allowance for doubtful accounts	48b		48c	
	49 Grants receivable			49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a Other notes & loans receivable (attach sch)	51a			
	b Less: allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges			53	
	54 Investments – securities (attach schedule) ► ☐ Cost ☒ FMV		68,252.	54	86,384.
	55a Investments – land, buildings, & equipment. basis	55a			
	b Less· accumulated depreciation (attach schedule)	55b		55c	
	56 Investments – other (attach schedule)			56	
	57a Land, buildings, and equipment. basis	57a 15,347.			
	b Less· accumulated depreciation (attach schedule) STATEMENT 6	57b 11,204.	6,418.	57c	4,143.
	58 Other assets (describe ► SEE STATEMENT 7)		53,794.	58	53,794.
	59 **Total assets** (add lines 45 through 58) (must equal line 74)		298,787.	59	362,681.
LIABILITIES	60 Accounts payable and accrued expenses		2,629.	60	888.
	61 Grants payable			61	
	62 Deferred revenue			62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a Tax-exempt bond liabilities (attach schedule)			64a	
	b Mortgages and other notes payable (attach schedule)			64b	
	65 Other liabilities (describe ►)			65	
	66 **Total liabilities** (add lines 60 through 65)		2,629.	66	888.
NET ASSETS OR FUND BALANCES	**Organizations that follow SFAS 117, check here** ► ☒ and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted		296,158.	67	361,793.
	68 Temporarily restricted			68	
	69 Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds			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 **Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72, column (A) **must** equal line 19; column (B) **must** equal line 21)		296,158.	73	361,793.
	74 **Total liabilities and net assets/fund balances** (add lines 66 and 73)		298,787.	74	362,681.

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

BAA

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	N/A
b	Amounts included on line a but not on line 12, Form 990:		
	(1) Net unrealized gains on investments $		
	(2) Donated services and use of facilities $		
	(3) Recoveries of prior year grants $		
	(4) Other (specify): $		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	
d	Amounts included on line 12, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 $		
	(2) Other (specify): $		
	Add amounts on lines (1) and (2)	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	N/A
b	Amounts included on line a but not on line 17, Form 990:		
	(1) Donated services and use of facilities $		
	(2) Prior year adjustments reported on line 20, Form 990 $		
	(3) Losses reported on line 20, Form 990 $		
	(4) Other (specify): $		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	
d	Amounts included on line 17, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 $		
	(2) Other (specify): $		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 8		126,875.	0.	0.

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? ☐ Yes ☒ No

If 'Yes,' attach schedule – see instructions

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Part VI Other Information (See instructions.)

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	77		X
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If 'Yes,' has it filed a tax return on **Form 990-T** for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79		X
80a	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?	80a		X
b	If 'Yes,' enter the name of the organization ► N/A and check whether it is ☐ exempt **or** ☐ nonexempt.			
81a	Enter direct and indirect political expenditures. See line 81 instructions — 81a: 0.			
b	Did the organization file **Form 1120-POL** for this year?	81b		X
82a	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?	82a		X
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 (See instructions in Part III.) — 82b: N/A			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	*501(c)(4), (5), or (6) organizations.* **a** Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b	N/A	
	If 'Yes' was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members — 85c: N/A			
d	Section 162(e) lobbying and political expenditures — 85d: N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices — 85e: N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85f: N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A	
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?	85h	N/A	
86	*501(c)(7) organizations* Enter **a** Initiation fees and capital contributions included on line 12 — 86a: N/A			
b	Gross receipts, included on line 12, for public use of club facilities — 86b: N/A			
87	*501(c)(12) organizations* Enter: **a** Gross income from members or shareholders — 87a: N/A			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) — 87b: N/A			
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? If 'Yes,' complete Part IX	88		X
89a	*501(c)(3) organizations.* Enter. Amount of tax imposed on the organization during the year under section 4911 ► 0. ; section 4912 ► 0. ; section 4955 ► 0.			
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? If 'Yes,' attach a statement explaining each transaction	89b		X
c	Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0.			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ► 0.			
90a	List the states with which a copy of this return is filed ► CALIFORNIA			
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.) — 90b: 4			
91	The books are in care of ► SEE PAGE ONE Telephone number ► 415 391-3212 Located at ► ZIP + 4 ►			
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* ***Form 1041*** — Check here N/A ► ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ► 92: N/A			

Part VII Analysis of Income-Producing Activities (See instructions.)

