Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c) of the internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047

Department of the Trensury Internal Revenue Service

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

This Form is Open to Public Inspection

•	N FO	or the 1995 (calendar	r year, OR tax year period b	eginning July	<u>1</u> ·	, 1995, and end	ing	June 3	0 , 19 96
E	_ Ch	eck if:	Please Use IRS	C Name of organization				D Em		cation number
	Char	nge of address	label or	Nautilus of Amer				95	360829	2
Ē	Initia	ai return	print or type.	Number and street (or P.O. be	ox if mail is not deliver	ed to stree	t address) Room/suite		e registration	
[_	i return	See	1831 Second Stree				n-	1014921	
L		ended return	Specific Instruc-	City, town, or post office, stat						
		uired also for e reporting)	tions.	Berkeley, CA 94				r Che		exemption applicati
G			ation	X Exempt under section 5		sert numb	er) OR ▶ □ section	1 4947/-		
N	ote: S	Section 501(c)(3) exe	mpt organizations and 4947	(a)(1) nonexempt d	haritable	trusts MUST attach	a comm	iki) nonexen datad Schad	npi chantable (rus Irde A (Ecom con
Н	(a) is t	this a group re	eturn filed	for affiliates?		- Tel	1			
•	,_,	and a group ic	ordin med	Tot attiliaces:	<u></u> Y	es LXINo				nter four-digit group
	(b) If "	'Yes," enter th	e number	of affiliates for which this return	is filad:		exemption nur	•		
-	c) is t	this a separate	return fik	ed by an organization covered by	va group puling?	es [Y] No	J Accounting me		☐ Cash	X Accrual
K										
•	a F	orm 990 Pack	age in the	rganization's gross receipts are n e mail, it should file a return with	ormally not more than	\$25,000. T	he organization need no	ot file a re	eturn with the	IRS; but if it received
N	ote: F	orm 990-EZ	may be	used by organizations with g	ross receipts less th	on \$100	COO end total esset	rn.	4050 000	
	art	Reven	nue. Fr	penses, and Changes	in Not Accord	OF E	Delegge (Car	inch-	1 3250,000 a	end of year.
	1		utions :	rifte grants and similar	III IVEL MOSELS	or runc	в рагалсез (566	iristru	uons on	pages 9-14.)
	1	a Dirace =	uuons, (gifts, grants, and similar a			671,000			
	1.	a Direct p		• •	· · · · · ·					
	'	b Indirect								
						1c				
	'	d Total (ad	ia iines 71	1a through 1c) (attach sche	dule of contributor	rs)				
				,000 noncash \$				1 <u>d</u>		,000
	2	Program	service	revenue including governm	ent fees and contr	acts (fror	n Part VII, line 93)	2	16	, 369
	3	wember	zuib an	es and assessments				3	<u></u>	
	4	interest	on savir	ngs and temporary cash ir	vestments			4	7.	,313
	5	_		nterest from securities .				5		
	6a	- 0.000.00				6a	800			
	6	Less: rer	ital exp	enses		6b				
	C	Net renta	I Incom	e or (loss) (subtract line 6	b from line 6a) .			6c		800
¥ e	7			t income (describe >	(5) 0)	7		
Revenue	8a	Gross an	nount fr	rom sale of assets other	(A) Securities	 _ 	(B) Other			
æ		than inve				8a		الالا		
	D	Less: cost	or other	basis and sales expenses.		8b				
	C			tach schedule)		8c				
	d	net gain (or (IOSS)	(combine line 8c, columns	(A) and (B))			8d		
	9			nd activities (attach sched	tule)					
	a	Gross rev	renue (n	ot including \$	of			£		
		Loggia	ons rep	orted on line 1a)		9a				
	b	Not ince	ci expe	enses other than fundraisi	ng expenses .	9b		70000		
	10a	Green and	ne or (lo	oss) from special events (s	subtract line 9b fro		a)	9c	-	
ļ	_	Lace sale	es or in	ventory, less returns and a	allowances	10a				
	b	Cross Task	torgoo	ods sold		10b		_		
	11	Other rem	IL UF (IOSS	s) from sales of inventory (att	ach schedule) (subt	ract line 1	Ob from line 10a) .	10c		
	12	Total reve	enue (If(a nue (ad	om Part VII, line 103) . Id lines 1d, 2, 3, 4, 5, 6c, 7,	9d 0c 10c			11		
7								12	695,4	
\$	13 14	Managem 9	services	(from line 44, column (B)				13	510,4	498
	15	ivianagem	ent and	general (from line 44, col				14	109,	
}	15 16	Payments	ig (itom	line 44, column (D))				15	49,0	912
-	17	Total exm	o anilia Despesion	ates (attach schedule)				16		-
+	18	Evenes	Idofinit	add lines 16 and 44, colu	ии (A))	<u> </u>	· · · · · ·	17	670.1	
		Not access	(dericit)	for the year (subtract line	17 from line 12)			18	25.3	
	19 20	Other char	or runo	d balances at beginning o	f year (from line 7	3, colum	ın (A))	19	152,9	917
	20 21	Net assets	or fund	net assets or fund balance	es (attach explan	ation) .		20		
<u>ب</u>			or runu	balances at end of year (co	ombine lines 18, 19	, and 20	<u>)</u>	21	178_2	56

Part II Statement of 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 chantable trusts but optional for others. (See instructions on page 14.)

