

Return of Organization Exempt from Income Tax

2001

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2001 calendar year, or tax year beginning Nov 1, 2001, and ending Oct 31, 2002

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

C Name of organization: American Botanical Council; Number street (or P O box if mail is not delivered to street addr) Room/suite: P O Box 144345; City Town or Country State ZIP code + 4: Austin TX 78714

D Employer identification Number: 74-2518542; E Telephone number: (512) 926-4900; 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 [] No [X]; H(b) If yes enter number of affiliates; H(c) Are all affiliates included? Yes [] No []; H(d) Is this a separate return filed by an organization covered by a group ruling? Yes [] No [X]; I Enter 4 digit group GEN; M Check [] if the organization is not required to attach Schedule B (Form 990, 990 EZ, or 990 PF)

G Web site

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

K Check here [] if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: 1,304,050

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see instructions)

RECEIVED

JAN 26 2003

74

RECEIVED

ASSETS

Table with 21 rows and 4 columns: Description, (A) Securities, (B) Other, and Total. Row 1: Contributions, gifts, grants, and similar amounts received. Row 2: Program service revenue including government fees and contracts. Row 3: Membership dues and assessments. Row 4: Interest on savings and temporary cash investments. Row 5: Dividends and interest from securities. Row 6: Gross rents. Row 7: Other investment income. Row 8: Gross amount from sales of assets other than inventory. Row 9: Special events and activities. Row 10: Gross revenue (not including of contributions). Row 11: Other revenue. Row 12: Total revenue. Row 13: Program services. Row 14: Management and general. Row 15: Fundraising. Row 16: Payments to affiliates. Row 17: Total expenses. Row 18: Excess or (deficit) for the year. Row 19: Net assets or fund balances at beginning of year. Row 20: Other changes in net assets or fund balances. Row 21: Net assets or fund balances at end of year.

SCANNED JAN 29 2003

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) (cash \$ _____ non cash \$ _____)	22			
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 46,800	39,312	4,680	2,808
26	Other salaries and wages	26 472,907	397,242	47,291	28,374
27	Pension plan contributions	27			
28	Other employee benefits	28 31,418	26,391	3,142	1,885
29	Payroll taxes	29 40,241	33,803	4,024	2,414
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33 25,623	21,524	2,562	1,537
34	Telephone	34			
35	Postage and shipping	35 45,239	38,001	4,524	2,714
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41 53,594	45,019	5,359	3,216
42	Depreciation, depletion, etc (attach schedule)	42 101,297	85,089	10,130	6,078
43	Other expenses not covered above (itemize)				
	a Contract labor	43a 42,769	35,926	4,277	2,566
	b Consulting fees	43b 45,706	38,393	4,571	2,742
	c Advertising & business promotions	43c 41,843	35,148	4,184	2,511
	d Professional services	43d 41,090	34,516	4,109	2,465
	e See Other Expenses Stmt	43e 92,052	77,322	9,205	5,525
44	Total functional expenses (add lines 22-43) Organizations completing columns (B) (D), carry these totals to lines 13-15	44 1,080,579	907,686	108,058	64,835

Joint Costs Check if you are following SOP 98.2
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to program services \$ _____, (iii) the amount allocated to management and general \$ _____, and (iv) the amount allocated to fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? <input type="checkbox"/> See Note 1	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts but optional for others)
a See Note 2	
(Grants and allocations \$ 0)	907,686
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)	907,686

Part IV Balance Sheets (See instructions)