Note: *Enter gross amounts unless otherwise indicated.*

	Unrelated business income		Excluded by section 512, 513, or 514		
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue					
a CONSULTING FEES					147,246.
b SETTLEMENTS & REL'D I					872,739.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities			14	2,301.	
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 pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-554.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				1,747.	1,019,985.

105 **Total** (add line 104, columns (B), (D), and (E)) ► 1,021,732.

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 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)
93B	CIVIL LITIGATION SETTLEMENT PROCEEDS RESULTS FROM EFFORTS TO ENFORCE PROPOSITION
	65 LABELING REQUIREMENTS ON BEHALF OF CONSUMERS AT LARGE
93A	CONSULTING SERVICES REGARDING IMPACT OF CORPORATE BUSINESS PRACTICES TO THE
	ENVIRONMENT

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See 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 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: *If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions)*

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

► Lawrence E Fahn Date 11/15/04

Signature of officer

► Lawrence Fahn, Executive Director

Type or print name and title

Paid Preparer's Use Only

Preparer's signature ► Date 11/14/04 Check if self-employed ► ☒ Preparer's SSN or PTIN (see General Instruction W) N/A

Firm's name (or yours if self-employed) address, and ZIP + 4 ► VM ACCOUNTING SERVICES, CPA
13 MERIDIAN CIRCLE
ROHNERT PARK, CA 97928

EIN ► N/A

Phone no ► (707) 364-1600

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

2003

Name of the organization: AS YOU SOW FOUNDATION

Employer Identification number: 94-3169008

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

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

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

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

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

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
LAW OFFICES OF ANDREW PACKARD 294 PAGE ST. SAN FRANCISCO, CA 94102	LEGAL SERVICES	347,179.
Total number of others receiving over $50,000 for professional services ►	0	

Part III Statements About Activities (See 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 ► $ N/A (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		X
	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.			
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?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? SEE FORM 990, PART V	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3a	Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how you determine that recipients qualify to receive payments.)	3a		X
b	Do you have a section 403(b) annuity plan for your employees?	3b		X
4	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4		X

Part IV Reason for Non-Private Foundation Status (See 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 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 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) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	25,920.	108,500.	63,650.	60,720.	258,790.
16 Membership fees received					
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	692,908.	940,153.	657,940.	187,957.	2,478,958.
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	4,905.	8,666.	11,252.	5,123.	29,946.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	723,733.	1,057,319.	732,842.	253,800.	2,767,694.
24 Line 23 minus line 17	30,825.	117,166.	74,902.	65,843.	288,736.
25 Enter 1% of line 23	7,237.	10,573.	7,328.	2,538.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 N/A ► 26a

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 1999 through 2002 exceeded the amount shown in line 26a **Do not file this list with your return.** Enter the total of all these excess amounts ► 26b

c Total support for section 509(a)(1) test: Enter line 24, column (e) ► 26c

d Add Amounts from column (e) for lines: 18 ______ 19 ______ 22 ______ 26b ______ 26d

e Public support (line 26c minus line 26d total) ► 26e

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ► 26f %

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.

(2002) 24,370. (2001) 105,000. (2000) 53,350. (1999) 55,753.

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

(2002) 544,290. (2001) 215,538. (2000) 494,053. (1999) 37,000.

c Add: Amounts from column (e) for lines: 15 258,790. 16 ______ 17 2,478,958. 20 ______ 21 ______ 27c 2,737,748.

d Add: Line 27a total 238,473. and line 27b total 1,290,881. 27d 1,529,354.

e Public support (line 27c total minus line 27d total) ► 27e 1,208,394.

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ► 27f 2,767,694.

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ► 27g 43.66 %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ► 27h 1.08 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, 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

Part V Private School Questionnaire (See instructions.)

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

N/A

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.	35		

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

N/A

Check ► a ☐ if the organization belongs to an affiliated group Check ► b ☐ if you checked 'a' and 'limited control' provisions apply.