	6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(8) Program services	(C) Management			
22	Grants and allocations (attach schedule)							
	(cash \$ noncash \$)	22						
23	Specific assistance to individuals (attach schedule)	23	_					
24	Benefits paid to or for members (attach schedule).	24	_					
25	Compensation of officers, directors, etc.	25	129,500	64,750	32,375	32,375		
26	Other salaries and wages	26	154,590	131,402	15,459	7,730		
27	Pension plan contributions	27				7,7,50		
28	Other employee benefits	28	19,059	14,562	3,757	739		
29	Payroll taxes	29	24,391	18,636	4,808	946		
30	Professional fundraising fees	30	-					
31 32	Accounting fees	31	4,207	3,214	829	163		
32 33	Legal fees	32	50	50	0	0		
34	Supplies	33	84,975	64,926	16,752	3.297		
35	Telephone .	34	17,574	13,428	3,464	682		
36	Postage and shipping	35	8,423	6,436	1,660	327		
37	Occupancy	36	71,087	54,327	14,004	2,756		
38	Printing and publications	38	26,120	20,970	5,149	0		
39	Travel	39	19,499	15,398	3,844	257		
40	Conferences, conventions, and meetings	40	15.850 5.030	12,110	3,125	615		
41	Interest	41	5,030	4,038	992	0		
42	Depreciation, depletion, etc. (attach schedule)	42	13,301	13,301	·			
43	Other expenses (itemize): a . Insurance.	43a	14.355	10.968	2 207	 		
ь	Consultants (\$31,011)	43b	31,011	31,011	3,387	0		
C	Writers	43c	30,447	30,477	0	0		
d	Temporary Office Help	43d	645	493	127	25		
е	***************************************	43e		7,5	121	23		
44	Total functional expenses (add lines 22 through 43) Organizations		670,143	510 <i>(</i> 00	100 700			
	completing columns (B)-(D), carry these totals to lines 13-15	44		510,498	109,733	49,912		
educa	rting of Joint Costs.—Did you report in columnational campaign and fundraising solicitation?	1 (B) (Pr	ogram services) a	any joint costs fro	m a combined			
						☐ Yes ☒ No		
(iii) the	s," enter (i) the aggregate amount of these joint costs amount allocated to Management and general \$	· • •	; (ii) the	amount allocated t	o Program service	s \$;		
Part	Statement of Program Service Acco	molisl	ments (See in	amount allocated t	o Fundraising \$			
V hat	is the organization's primary exempt purpose? I	<u>риз</u> .	ments (See in	suuctions on pa	ge 17.)	D		
						Program Service Expenses		
public	ations issued, etc. Discuss achievements that at 947(a)(1) nonexempt charitable trusts must also	re not n	nevements, Stati neasurable (Sect	on 501(c)(3) and i	clients served,	(Required for 501(c)(3) and		
	The strategie drasts must also	enter ti	ne amount of gra	nts and allocation	is to others)	(4) orgs., and 4947(a)(1) trusts; but optional for		
a .G.	Logal Peace & Security Program	– Dail	lv news dige	st distribut	ed to 400+	others.)		
.C1	matr substituers; arricles, paper	s on	Asia securi	tv issues nu	hlished.	293,257		
.5.	williar Series neig: energy future	s stu	idy launched	; energy & s	ecurity	293,231		
_bc	Office Study group launched. (Gr	ants an	d allocations \$					
D .Si	ustainable Development Program	On1i	ne environm	ental inform	ation net-			
. • • • •	**	א חוורע	study laun	chad. anvira	nmont	139,856		
. L.C	reference hero. In Panakok: articles, papers on trade & environment pub-							
	Pegasus Project Teens at risk and schoolchildren taken sailing,							
ta	might about environment and recre	nd sc	hoolchildre	ı taken sail	ing,			
en	taught about environment and responsibility; boat upgraded as model of environmentally sound sailing: study of Son Francisco and as model of 77,385							
_la	environmentally sound sailing; study of San Francisco Bay pollution [Additional content of the							
1			2 2.100240113 \$,			
		• • • • • • • • •						
			•••••	•• • • • • • • • • • • • • • • • • • • •				
=	(Gra	nts and	l allocations \$	••• •• ••• ••• •••				
Othe	er program services (attach schedule) (Gra	nts and	allocations 6					
iota	of Program Service Expenses (should equal	line 44	column (B), Prod	gram services)	· · · •	510,498		
						2101470		

Part IV Balance Sheets (See instructions on pages 17-19.)

	Note:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	s within the description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing		851	45	83.583
	46	Savings and temporary cash investments.		191,676	46	151.280
		Accounts receivable	47a 44,813	15,335	47c	44,813
		Pledges receivable	48a			
	b	Less: allowance for doubtful accounts	48b	0	48c	0
	49	Grants receivable		6,500	49	0
ts	50	Receivables from officers, directors, truste (attach schedule)		8.821	50	7.026
	51a	Other notes and loans receivable (attach schedule)	51a			
Assets	Ь	Less: allowance for doubtful accounts	51b	0	51c	0
Ë	52	• •		0	52	0
	53	Prepaid expenses and deferred charges .		686	53	0
	54	Investments—securities (attach schedule)		0	54	0
	55a	Investments—land, buildings, and	55a 98,007			
	b	equipment: basis		F2	<i></i>	75 050
		schedule).	55b 22,751	53,550	55c	75,256
	56	investments—other (attach schedule)	lesal	0	56	0
	Į.	Land, buildings, and equipment: basis	57a			
	Ь	Less: accumulated depreciation (attach		Δ .		^
	58	schedule).	57b	0 35,007	57c	0
	30	Other assets (describe ►	,	33,007	58	<u> </u>
	59	Total assets (add lines 45 through 58) (must		312,426	59	361,958
	60	Accounts payable and accrued expenses .		11,193	60	736
	61	Grants payable	· · · · · · · ·	. 0	61	0
S	62	Deferred revenue		148,316	62	<u> 182,966 </u>
Liabilities	63	Loans from officers, directors, trustees, and schedule)	key employees (attach	0	63	0
=	64a	Tax-exempt bond liabilities (attach schedule)	L	0 ·	64a	00
		Mortgages and other notes payable (attach s		0	64b	0
		Other liabilities (describe		0	65	0
_	66	Total liabilities (add lines 60 through 65) .	<u> </u>	159,509	66	183,702
	Orga	nizations that follow SFAS 117, check here ► 67 through 69 and lines 73 and 74.				
Ces		Unrestricted		101.945	67	50.079
2		Temporarily restricted		50,972	68	128.177
9	69	Permanently restricted		0	69	0
		nizations that do not follow SFAS 117, check				
Š		complete lines 70 through 74.		5		
-		Capital stock, trust principal, or current funds			70	
		Paid-in or capital surplus, or land, bldg., and			71	
ğ		Retained earnings, accumulated income, end			72	
2		Total net assets or fund balances (add lines	ľ			
		70 through 72; column (A) must equal line 1 equal line 21)	9 and column (B) must	152,917	73	178,256
		Total liabilities and net assets/fund balance	1	312,426	74	361,958
					1	

