

042683

OMB No. 1545-1150

Form 990-EZ

Short Form

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), section 527, section 4947(a)(1) nonexempt charitable trust
For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

2000

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A For the 2000 calendar year, or tax year beginning 7/01, 2000, and ending 6/30, 2001

- B Check if applicable: Change of address, Change of name, Initial return, Final return, Amended return

C REDWOOD CITY ROTARY CHARITABLE FOUND
C/O JAMES W. NEWELL, 410 BREWSTER
REDWOOD CITY, CA 94063-1709

D Employer identification number 94-2682890
E Telephone no. 420831TM
F Check if application pending

G Accounting method: Cash Accrued Other (specify)
H Enter 4-digit group exemption no. (GEN)

I Organization type (check only one) 501(c)(3)
Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

J Check 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.

K Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ \$ 80,361

L Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 34.)

Table with 21 rows for Revenue, Expenses, and Net Assets. Includes sub-rows for 5a-5c, 6a-6c, 7a-7c. Total revenue 50,588; Total expenses 51,431; Net assets at end of year 52,947.

Part II Balance Sheets - If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

Table with 7 rows for Balance Sheets. Columns (A) Beginning of year, (B) End of year. Total assets 57,606; Total liabilities 0; Net assets 57,606.

Registry of Charitable Trusts
Attorney General's
SEP 07 2001
RECEIVED

Registry of Charitable Trusts
Attorney General's
SEP 07 2001
RECEIVED

Registry of Charitable Trusts
Attorney General's
SEP 07 2001
RECEIVED

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 38.)

Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

What is the organization's primary exempt purpose? ROTARY CHARITABLE FOUNDATION
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Table with 2 columns: Program Title and Expenses. Row 28: OPERATION OF ROTARY CHARITABLE FOUNDATION (Grants \$ 51,396) 28a 51,431. Row 29: (Grants \$) 29a. Row 30: (Grants \$) 30a. Row 31: Other program services (attach schedule) (Grants \$) 31a. Row 32: Total program service expenses (add lines 28a through 31a) 32 51,431

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See Specific Instructions on page 38.)

Table with 5 columns: (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 & deferred compensation, (E) Expense account and other allowances. Row 1: SEE SCHEDULE ATTACHED, NONE, 0, 0, 0.

Part V Other Information (See Specific Instructions on page 38 and General Instruction V on page 14.) STATEMENT 5

Table with 3 columns: Question, Yes, No. Rows include: 33 Did organization engage in any activity not previously reported to IRS? (X); 34 Were any changes made to the organizing or governing documents but not reported to the IRS? (X); 35 If the organization had income from business activities... (a) (X), (b) (N/A); 36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (X); 37a Enter amount of political expenditures... (0); (b) Did the organization file Form 1120-POL for this year? (X); 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return? (X); (b) If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved (N/A); 39 501(c)(7) organizations... (39a) (N/A), (b) Gross receipts, included on line 9, for public use of club facilities (39b) (N/A); 40a 501(c)(3) organizations... (0); (b) 501(c)(3) and (4) organizations... (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 40c, above, reimbursed by the organization... (0); 41 List the states with which a copy of this return is filed... (CALIFORNIA); 42 The books are in care of... (TREASURER), Telephone no... (94063-1709); 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here... (N/A)

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. (Important: See General Instruction W, page 14.) Signature of officer: Carol Ebner, Date: 9/5/01, Type or print name and title: CAROL EBNER, TREASURER

Prepared by Preparer's signature: James W. Newell, Date: 8/28/01, Check if self-employed: [], Preparer's SSN or PTIN: P00049550, Firm's name (or yours if self-employed) and address and ZIP code: PEARSON, DEL PRETE & CO., LLP, 410 BREWSTER AVENUE, REDWOOD CITY, CA 94063-1709, EIN: 94-1355040, Phone no.: (650) 363-2800

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2000

Department of the Treasury
Internal Revenue Service

Supplementary Information - (See separate instructions.)

▶ **Must be completed by the above organizations and attached to their Form 990 or 990-EZ.**

Name of the organization

REDWOOD CITY ROTARY CHARITABLE FOUND

Employer identification number

94-2682890

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
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 page 1 of the instructions. List each one (whether individuals or firms.) If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶	0	

For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2000

Part III Statements About Activities

Table with 3 columns: Question, Yes, No. Contains questions 1 through 4a regarding lobbying, grants, and annuity plans.