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table –	41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		
Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720*			

If the amount on line 40 is –	**The lobbying nontaxable amount is –**
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

4-Year Averaging Period Under Section 501(h)

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

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ►	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See instructions)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines **c** through **h.**)			

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

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

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of.			
(i) Cash	51 a (i)		X
(ii) Other assets	a (ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b (i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b (ii)		X
(iii) Rental of facilities, equipment, or other assets	b (iii)		X
(iv) Reimbursement arrangements	b (iv)		X
(v) Loans or loan guarantees	b (v)		X
(vi) Performance of services or membership or fundraising solicitations	b (vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received·

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ► ☐ Yes ☒ No

b If 'Yes,' complete the following schedule·

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

STATEMENT 1
FORM 990, PART I, LINE 8
NET GAIN (LOSS) FROM NONINVENTORY SALES

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE:	27,101.
COST OR OTHER BASIS:	27,655.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES	$ -554.
TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES	$ -554.

STATEMENT 2
FORM 990, PART I, LINE 20
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED GAIN ON STOCKS HELD AT Y.E	$ 18,319.
TOTAL	$ 18,319.

STATEMENT 3
FORM 990, PART II, LINE 22
GRANTS AND ALLOCATIONS

CASH GRANTS AND ALLOCATIONS

DONEE'S NAME:	SMITH RIVER PRESERVATION	
DONEE'S ADDRESS:	P.O. BOX 1977 SEBASTOPOL CA 95472	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		$ 5,000.
DONEE'S NAME:	RAINFOREST ACTION NETWORK	
DONEE'S ADDRESS:	221 PINE STREET SAN FRANCISCO, CA 94104	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		2,500.
DONEE'S NAME:	PROJECT UNDERGROUND	
DONEE'S ADDRESS:	1916 A MARTIN LUTHER KING JR W BERKELEY CA 94704	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		10,000.
DONEE'S NAME:	GREENACTION	
DONEE'S ADDRESS:	ONE HALLIDIE PLAZA, STE 760 SAN FRANCISCO CA 94102	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		10,000.
DONEE'S NAME:	RUCKUS SOCIETY	
DONEE'S ADDRESS:	369 15TH STREET OAKLAND CA 94612	
RELATIONSHIP OF DONEE:	NONE	

STATEMENT 3 (CONTINUED)
FORM 990, PART II, LINE 22
GRANTS AND ALLOCATIONS

CASH GRANTS AND ALLOCATIONS

AMOUNT GIVEN:		$ 7,500.
DONEE'S NAME:	PESTICIDE ACTION NETWORK	
DONEE'S ADDRESS:	40 POWELL STREET, STE 500 SAN FRANCISCO	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		10,000.
DONEE'S NAME:	CLCV EDUCATION FUND	
DONEE'S ADDRESS:	1212 BROADWAY, STE 630 OAKLAND CA 94612	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		1,500.
DONEE'S NAME:	WESTERN ENVIRONMENTAL LAW CENT	
DONEE'S ADDRESS:	1216 LINCOLN STREET EUGENE OR 97401	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		10,000.
DONEE'S NAME:	TIDES/CETOS	
DONEE'S ADDRESS:	P.O. BOX 673 GUALALA CA 95445	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		15,000.
DONEE'S NAME:	GOLDEN GATE UNIVERSITY	
DONEE'S ADDRESS:	536 MISSION ST. SAN FRANCISCO CA 94105	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		11,500.
DONEE'S NAME:	ROSE FOUNDATION	
DONEE'S ADDRESS:	6008 COLLEGE AVE, STE 10 OAKLAND CA 94618	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		7,500.
DONEE'S NAME:	COLLECTIVE HERITAGE INSTITUTE	
DONEE'S ADDRESS:	6 CERRO CIRLCE LAMY NM 87540	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		10,000.
DONEE'S NAME:	BLUEWATER NETWORK	
DONEE'S ADDRESS:	311 CALIFORNIA ST. STE 510 SAN FRANCISCO CA 94104	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		10,000.
DONEE'S NAME:	ARC ECOLOGY	
DONEE'S ADDRESS:	833 MARKET STREET, STE 1104 SABN FRANCISCO CA 94103	
RELATIONSHIP OF DONEE:	NONE	

STATEMENT 3 (CONTINUED)
FORM 990, PART II, LINE 22
GRANTS AND ALLOCATIONS

CASH GRANTS AND ALLOCATIONS

AMOUNT GIVEN: $ 15,000.