Part IV-A	Reconciliation of Revent Financial Statements wit Return			Par N/	A	Reconciliation Financial State Return	of Expenses ments with	per Audited Expenses per
	enue, gains, and other support			а		kpenses and I		
b Amounts	ed financial statements s included on line a but not on Form 990:	а		ь	Amounts	financial stateme included on line 7, Form 990:		a
(1) Net unre	alized gains ments \$			(1)	Donated	services of facilities \$		
	of facilities \$			(2)	reported (adjustments on line 20,		
(3) Recoveri year gran	es of prior			(3)		<u>\$</u> eported on		
(4) Other (sp				•	line 20, Fo	orm 990 . <u>\$</u>		
	<u>\$</u>			(4)	Other (sp	ecify): 		
Add amor	unts on lines (1) through (4) ▶	Ь		\downarrow		<u>\$</u>		.
c Line a mi	inus line b	С		c		unts on lines (1) th nus line b		b c
	included on line 12,) but not on line a:			d		included on line but not on line		
(1) Investment	t expenses led on line			(1)	Investment			
6b, Form 9 (2) Other (sp	990 \$			(2)		990 <u>\$</u>		
•	··········			(2)	Other (sp	еспу):		
Add amor	unts on lines (1) and (2)	d			Add amou	unts on lines (1)	and (2) >	d
e Total reve	enue per line 12, Form 990			e	Total expe	enses per line 17,	ae (=, >	
Part V Lis	s line d)	ıstees, aı	nd Key E	mplo		s line d) each one even if r		ed; see instruction
	(A) Name and address		(B) Title a	and avera	ge hours per o position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans deferred compensation	& account and oth
BOARD OF D	IRECTORS					-57	General Comparisation	allowances
Harriet	Barlow ntain Ctr., Blue Mt.	Lake N	Presi		hr/wk	0	0	0
Walden.B	-		Vice	Presi		0	0	0
Marcy Da	rnovsky		Secre	tary		0	0	0
Tom Atha	n, Oakland CA 94710 nasiou		1 hou Treas		!K	0	0	0
1247 Pot	rero Av., San Franci	sco CA	94707	<u>1</u>	r/week			
KEY EMPL								
L <u>y</u> uba Za 1831 2nd	rsky St Berkelev CA 94	710	Co-Ex 40+ h		ve Dire	\$62,500	0	0
Peter Ha				ecuti	ve dire		0	0
							.,	
75 Did any officer	cer, director, trustee, or key emp and all related organizations, of	lloyee recei which more	ve aggreg than \$10	ate com	pensation o	of more than \$100,000 the related organi	000 from your nizations? ►	☐ Yes 🗓 No

P	ort VI Other Information (See instructions on pages 20–23.)	Yes No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed	200
	description of each activity	76
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77
78	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a
1	If "Yes," has it filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year?	78b A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79
		73
808	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 organization?	80a
t	If "Yes," enter the name of the organization ▶	
	and check whether it is exempt OR nonexempt.	
вта	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81	
ь	Did the organization file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for	
	this year?	81b
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
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 for reporting in Part III.). 82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	
0.5	or gifts were not tax deductible?	84b N/
85	Section 501(c)(4), (5), or (6) organizations.—a Were substantially all dues nondeductible by members?	85a N/
D	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85D N//
	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	
	Section 162(e) lobbying and political expenditures	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	
ſ	Taxable amount of lobbying and political expenditures (line 85d less 85e)	
	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g N/A
	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its	
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following	
	tax year?	85h ~//
86	Section 501(c)(7) organizations.—Enter:	
а	Initiation fees and capital contributions included on line 12	
	Gross receipts, included on line 12, for public use of club facilities	
87	Section 501(c)(12) organizations.—Enter: a Gross income from members or shareholders	eren in eren i
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX	88
89	Public interest law firms.—Attach information described in the instructions.	•
90	List the states with which a copy of this return is filed ▶California	
91	The books are in care of ▶ Nautilus of America Telephone no. ▶ (510) 20	4-9296
	Located at ► 1831 Second St., Berkeley CA ZIP code ► 9	4710-1902
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041, U.S. Income Tax Returnand Trusts.—Check here N/A. and enter the amount of tax-exempt interest received or accrued during the tax year	r for f states ►□

indicate	ross amounts unless otherwise	Omelated	business income	Excluded by sec	1011 312, 313, 01 314	
93 Pr	rogram service revenue:	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt funct income
a'	Consulting and writing fees	3		22	16.369	
b						
c			<u> </u>			
d						
е				<u> </u>		
f					<u> </u>	
	es and contracts from government ager					
	embership dues and assessments			1,	7 010	
	erest on savings and temporary cash investn			14	7,313	ļ
	vidends and interest from securities .					
	et rental income or (loss) from real estat					
a del b not	bt-financed property			16	800	
98 Net	t debt-financed property			10	800	
99 Oti	her investment income	етту				
	in or (loss) from sales of assets other than inve					
	et income or (loss) from special events					
	oss profit or (loss) from sales of invento					
	her revenue: a				-	
						