Part IV Reason for Non-Private Foundation Status (See pages 2 through 5 of the instructions.)

- The organization is not a private foundation because it is: (Please check only ONE applicable box.)
5 [] A church, convention of churches, or association of churches.
6 [] A school.
7 [] A hospital or a cooperative hospital service organization.
8 [] A Federal, state, or local government or governmental unit.
9 [] A medical research organization operated in conjunction with a hospital.
10 [] An organization operated for the benefit of a college or university owned or operated by a governmental unit.
11a [] An organization that normally receives a substantial part of its support from a governmental unit or from the general public.
11b [] A community trust.
12 [X] 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...
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).

Provide the following information about the supported organizations. (See page 5 of the instructions.)

Table with 2 columns: (a) Name(s) of supported organization(s), (b) Line number from above.

- 14 [] An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	5,695	6,636	5,903	6,513	24,747
16 Membership fees received					
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					
18 Gross income from interest, dividends, amounts received from payments on securities (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	2,021	1,526	1,599	1,034	6,180
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 sch. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	7,716	8,162	7,502	7,547	30,927
24 Line 23 minus line 17	7,716	8,162	7,502	7,547	30,927
25 Enter 1% of line 23	77	82	75	75	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 N/A ▶ 26a					
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a government unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a. Enter the sum 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," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year: (1999) _____ 0 (1998) _____ 0 (1997) _____ 0 (1996) _____ 0					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list 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.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of all these differences (the excess amounts) for each year: (1999) _____ 0 (1998) _____ 0 (1997) _____ 0 (1996) _____ 0					
c Add: Amounts from column (e) for lines: 15 _____ 24,747 16 _____ 17 _____ 20 _____ 21 _____ ▶ 27c	24,747				
d Add: Line 27a total 0 and line 27b total 0 ▶ 27d	0				
e Public support (line 27c total minus line 27d total) ▶ 27e	24,747				
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f	30,927				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ 27g	80.02%				
h Investment Income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶ 27h	19.98%				

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See page 5 of the instructions.)

Part V Private School Questionnaire (See page 5 of the 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?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
.....			
.....			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	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?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
.....			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation.	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 7 of the instructions.) N/A
 (To be completed ONLY by an eligible organization that filed Form 5768)

Check here **a** if the organization belongs to an affiliated group.
 Check here **b** if you checked "a" above 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 -			
If the amount on line 40 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	41	
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		
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.			

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 on page 9 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(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 page 9 of the 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.

0 0565 1310

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 9 of the 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?

a Transfers from the reporting organization to a noncharitable exempt organization of:

(I) Cash.....

(II) Other assets.....

b Other transactions:

(I) Sales or exchanges of assets with a noncharitable exempt organization.....

(II) Purchases of assets from a noncharitable exempt organization.....

(III) Rental of facilities, equipment, or other assets.....

(IV) Reimbursement arrangements.....

(V) Loans or loan guarantees.....

(VI) Performance of services or membership or fundraising solicitations.....

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.....

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.

Table with 3 columns: Question, Yes, No. Rows include 51a(I), 51a(II), 51b(I) through 51b(VI), 51c, and 51d.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains '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? [X] Yes [] No

b If "Yes," complete the following schedule.

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1: ROTARY CLUB OF REDWOOD CY, 501 (C) (4), AFFILIATE.

REDWOOD CITY ROTARY CHARITABLE FOUND

94-2682890

STATEMENT 1
FORM 990-EZ, PART I, LINE 6
NET INCOME (LOSS) FROM SPECIAL EVENTS

SPECIAL EVENTS:

A) DUCK RACE, ETC

B)

C)

OTHER:

SPECIAL EVENTS	A	B	C	OTHER	TOTAL
GROSS RECEIPTS	\$ 71,509			0	71,509
LESS: CONTRIBUTIONS	0			0	0
GROSS REVENUE	71,509			0	71,509
LESS: DIRECT EXPENSES	29,773			0	29,773
NET INCOME (LOSS)	\$ 41,736			0	41,736

STATEMENT 2
FORM 990-EZ, PART I, LINE 10
GRANTS AND SIMILAR AMOUNTS PAID

CASH GRANTS AND ALLOCATIONS:

DONEE'S NAME:	SEQUOIA YMCA	
AMOUNT GIVEN:		\$ 705
DONEE'S NAME:	KAINOS	
AMOUNT GIVEN:		2,745
DONEE'S NAME:	BOY'S & GIRL'S CLUB	
AMOUNT GIVEN:		2,525
DONEE'S NAME:	SCHOLARSHIPS	
AMOUNT GIVEN:		1,500
DONEE'S NAME:	SEQUOIA HOSPITAL FOUND	
AMOUNT GIVEN:		900
DONEE'S NAME:	REDWOOD CITY ROTARY TRUST	
AMOUNT GIVEN:		7,735
DONEE'S NAME:	POLICE ACTIVITIES LEAGUE	
AMOUNT GIVEN:		13,695
DONEE'S NAME:	SHERIFFS CAMP	
AMOUNT GIVEN:		1,000

STATEMENT 2 (CONTINUED)
 FORM 990-EZ, PART I, LINE 10
 GRANTS AND SIMILAR AMOUNTS PAID

CASH GRANTS AND ALLOCATIONS:

DONEE'S NAME:	SALVATION ARMY	
AMOUNT GIVEN:		1,865
DONEE'S NAME:	FAMILY CONNECTIONS	
AMOUNT GIVEN:		5,000
DONEE'S NAME:	HABITAT FOR HUMANITY	
AMOUNT GIVEN:		5,134
DONEE'S NAME:	CASA DE REDWOOD	
AMOUNT GIVEN:		773
DONEE'S NAME:	PROJECT READ	
AMOUNT GIVEN:		450
DONEE'S NAME:	FRIENDS FOR YOUTH	
AMOUNT GIVEN:		1,030
DONEE'S NAME:	BOY SCOUTS	
AMOUNT GIVEN:		139
DONEE'S NAME:	MCKINLEY SCHOOL	
AMOUNT GIVEN:		200
DONEE'S NAME:	SAN SALVADOR EARTHQUAKE	
AMOUNT GIVEN:		1,000
DONEE'S NAME:	PROJECT AMIGO	
AMOUNT GIVEN:		1,000
DONEE'S NAME:	ROTARY INTL PROJECT	
AMOUNT GIVEN:		4,000
TOTAL CASH GRANTS AND ALLOCATIONS		\$ 51,396
TOTAL GRANTS AND ALLOCATIONS		\$ 51,396
TOTAL GRANTS AND SIMILAR AMOUNTS PAID		<u>\$ 51,396</u>

STATEMENT 3
 FORM 990-EZ, PART I, LINE 16
 OTHER EXPENSES

BANK CHARGES	\$	35
	TOTAL \$	<u>35</u>

STATEMENT 4
FORM 990-EZ, PART I, LINE 20
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

DECREASE IN MARKET VALUE OF SECURITIES	\$	-3,816
	TOTAL	<u>\$ -3,816</u>

STATEMENT 5
FORM 990-EZ, PART V
INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACT

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT
CONTRACT? NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? NO

REDWOOD CITY ROTARY CHARITABLE FOUNDATION

94-2682890

FORM 990EZ, YEAR ENDED 6/30/01

OFFICERS AND DIRECTORS

	(1)	(2)	(3)	(4)
Bill Nicolet 955 Edgecliff Way Redwood City, CA 94061	President Part time	None	None	None
Jackie Houle 2140 Greenways Drive Woodside, CA 94062	Past Pres Part time	None	None	None
Sam Dafnis P. O. Box 188 Redwood City, CA 94064	Secretary Part time	None	None	None
Carol Ebner 255 Wyndham Drive Portola Valley, CA 94028	Treasurer Part time	None	None	None
Tom Delfs 91 Bradshaw Terrace Redwood City, CA 94062	Director Part time	None	None	None
Irise Tam 541 Jefferson Ave Redwood City, CA 94063	Director Part time	None	None	None
Steve Mikulic 3023 Broadway Redwood City, CA 94062	Director Part time	None	None	None
Bill Conklin 555 Warren Street Redwood City, CA 94063	Director Part time	None	None	None
Judy Cooper 675 E. Middlefield Road Mountain View, CA 94040	Director Part time	None	None	None
Don Hack 718 California Way Redwood City, CA 94062	Director Part time	None	None	None

(1) Title and time devoted to position

(2) Compensation

(3) Contributions to benefit plans

(4) Expense account