DONEE'S NAME:	TURTLE ISLAND RESTORATION	
DONEE'S ADDRESS:	PO BOX 400 FOREST KNOLLS CA 94933	
RELATIONSHIP OF DONEE:	NONE	
AMOUNT GIVEN:		15,000.

TOTAL GRANTS AND ALLOCATIONS $ 140,500.

STATEMENT 4
FORM 990, PART II, LINE 43
OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
AWARDS TO THE STATE	15,750.	15,750.		
COMPUTER & WEB EXP.	7,030.		7,030.	
CONSULTANTS	59,884.	59,884.		
CORPORATE PROJECTS	4,626.	4,626.		
DUES & SUBSCRIPTIONS	4,947.	4,947.		
ENTERTAINMENT	980.		980.	
INSURANCE	13,894.		13,894.	
MISC. EXPENSES	557.		557.	
PROMOTIONAL MATERIALS	1,709.	1,709.		
PROP. 65 INVESTIGATION	124,827.	124,827.		
TOTAL	$ 234,204.	$ 211,743.	$ 22,461.	$ 0.

STATEMENT 5
FORM 990 , PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

PROMOTE AWARENESS OF TOXIC INGREDIENTS IN CONSUMER PRODUCTS

STATEMENT 6
FORM 990, PART IV, LINE 57
LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE
MACHINERY AND EQUIPMENT	$ 15,347.	$ 11,204.	$ 4,143.
TOTAL	$ 15,347.	$ 11,204.	$ 4,143.

STATEMENT 7
FORM 990, PART IV, LINE 58
OTHER ASSETS

CASH ADVANCE.	$ 50,000.
RENTAL DEPOSIT	3,794.
TOTAL	$ 53,794.

STATEMENT 8
FORM 990, PART V
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN-SATION	CONTRI-BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
LARRY FAHN 311 CALIFORNIA STREET #510 SAN FRANCISCO,, CA 94104	EXECUTIVE DIREC 30 HOURS	$ 55,875.	$ 0.	$ 0.
THOMAS VAN DYCK 311 CALIFORNIA STREET #510 SAN FRANCISCO, CA 94104	DIRECTOR 2 HOURS	0.	0.	0.
CONRAD MCKERRON 311 CALIFORNIA STREET. #510 SAN FRANCISCO, CA 94104	DIRECTOR 40 HOURS	71,000.	0.	0.
SLOANE MORGAN 311 CALIFORNIA STREET, #510 SAN FRANCISCO, CA 94104	DIRECTOR 2 HOURS	0.	0.	0.
SHERIDAN PAUKER 311 CALIFORNIA STREET #510 SAN FRANCISCO, CA 94104	DIRECTOR 2 HOURS	0.	0.	0.
PAUL KIBEL 311 CALIFORNIA STREET #510 SAN FRANCISCO, CA 94104	PRESIDENT 2 HOURS	0.	0.	0.
STEVE KATZ 311 CALIFORNIA STREET #510 SAN FRANCISCO, CA 94104	DIRECTOR 2 HOURS	0.	0.	0.
	TOTAL	$ 126,875.	$ 0.	$ 0.

- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** and check this box . . . . ► [X]

Note: *Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.*

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (not automatic) 3-Month Extension of Time – Must File Original and One Copy.**

Type or print	Name of Exempt Organization AS YOU SOW FOUNDATION	Employer identification number 94-3169008
File by the extended due date for filing the return See instructions.	Number, street, and room or suite number. If a P O box, see instructions 311 CALIFORNIA STREET SUITE 510	For IRS Use Only
	City, town or post office, state, and ZIP code For a foreign address, see instructions. SAN FRANCISCO, CA 94104	

Check type of return to be filed (file a separate application for each return):

[X] Form 990 [ ] Form 990-EZ [ ] Form 990-T (Section 401(a) or 408(a) trust) [ ] Form 1041-A [ ] Form 5227 [ ] Form 8870
[ ] Form 990-BL [ ] Form 990-PF [ ] Form 990-T (trust other than above) [ ] Form 4720 [ ] Form 6069

Stop: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- If the organization does **not** have an office or place of business in the United States, check this box . . . . ► [ ]
- If this is for a **Group Return**, enter the organizations four digit Group Exemption Number (GEN) . . . ______ . If this is for the **whole** group, check this box . . ► [ ] . If it is **part** of the group, check this box . . ► [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 11/15, 20 04.