e	, , , , , , , , , , , , , , , , , , , ,					
2 met 1/11		a Accomplishma	me of Eugman	December		·····
Part VIII	Explain how each activity for which inco of the organization's exempt purposes (me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
Part VIII Line No.	Explain how each activity for which inco	me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
Part VIII Line No.	Explain how each activity for which inco of the organization's exempt purposes (me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
Part VIII Line No.	Explain how each activity for which inco of the organization's exempt purposes (me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
Part VIII Line No.	Explain how each activity for which inco of the organization's exempt purposes (me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
Part VIII Line No.	Explain how each activity for which inco of the organization's exempt purposes (me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
Part VIII Line No.	Explain how each activity for which inco of the organization's exempt purposes (me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
Part VIII Line No.	Explain how each activity for which inco of the organization's exempt purposes (me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
Part VIII Line No.	Explain how each activity for which inco of the organization's exempt purposes (me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
	Explain how each activity for which inco of the organization's exempt purposes (me is reported in col	umn (E) of Part VII	contributed im	portantly to the ac	complishmen
Part VIII Line No.	Explain how each activity for which inco of the organization's exempt purposes (N/A	me is reported in colother than by providi	umn (E) of Part VII	contributed impurposes). (See	portantly to the ac instructions on pa	ecomplishment age 24.)
art IX	Explain how each activity for which inco of the organization's exempt purposes (N/A)	ome is reported in colother than by providing	umn (E) of Part VII ng funds for such	if the "Yes"	portantly to the ac instructions on pa	is checked
art IX	Explain how each activity for which inco of the organization's exempt purposes (N/A	me is reported in colother than by providi	umn (E) of Part VII	if the "Yes"	portantly to the ac instructions on pa	ecomplishment age 24.)
art IX	Explain how each activity for which inco of the organization's exempt purposes (N/A Information Regarding Taxable Se address, and employer identification	ome is reported in colother than by providing the colother than by the colot	umn (E) of Part VII ng funds for such plete this Part Nature	if the "Yes"	portantly to the ac instructions on pa box on line 88	is checked
art IX	Explain how each activity for which inco of the organization's exempt purposes (N/A Information Regarding Taxable Se address, and employer identification	Subsidiaries (Com Percentage of ownership interest	umn (E) of Part VII ng funds for such plete this Part Nature	if the "Yes"	portantly to the ac instructions on pa box on line 88	is checked
art IX	Explain how each activity for which inco of the organization's exempt purposes (N/A Information Regarding Taxable Se address, and employer identification	Subsidiaries (Com Percentage of ownership interest %	umn (E) of Part VII ng funds for such plete this Part Nature	if the "Yes"	portantly to the ac instructions on pa box on line 88	is checked
Part VIII Line No.	Explain how each activity for which inco of the organization's exempt purposes (N/A Information Regarding Taxable Se address, and employer identification	Subsidiaries (Com Percentage of ownership interest	umn (E) of Part VII ng funds for such plete this Part Nature	if the "Yes"	portantly to the ac instructions on pa box on line 88	is checked
art IX Name	Explain how each activity for which inco of the organization's exempt purposes (N/A Information Regarding Taxable Se address, and employer identification	Percentage of ownership interest % % % examined this return incomplete. Declaration of program.	plete this Part Nature business ac	if the "Yes" of tivities	box on line 88 Total income	is checked End-of-year assets
ease gn	Explain how each activity for which inco of the organization's exempt purposes (N/A) Information Regarding Taxable Se, address, and employer identification imber of corporation or partnership Under penalties of perjury, I declare that I have knowledge and belief, it is true, correct, and co any knowledge. (See Specific Instructions, page	Subsidiaries (Com Percentage of ownership interest % % % examined this return, incomplete. Declaration of principal.	plete this Part Nature business ac	if the "Yes" of the "Yes" of tivities schedules and sicer) is based on a sicery is based on a sicery in a page of the tivities.	box on line 88 Total income	is checked End-of-year assets
art IX Name	Explain how each activity for which inco of the organization's exempt purposes (N/A) Information Regarding Taxable Se, address, and employer identification imber of corporation or partnership Under penalties of perjury, I declare that I have knowledge and belief, it is true, correct, and co any knowledge. (See Specific Instructions, page	Percentage of ownership interest % % % examined this return incomplete. Declaration of program.	plete this Part Nature business accompanying eparer (other than off 2/97	if the "Yes" of tivities schedules and sicer) is based on a teve Free langing Dipe or print name a	box on line 88 Total income latements, and to the ill information of which it rector and title.	is checked End-of-year assets
art IX Name nu	Explain how each activity for which inco of the organization's exempt purposes (N/A) Information Regarding Taxable Se, address, and employer identification imber of corporation or partnership Under penalties of perjury, I declare that I have knowledge and belief, it is true, correct, and co any knowledge. (See Specific Instructions, page	Subsidiaries (Com Percentage of ownership interest % % % examined this return, incomplete. Declaration of principal.	plete this Part Nature business ac	if the "Yes" of the "Yes" of tivities schedules and sicer) is based on a sicery is based on a sicery in a page of the tivities.	box on line 88 Total income Interest or industrial information of which income incom	is checked End-of-year assets

Nautilus of America, Inc.

EIN 95-3608292

Line 1d — Schedule of Contributors
Contributors of \$5,000 or more in Fiscal 1995-96

Amount Given	Contributor
\$ 90,000	The Ford Foundation 320 E. 43rd St., New York, NY 10017-4890
30,000	John Merck Fund 11 Beacon St., Suite 1230, Boston, MA 02108-3002
30,000	Ploughshares Fund Fort Mason, San Francisco, CA 94123
25,000	Prospect Hill Foundation 99 Park Avenue, Suite 2200, New York, NY 10016-1601
113,000	Rockefeller Brothers Fund 1290 Avenue of the Americas, New York, NY 10104-0223
185,000	Rockefeller Foundation 420 Fifth Avenue, New York, NY 10018-2729
6,500	The University of California Berkeley, CA
165,000	W. Alton Jones Foundation 232 E. High St., Charlottesville, VA 22901-5178
25,000	Winston Foundation 2040 S Street, NW #201, Washington, DC 20009-1110
1,500	Individual small contributors
\$671,000	Total contributions, gifts, grants and similar

Nautilus of America, Inc.

EIN 95-3608292

Line 42 - Depreciation, Depletion, Etc.

See below, Line 55b, rightmost column

Line 50 - Schedule of Receivables from Officers, Directors, Trustees, and Key Employees

Amount	Due From	Notes
\$7,026.00	Lyuba Zarsky	Ms. Zarsky authorized use of her personal credit card for Nautilus charges. Nautilus paid the card each month, then obtained reimbursement for personal expenditures from Ms. Zarsky. This amount represents personal expenditures for which Nautilus was due reimbursement on June 30, 1996. Such reimbursement has been made.

Line 55b - Accumulated Depreciation Schedule

Item	Acquired	Cost/Basis	Prior Yrs' Deprecia.	Method	Rate/ Life	Deprecia. This Year (Line 42)
Boat	1/94	\$63,000	\$ 9,450	SL	10	\$6,300
Library	Prior to 6/95	35,007	0	SL	5	7,001
				!	TOTAL	\$13,301

SCHEDULE A (Form 990)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 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).

1995

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

professional services .

Name of the organization Employer identification number

Nautilus of America, Inc. 95 :3608292 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions on page 1. List each one. If there are none, enter "None." (a) Name and address of each employee paid more (d) Contributions to (b) Title and average hours (e) Expense employee benefit plans 8 deferred compensation (c) Compensation than \$50,000 account and other per week devoted to position allowances Lyuba Zarsky Co-Executive 1831 Second Street -0-Director \$ 62,500 -0-Berkeley, CA 94710-1902 40+ hours/week Dr. Peter Hayes Co-Executive 1831 Second Street Director 67,000 -0--0-Berkeley, CA 94710-1902 40+ hours/week Total number of other employees paid over -0-\$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions on page 1. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None. Total number of others receiving over \$50,000 for -0-

than 331/4% of its support from contributions, membership fees, and gross receipts from activities related to its charitat functions—subject to certain exceptions. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)

An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organ 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)(section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions on page 4.)

(a) Name(s) of supported organization(s)

(b) Line number from above

None.

An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions on page 4.)

P	art IV-A Support Schedule (Complete only	if you checked a	box on line 10, 11	, or 12.) <i>Use cas</i>	h method of ac	counting.
Cá	Note: You may use the worksheet in lendar year (or fiscal year beginning in)	(a) 1994				
15	Gifts, grants, and contributions received. (Do	(a) 1994	(b) 1993	(c) 1992	(d) 1991	(e) Total
_	not include unusual grants. See line 28.).	\$264,508	\$391,000	\$208,500	\$103,994	\$ 968,002
16	Membership fees received	-0-	-0-	-0-	-0-	
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose.	80,516	53,800	63,417	40,275	238,008
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	6,885	6,976	2,383	3,088	19,332
19	Net income from unrelated business activities not included in line 18	-0-	-0-	-0-	-0-	-0-
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.	-0-	-0-	-0-	-0-	-0-
	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.	-0-	-0-	-0-	-0-	-0-
22 	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	-0-	-0-	5,330	8,050	13,380
23	Total of lines 15 through 22	95 1,909	451,776	279,630	155,407	1,238,72
24	Line 23 minus line 17	271,393	397,976	216,213	115,132	1,000,71
25	Enter 1% of line 23	3,519	4.518	2.796	1.554	1,000,71
26	Organizations described in lines 10 or 11:	a Enter 2% of a			▶ 26a	20,01
b	Attach a list (which is not open to public inspect person (other than a governmental unit or publici 1994 exceeded the amount shown in line 26a. I	tion) showing the	name of and amo	ount contributed	by each	
c d		19,332			▶ 26c	\$ 1,238,723 \$ 857,628
e f	Public support (line 26c minus line 26d total) Public support percentage (line 26e (numerat				▶ 26e	\$ 381,094
27 b	Organizations described on line 12: a For person," attach a list to show the name of, and of such amounts for each year: N/A (1994) (1993) For any amount included in line 17 that was recreceived for each year, that was more than the organizations described in lines 5 through 11, a and the larger amount described in (1) or (2), en	amounts include total amounts rec eived from a none larger of (1) the s well as individu	d in lines 15, 16, eived in each year (1992)	, and 17 that we ar from each "dis	(1991)	n." Enter the sum e of, and amount nclude in the list
	(1994) (1993)				· -	
С	Add: Amounts from column (e) for lines: 15 \$ 20 \$		16 \$ 21 \$	-	▶ 27c	\$
d	Add: Line 2/a total . 3 ai	nd line 27b total.	\$		▶ 27d	
e	Public support (line 27c total minus line 27d total	1)			▶ 27e	
f	rotal support for section 509(a)(2) test: Enter am	ount on line 23, o	olumn (e) 🔒 🔒	▶ 27f \$		
g h	Public support percentage (line 27e (numerato Investment income percentage (line 18, colum	or) divided by line	e 27f (denominat	or))	▶ 27g	%
8	Unusual Grants: For an organization described attach a list (which is not open to public inspecting grant, and a brief description of the nature of the	in line 10, 11, or	12 that received	any unusual gr	ants during 199	

Part V
Private School Questionnaire (See instructions on page 5.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/	\mathbf{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	:	
		de des antiques de la constante de la constant		
32	Does the organization maintain the following:		:	
a b	basis?	32a 32b		
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
_	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	320		
33	Does the organization discriminate by race in any way with respect to:	*		
а	Students' rights or privileges?	33a		
b	Admissions policies?	33Ь		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	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?	34b	37) 7	
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		