5 For calendar year 2003, or other tax year beginning ________, 20 __ and ending ________, 20 __.

6 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension . . TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions . . . . $ ______

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 . . . . $ ______

c **Balance due.** Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions . . . $

RECEIVED AUG OGDEN

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ► [signature] Title ► CPA Date ► 7/29/04

Notice to Applicant – To be Completed by the IRS

[✓] We **have** approved this application. Please attach this form to the organization's return.

[ ] We **have not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely filed return. Please attach this form to the organization's return.

[ ] We **have not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.

[ ] We **cannot consider** this application because it was filed after the due date of the return for which an extension was requested.

[ ] Other: ______

Director ______ By: ______ Date ______

Alternate Mailing Address – Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	**Name** VM ACCOUNTING SERVICES, CPA
	Number and street (include suite, room, or apartment number) or a P.O. box number 13 MERIDIAN CIRCLE
	City or town, province or state, and country (including postal or ZIP code) ROHNERT PARK, CA 97928

EXTENSION APPROVED
AUG 1 3 2004
, FIELD DIRECTOR, SUBMISSION PROCESSING, OGDEN

AS YOU SOW FOUNDATION

311 CALIFORNIA ST # 510
SAN FRANCISCO CA 94104-2607

TAX YEAR
2003

ACCOUNT NUMBER
1211-0676 DDEX

FINANCIAL ADVISOR
PHILANTHROPIC & SOCIAL INV CNS

FEIN: 94-3169008
FORM 990.

REALIZED PROFIT AND LOSS 2003

SHORT TERM

OPENING CLOSING DATE	QUANTITY	SECURITY DESCRIPTION	OPENING AND CLOSING PRICE	OPENING AND CLOSING AMOUNT	PROFIT OR LOSS
05/29/03 12/02/03	65.000	AT&T WIRELESS SERVICES INC	7 8300 7 2470	508.95 471 02	37.93-
07/08/03 12/02/03	55 000	AT&T WIRELESS SERVICES INC	8.6163 7 2470	473 90 398 57	75.33-
07/08/03 09/11/03	55 000	BISYS GROUP INC	19.5940 18 0150	1,077 67 990.78	86 89-
11/22/02 05/06/03	10.000	CAPITAL ONE FINL CORP	31.7107 46.7700	317 11 467 67	150 56+
07/02/02 02/04/03	15.000	FIFTH THIRD BANCORP	66 2321 51 7500	993.48 776 22	217.26-
02/21/03 10/16/03	20.000	GRAINGER W W INC	46.4280 47.9736	928 56 959.42	30.86+
06/19/03 10/16/03	15 000	GRAINGER W W INC	47.9600 47.9736	719.40 719 58	0.18+
06/17/03 09/24/03	20 000	KOHL'S CORP	49.9084 53.5228	998.17 1,070 40	72.23+
10/31/03 11/26/03	30.000	LINCARE HLDGS INC	38.9100 29.1100	1,167.30 873.25	294.05-
11/22/02 09/23/03	25.000	MAXIM INTEGRATED PRODS INC	41.7957 41.3000	1,044.89 1,032.45	12.44-
10/01/03 12/02/03	5.000	MEDTRONIC INC	46 8853 46.1463	234 43 230 72	3 71-
05/28/03 11/11/03	50.000	MICROCHIP TECHNOLOGY INC	21 5200 32 7458	1,076 00 1,637.21	561.21+
10/24/02 06/11/03	15.000	OMNICOM GROUP INC	59.6000 72.5763	894 00 1,088.58	194.58+
11/13/02 04/02/03	15 000	QUALCOMM INC	33 8900 34.7500	508 35 521.22	12 87+
01/14/03 04/02/03	10.000	QUALCOMM INC	39 1223 34.7500	391.22 347.48	43.74-
07/24/02 01/23/03	15 000	SYMANTEC CORP	31 4934 46.0850	472 40 691.25	218 85+
06/11/02 04/22/03	20.000	UNITED PARCEL SVC INC CL B	62 6379 59.6300	1,252 76 1,192 54	60.22-