_	N/A eck here ▶	Lobbying Expenditures by E (To be completed ONLY by ar a if the organization belongs	n eligible orga	nization that file	e instructions o d Form 5768)	n page 5.)	Page
	eck here ▶	b if you checked "a" above a	ind "limited con	group. trol" provisions app	oly.		
		Limits on Lobbyi	ing Expenditu	ıres		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobb	ying expenditures to influence public					3
37	Total lobb	ying expenditures to influence a legi	slative body (dir	ect lobbying)	37		
38 39	Other eve	ying expenditures (add lines 36 and	37)	· · · · · ·	38		
40	Total exer	mpt purpose expenditures npt purpose expenditures (add lines			39	· · · · · · · · · · · · · · · · · · ·	
41	Lobbying	nontaxable amount. Enter the amount	nt from the follo	wing table—		3 1	
		ount on line 40 is— The lo	bbying nontaxa	ble amount is—			
	Not over \$	\$500,000	f the amount or	line 40	}		
	Over \$1,000	0,000 but not over \$1,500,000 \$175,00	00 plus 15% of t 00 plus 10% of th	ne excess over \$50 le excess over \$1 00	0,000		
	Over \$1,500	0,000 but not over \$17,000,000 . \$225,00	00 plus 5% of the	e excess over \$1,50	0,000		
	Over \$17,00	00,000	000				
42 43	Grassroots Subtract li	s nontaxable amount (enter 25% of I ne 42 from line 36. Enter -0- if line 4	ine 41)		42		
44	Subtract li	ne 41 from line 38. Enter -0- if line 4	1 is more than i	ine 36 ine 38	43		
		f there is an amount on either line 43				- Amount	
		4-Year Ave me organizations that made a sectio	eraging Perion 501(h) election	d Under Section do not have to co	omplete all of the	five columns be	low
		See the inst	tructions for line	s 45 through 50 or	n page 7.)	· · · · · · · · · · · · · · · · · · ·	
			Lo	bbying Expenditu	res During 4-Yea	r Averaging Per	riod
	Calendar y fiscal year	year (or · beginning in) ▶	(a) 1995	(b) 1994	(c) 1993	(d) 1992	(e) Total
45	Lobbying r	nontaxable amount				of the second	· · · · · · · · · · · · · · · · · · ·
46	Lobbying o	eiling amount (150% of line 45(e)).	of the state of th				
17	Total lobby	ring expenditures					
18	Grassroots	nontaxable amount	\$ 1 m		8 (80m) 3 m) (8 8 m)		
49	Grassroots	ceiling amount (150% of line 48(e))			the same of the sa	and the second and the second and the second as	
i0	Grassroots	lobbying expenditures					
Pai	rt VI-B	Lobbying Activity by Nonelec (For reporting only by organizat	ting Public C	harities not complete Pa	art VI-A) (See ir	structions on	page 7.)
Ourir Itter	ng the year, npt to influe	did the organization attempt to influence public opinion on a legislative m	ence national, s	tate or local legisla	ition, including an	Yes No	Amount
	Volunteers.					. Х	***
b	Paid staff o	r management (Include compensation	on in expenses r	eported on lines c	through h.)	. X	
c d		ertisements			• • • • • •	. X X	
		s, or published or broadcast stateme		• • • • • • • • • • • • • • • • • • •	• • • • • •	X	
f	Grants to o	ther organizations for lobbying purpo	oses			X	
g	Direct conta	act with legislators, their staffs, gove	rnment officials,	or a legislative bo	dy	X	
h	Rallies, den	nonstrations, seminars, conventions,	speeches, lectu	ires, or any other n	neans	. X	
•	rotai iobbyl	ing expenditures (add lines c through	in)		• • • • • •	211.	0
	If "Yes" to a	any of the above, also attach a state	ment giving a d	etailed description	of the Johnving a	tivities	

Pa	rt VI		n Regarding Ti rganizations	ransfers To and Transaction	ons and Relationships With Noncharita	able				
51	Did 501	the reporting organization directly or indirectly engage in any of the following with any other organization described (c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?								
а				n to a noncharitable exempt org		Yes No				
					F4.40	X				
	(ii)				a(ii)	X				
b	Othe	er transactions:				v				
	(ī)	Sales of assets to	o a noncharitable	exempt organization	<u>b(i)</u>	X				
	(ii)	Purchases of ass	ets from a noncha	aritable exempt organization .	b(ii)	X				
	(iii)				b(iii)	X				
	(iv)				b(iv)	X				
	(v)	Loans or loan gua	arantees		b(v)	X				
				rship or fundraising solicitations		X				
C	Shai	ring of facilities, ed	quipment, mailing	lists, other assets, or paid emplo	oyees <u>c</u>	X				
d	good	is, other assets, or	services given by t	he reporting organization. If the or	Column (b) should always show the fair market varganization received less than fair market value in a ds, other assets, or services received:	alue of the any				
(a Line	no.	(b) Amount involved	Name of nor	(c) ncharitable exempt organization	(d) Description of transfers, transactions, and sharing an	rangements				
Nor	e.									
	-+									
										
•										
				,						
	-+									
	desc	e organization dire ribed in section 50 es," complete the	01(c) of the Code ((other than section 501(c)(3)) or i	ne or more tax-exempt organizations in section 527? ▶ ☐ Yes	s ∏ No				
		(a) Name of organiza	ation	(b) Type of organization	(c) Description of relationship	-				
Non	e.									
		40.								
-										
						 				

Nautilus of America, Inc. Employer ID # 95-3608292 Form 990 — FY 1995

Attachment to Schedule A, Line 26(b)

Amounts contributed by each person whose total gifts for 1991-1994 exceeded the amount shown in Line 26(a) [\$20,014]

Contributor	FY 1994	FY 1993	FY 1992	FY 1991	TOTAL Excess	xcess
Ford Foundation			\$90,000		\$90,000	\$69,986
MacArthur Foundation		\$30,000			\$30,000	\$9,986
John Merck Fund	\$50,000	\$50,000		\$30,000	\$130,000	\$109,986
Rockefeller Foundation	\$200,000	\$245,000	\$40,000		\$485,000	\$464,986
W. Alton Jones Foundation	\$120,000		\$40,000		\$160,000	\$139,986
Winston Foundation	\$25,000	\$25,000			\$50,000	\$29,986
Totals	\$395,000	\$350,000	\$170,000	\$30,000	\$945,000	\$824,916

Facts and Circumstances

or our staff. As a rule, project descriptions and grant applications are originated by Nautilus, which then seeks funding from prospects identified by Nautilus. Control of Nautilus rests with its Board of Directors and staff. The Nautitus Institute is supported by a wide range of foundations which do not have representation on our Board of Directors YEAR