SHORT TERM SUB TOTALS: OPENING AMOUNT: 13,058.59 CLOSING AMOUNT: 13,468.36 PROFIT/LOSS: 409.77

AS YOU SOW FOUNDATION

311 CALIFORNIA ST # 510
SAN FRANCISCO CA 94104-2607

TAX YEAR
2003

ACCOUNT NUMBER
1211-0676 DDEX

FINANCIAL ADVISOR
PHILANTHROPIC & SOCIAL INV CN

REALIZED PROFIT AND LOSS 2003

LONG TERM

OPENING CLOSING DATE	QUANTITY	SECURITY DESCRIPTION	OPENING AND CLOSING PRICE	OPENING AND CLOSING AMOUNT	PROFIT OR LOSS
11/22/00 08/06/03	20 000	AMERICAN INTL GROUP INC	93.0000 62 1300	930 00 1,242 54	312 54+
11/22/00 04/03/03	10.000	AMGEN INC	66.0000 59.6300	660.00 596.27	63.73-
11/19/01 07/02/03	30 000	ANALOG DEVICES INC	44.0100 35.7026	1,320.30 1,071 02	249 28-
09/21/01 01/30/03	20 000	AUTOMATIC DATA PROCESSNG INC	44 9500 34 1100	899 00 682 17	216.83-
11/22/00 07/15/03	20.000	CITIGROUP INC	44 7084 46.8100	894 18 936 15	41.97+
12/27/01 03/20/03	30.000	COMCAST CORP CL A NEW SPL	35.6341 28 4985	1,069.02 854 93	214 09-
11/22/00 06/04/03	30.000	COSTCO WHOLESALE CORP	35.6250 37.3560	1,068 75 1,120.62	51.87+
11/22/00 12/10/03	20 000	HOME DEPOT INC	37.5625 33.0404	751 26 660.77	90 49-
07/25/02 09/05/03	20 000	JOHNSON & JOHNSON COMMON	48.4499 50 5370	969.00 1,010.69	41 69+
11/22/00 08/01/03	10.000	MEDTRONIC INC	52 6250 52.0005	526.25 519 98	6.27-
11/22/00 12/02/03	20 000	MEDTRONIC INC	52.6250 46 1463	1,052.50 922 88	129.62-
11/22/00 10/24/03	35 000	ORACLE CORP	22.6875 11.7079	794 06 409.75	384.31-
03/26/01 10/24/03	50.000	ORACLE CORP	16.4700 11.7079	823.50 585 37	238.13-
02/22/01 07/22/03	15.000	STATE STREET CORP	47 7500 44.5180	716.25 667 73	48.52-
11/22/00 01/06/03	1 000	TRAVELERS PPTY CASUALTY CORP NEW CL A	21 8822 15 4700	21 88 15 46	6 42-
11/22/00 05/08/03	0 728	TRAVELERS PPTY CASUALTY CORP NEW CL A	21.8822 15.7500	15.93 11.46	4 47-
12/12/01 05/08/03	0 271	TRAVELERS PPTY CASUALTY CORP NEW CL A	21 9563 15.7500	14.22 4.28	9 94-
11/22/00 01/06/03	3.550	TRAVELERS PPTY CAS CORP NEW CL B	23.6148 15.5700	83.84 55 27	28.57-
12/12/01 01/06/03	0.449	TRAVELERS PPTY CAS CORP NEW CL B	23 6937 15.5700	31 54 7.00	24 54-
11/22/00 06/04/03	20 000	UNIVISION COMMNS INC CLASS A	32.2500 31 3700	645 00 627 37	17 63-
08/23/02 11/14/03	10.000	WHOLE FOODS MARKET INC	45.6890 64.3200	456.89 643 16	186 27+
10/03/02 11/07/03	25.000	WYETH	34.1400 39.5000	853.50 987 45	133.95+

LONG TERM SUB TOTALS: OPENING AMOUNT: 14,596.87 CLOSING AMOUNT: 13,632.32 PROFIT/LOSS: 964.55-
2003 NET REALIZED TOTAL * 554.78-

INFORMATION PRESENTED UNDER 'REALIZED PROFIT AND LOSS' IS GATHERED FROM SOURCES DEEMED TO BE RELIABLE. HOWEVER, PIPER JAFFRAY DOES NOT ATTEST TO ITS ACCURACY AND IS NOT RESPONSIBLE FOR ERRORS AND/OR OMISSIONS. IT IS PROVIDED TO YOU AS A SERVICE AND IS NOT REPORTED TO THE IRS.