1995

California Exempt Organization Annual Information Statement or Return

_	_	_		
F	n	О	м	

199

D-1014921 N05AI L 06 NAUTILUS OF AMERICA, INC. ### Dissolved Withdrawn Merged/Reorganized (attach If a box is checked, enter date Merged/Reorganized	S 120H 11; school, public nization, d. • No 4947(a)(1)?
NAUTILUS OF AMERICA, INC. 146 GRSENADA AV BERKELEY CA 94707 NAUTITUS SENDER OF NEW ADDRESS NOTIFY SENDER OF NEW ADDRESS NAUTILUS INSTITUTE 1631 ERKELEY CA 94710-1902 International Complete Part unless not required to file this form. See General Instructions B and C. Gross alies or receipts from other sources. From Side 2, Part II, line 8.	S 120H 11; school, public nization, d. • No 4947(a)(1)?
BERKELEY CA 94707 NAUTT46 NOTIFY SENDER OF NEW ADDRESS NAUTLUS INSTITUTE BERKELEY CA 94710-1902 B Check forms filed this year: State: 109 100 1005 Federal: x990 990EZ 990T 990FF 1041 1115 C If organization is exempt under R&TC Section 23701d and is a scharity, religious organization or is controlled by a religious organization or	120H
Charity, religious organization or is controlled by a religious organization function M. The subject by a religious organization function fu	d. ●
1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	-
2 Gross dues and assessments from members and affiliates	-
This line must be completed. If the result is less than \$25,000, see General Instruction C • 4 695,4 5 Cost of goods sold	
6 Cost or other basis and sales expenses of assets sold	482
	<u>//////</u> -
penses 9 Total expenses and disbursements. From Side 2, Part II, line 18	482
10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10
Fee 12 Penalty for failure to file on time. See General Instruction L	10
If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign, or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If "yes," complete and attach form FTB 3509	es 🔀 No es 꿏 No es 꿏 No
The books are in care of Nautilus of America, Inc. Daytime telephone (510) 204-9296 1831 Second Street, Berkeley, CA 94710-1902	5
located at	
	and belief, it
Signature Date Title Daytim Preparer's Signature Signature Signature Date Check if Signature Signatu	

Part II	Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross
	receipts — complete Part II or furnish substitute information. See Specific Line Instructions.

		1	Gross sales or receipts from all busine	es activities. See instruction	ne	0200 3		1	
			Interest					2	
		3	Dividends					3	
Rec	eipts	4						4	
fror	n Other	4 Gross rents							
Sou	rces							5	
		6 Gross amount received from sale of assets							
		′ ′					• • • • • • • • • • •	7	
		8	Total gross sales or receipts from other						
		<u> </u>	Enter here and on Side 1, Part I, line	<u> 1</u>		<u></u> <u>.</u> .	 	8	
			Contributions, gifts, grants, and similar					9	
			Disbursements to or for members					10	
		11	Compensation of officers, directors and	trustees. Attach schedule	٠			11	
Ехр	enses	12	Other salaries and wages					12	
and Disburse- ments		13	interest					13	
		14	Taxes					14	
			Rents					15	
								16	
			Other. Attach schedule					17	
			Total expenses and disbursements. Ac					18	
Sc	hedu		L Balance Sheets	Beginning o				d of in	come year
Ass				(a)	T	(b)	(c)		(d)
					ォ			77777	. (0)
			nts receivable	- V////////////////////////////////////	∕∤-	<u> </u>			
			receivable. Attach schedule	- <i>V////////////////////////////////////</i>	7				
				- * ////////////////////////////////////	1				
			d atata annomenant ablications	- V////////////////////////////////////	1				
5 Federal and state government obligations 6 Investments in other bonds. Attach schedule			•	- <i>Y////////////////////////////////////</i>	∕}-				
				- V////////////////////////////////////	1				
			s in stock. Attach schedule	- <i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	2				•
	-	-	pans (number of loans)	- <i>V////////////////////////////////////</i>	4	·			
			stments. Attach schedule	*****	4,			<u>////</u>	
			ble assets		1/2				
			umulated depreciation	7,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4		()	
					1			11/1	
			ts. Attach schedule		1			1111	
13	Total a	ssets	\$		1			4/4	
Liab	ilities a	and	net worth		Z			11/1	
14	Accoun	ts pa	ayable		<u> 1</u>			440	
15	Contrib	ution	ns, gifts, grants payable		Ĺ			1111	
			notes payable. Attach schedule		L			100	
17	Mortgag	jes į	payable		L			1.11	
18	Other li	abilit	ties. Attach schedule		L		Gillian &	. [
19	Capital	stoc	k or principle fund						
20	Paid-in	or c	apital surplus. Attach reconciliation		Έ		9000000	. [
			arnings or income fund		Г			[
22	Total lia	biliti	es and net worth		Г				
Sc	hedul	e N	#-1 Reconciliation of income per	books with income per re	etu	rn			
			Do not complete this schedule	if the amount on Schedule	L,	line 13, column (d), is l	less than \$25,000.		
1 1	Vet inco	ome	per books		7	Income recorded on bo	ooks this year	-	
			ome tax			not included in this retu	•	į	
			apital losses over capital gains			Attach schedule		. ř	
			recorded on books this		8	Deductions in this retur			
			schedule		•	against book income th	-	E	
			ecorded on books this year not			Attach schedule		[
			this return. Attach schedule			Total. Add line 7 and li			
	rotal.			1//////////////////////////////////////		Net income per return.			
		1 1	hrough line 5	·		Subtract line 9 from line	96	ľ	· · · · · · · · · · · · · · · · · · ·

Registry of Charitable Trusts

P.O. Box 903447 Sacramento, CA 94203-4470

PERIODIC REPORT

TO ATTORNEY GENERAL OF CALIFORNIA

Section 12586, California Government Code

Failure to file this report by the 15th day of the fifth month after the close of your accounting period may result in the loss of your tax exemption and the assessment of a minimum tax of \$800 plus interest.

Telephone (916) 445-2021 ACCOUNTING PERIOD — For the Year Beginning _____ July 1 1995 and Ending June 30 If address changed check here . . . lacksquare and show changes below lacksquareState Charity registration number CT | 4 | 2 | 5 | 4 | 2 | File Form with label. Otherwise, print or type address. (If unknown, leave blank) Corporate or D-1014921 Organization No. 042542 YEAR ENGED 06/30/96 Yes No A. Is the organization exempt from federal income tax? X NAUTILUS OF AMERICA INC B. If "no", is this entity a split-interest trust? THE EMBERADA AVE 1831 SECOND STREET If "no", affix Exhibit A to explain your SERKEL EY BERKELEY, CA federal tax status. N/A 94710-1902 FILING REQUIREMENTS: CHECK ONE BOX AND ATTACH THE REQUIRED IRS FORMS This entity is not a private foundation. We have attached a completed copy of IRS Form 990 or 990EZ, and Schedule A (Form 990) and related attachments (even though we may not be required to file these uniform forms with the IRS). Omit Part III below. This entity is a private foundation. We have attached a completed copy of IRS Form 990-PF and related attachments. Complete all Parts below. ACTIVITIES: ENTER AMOUNTS AND CHECK BOX PART IA Yes No Gross receipts \$ 695,482 Total assets \$ 361,958 Are the program activities of this entity limited solely to grantmaking?...... X PART II STATEMENTS REGARDING THIS ORGANIZATION DURING THE PERIOD OF THIS REPORT Yes No X If "yes", affix in sequence Exhibit 1. List the name, address or telephone number, grant amount, and purpose of grant for your two main granting agencies. If "yes", enter here: Accountant's Name N/A _____ Telephone (4 Is any of your property held in the name of or commingled with the property of any other organization or person, other than pooled investment funds?.... If "yes", affix in sequence as Exhibit 4 a justification. Include a list and value of assets commingled if not provided in a prior year. 5 Were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest? (Exclude compensation for services that is disclosed and attached on the List of Officers, Directors and If "yes", affix in sequence as Exhibit 5 a full explanation. Enter here the amount involved.... 5a = -06 Did you transfer or donate anything to an organization that is not tax-exempt under Section 501 (c) (3) or 501 (c) (4) of the IRC? If "yes", affix in sequence as Exhibit 6 a justification of why noncharitable entities receive your charitable property. 7 Did this organization regularly solicit salvage, sell salvage in a thrift store, or was it a party to a contract involving the 8 Was there any theft, embezzlement or diversion of your charitable property; or, were you or any of your officers, directors or trustees a party to any court action in which it was alleged that any trust or fiduciary duty was breached? 8 If "yes", affix in sequence as Exhibit 8 a full explanation.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Organization's area code and telephone number (510) 204 - 9296Managing Director Steve Freedkin ura of authorized officer (See instructions) Printed Name

		Yes N
	Did you receive \$20,000 or more in direct public support (Form 990, line 1(a) or included in Form 990-PF, Part I, line 1)?	X
11	Did a fundraising consultant or commercial fundraiser receive any payment from you, or retain any money from fundraising on your behalf?	X
12 13	Did your invested assets total \$50,000 or more? If "yes", complete Part V (Form CT-2) (See line 12 instructions)	X
14	for any costs or prizes, whether or not all gross receipts were received by your organization 13a \$ Enter the total annual compensation (salary plus all benefits) paid to the highest paid employee for: (a) The fiscal year* covered by this report. (If none, enter a zero.)	Y X
15	If any of questions 14(c), (d), or (e) are answered "yes", affix in sequence as Exhibit 14 specific details to fully explain any "yes" response and fully complete Part I, Schedule A (Form 990). Did you make payments totalling over \$50,000 to any independent consultants or contractors other than for (a) fundraising, (b) accounting, (c) legal fees, (d) investment fees?	X
(16	not currently in use)	
17	Were you named as a beneficiary to receive a portion of commercial transactions (commercial co-ventures, joint venture marketing, or cause-related marketing)?	Yes No

(18-30 not currently in use)

N/A

31 Did you file a Form 4720 with the Intel If "yes", affix in sequence as Exhibi that return	t 31 a copy of Form 4/20	and enter here the amount	t of total taxes paid with							
(32–39 not currently in use)		•••••••••••••								
PART IV FUNDRAISING CONSULTAN	T OR COMMERCIAL F	UNDRAISER (FC-CFR)	(SEE QUESTION 11)							
N/A	ACTIVITY #1	ACTIVITY #2	ACTIVITY #3**	TOTAL						
40 Brief Description of Campaign, Drive,										
Event, or Services										
41 Date or Period Covered 42 Name of FC-CFR										
43 Address of FC-CFR										
	44 Gross Pagaints from Danasak									
44 Gross Receipts from Donors* 45 Total Pateined have Bridge FO 055										
45 Total Retained by or Paid to FC-CFR 46 All Other Fund-Raising Eveness										
46 All Other Fund-Raising Expenses 47 Net Proceeds (Line 44 Less 45 and 46)										
47 Net Proceeds (Line 44 Less 45 and 46)	·		47							
(48–59 not currently in use) On line 4. "NOTE: If more than three activities PART V SUMMARY OF INVESTMENT:	es, attach a schedule using	the same format and inclu	CTION							
N/A										
60 Securities, beginning of year at cost										
Securities acquired, at cost or original by	asis		61							
or securities sold, at cost of olighial dasis	(may include sales expens	ses)	62							
63 Securities, end of year at cost	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •								
64 Securities, end of year at market value	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •	64							
65 Sum of all gains on sales during the yea	ll	• • • • • • • • • • • • • • • • • • • •								
66 Sum of all losses on sales during the yea 67 Dividends and interest from securities (9	90 line 5 or 990-PF Part	l line /L column (a)								
68 Total return realized (line 65 less line 66	olus line 67)	i, iiie 4, column (a)/								
69 Less all fees, salaries, and other costs in	curred to earn investmen	t income								
70 Net return realized from investments in s	ecurities (line 68 less line	69)								
Has this organization engaged in, purchased										
71 Investments (any type) which produce no	a, solu oi lietu uurilig tile Current income?	year:	74	Yes No						
72 Investments (any type) worth one half or	less of original hasis?	• • • • • • • • • • • • • • • • • • • •								
73 Securities on margin?		······································	72							
74 Warrants, puts, calls, options, commodity	futures, or short sales?		74							
73 Stocks rated "Speculative Grade" by Mood	dy's, or ranked "B—" or lo	ower by Standard & Poor's?.	75							
76 Securities not publicly traded?			76							
// Municipal bonds or similar tax-exempt se	curities which yield less tl	han taxable securities?	77							
78 Stock in which an officer, director or trus	tee owns 10% or more of	the outstanding shares?								
If "yes" on any line from 71–78, affix in	sequence as Exhibit 78	a full explanation includir	ig original basis and curre	nt value.						