Note		(A)		(B)	
Where required attached schedules and amounts within the description column should be for end of year amounts only		Beginning of year		End of year	
ASSETS	45 Cash – non interest bearing		11,359	45	2,470
	46 Savings and temporary cash investments			46	
	47 a Accounts receivable	47 a	300,339		
	b Less allowance for doubtful accounts	47 b	0	47 c	300,339
	48 a Pledges receivable	48 a			
	b Less allowance for doubtful accounts	48 b		48 c	
	49 Grants receivable			49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51 a Other notes & loans receivable (attach sch)	51 a			
	b Less allowance for doubtful accounts	51 b		51 c	
	52 Inventories for sale or use		186,837	52	71,464
	53 Prepaid expenses and deferred charges		874	53	
	54 Investments – securities (attach schedule)			54	
	55 a Investments – land, buildings, & equipment basis	55 a			
	b Less accumulated depreciation (attach schedule)	55 b		55 c	
56 Investments – other (attach schedule)			56		
57 a Land, buildings, and equipment basis	57 a	1,075,288			
b Less accumulated depreciation (attach schedule) L-57 Stmt	57 b	532,440	57 c	542,848	
58 Other assets (describe ▶ See Line 58 Stmt)		18,891	58	182,851	
59 Total assets (add lines 45 through 58) (must equal line 74)		1,083,007	59	1,099,972	
LIABILITIES	60 Accounts payable and accrued expenses		208,729	60	138,774
	61 Grants payable			61	
	62 Deferred revenue			62	12,000
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64 a Tax exempt bond liabilities (attach schedule)			64 a	
	b Mortgages and other notes payable (attach schedule)		489,919	64 b	556,236
	65 Other liabilities (describe ▶ See Line 65 Stmt)		57,386	65	28,838
66 Total liabilities (add lines 60 through 65)		756,034	66	735,848	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted		326,973	67	364,124
	68 Temporarily restricted			68	
	69 Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds			70	
	71 Paid in or capital surplus, or land, building, and equipment fund			71	
	72 Retained earnings, endowment, accumulated income, or other funds			72	
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)		326,973	73	364,124	
74 Total liabilities and net assets/fund balances (add lines 66 and 73)		1,083,007	74	1,099,972	

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)

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

a	Total revenue, gains, and other support per audited financial statements	a	1,120,624
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	1,120,624
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	1,120,624

a	Total expenses and losses per audited financial statements	a	1,080,579
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	1,080,579
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	1,080,579

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
Mark Blumenthal PO Box 144345 Austin, TX 78714	President 60	46,800	2,266	0
James Duke 8210 Murphy Rd Fulton, MD 20759	Treasurer 3	0	0	0
Norman Farnsworth 833 South Wood St Chicago IL 60612	Secretary 3	0	0	0
Michael Balick 200th St & Southern Blvd Bronx NY 10458	Trustee 3	0	0	0
Steven Foster PO Box 1343 Fayetteville AR 72704	Trustee 3	0	0	0
Fredi Kronenberg 630 W 168th St #34 New York, NY 10032	Trustee 3	0	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

Part VI Other Information (See specific 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	
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 _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a Enter direct or 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	
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	
85 501(c)(4), (5) or (6) organizations a Were substantially all dues nondeductible by members?	85a	
b Did the organization make only in house lobbying expenditures of \$2,000 or less? 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	85b	
c Dues, assessments, and similar amounts from members	85c	
d Section 162(e) lobbying and political expenditures	85d	
e Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices	85e	
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g Does the organization elect to pay the Section 6033(e) tax on the amount on line 85f?	85g	
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	
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	
b Gross receipts, included on line 12, for public use of club facilities	86b	
87 501(c)(12) organizations Enter a Gross income from members or shareholders	87a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
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		0
d Enter Amount of tax on line 89c, above, reimbursed by the organization _____ 0		0
90a List the states with which a copy of this return is filed _____ None		
b Number of employees employed in the pay period that includes March 12, 2001 (see instructions)	90b	22
91 The books are in care of _____ Cecelia Thompson Telephone number _____ (512) 926-4900 Located at _____ 6200 Manor Road Austin TX ZIP + 4 _____ 78723		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here _____ and enter the amount of tax exempt interest received or accrued during the tax year _____ 92		

Part VII Analysis of Income Producing Activities (See instructions)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a <u>Services</u>					50,942
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					628,132
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities					
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					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					70,364
103 Other revenue a _____					
b <u>Miscellaneous</u>					72,710
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))					822,148
105 Total (add line 104, columns (B), (D), and (E))					822,148

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)
All	American Botanical Council was developed to organize and implement programs on herbs and medical programs for charitable scientific literary and educational purposes All funds received are used to meet organizational needs to provide programs

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
	%			
	%			
	%			
	%			

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 attachments) and the accompanying schedules and information, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of Officer: Mark Blumenthal

Type or Print Name and Title: MARK BLUMENTHAL, EXECUTIVE

Paid Preparer's Use Only

Preparer's Signature: Montemayor & Associates

Firm's name (or yours if self employed) and address, and ZIP + 4: Montemayor & Associates, P.O. Box 907 S Congress Ave Ste Austin

Schedule A
(Form 990 or 990-EZ)

**Organization Exempt Under
Section 501(c)(3)**

OMB No 1545-0047

(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)

2001

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

American Botanical Council

Employer Identification Number

74-2518542

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 & deferred compensation	(e) Expense account and other allowances
Wayne Silverman 3 Matador Circle Austin, TX 78746	Chief Administrative Officer 40	91,329	2,623	0

Total number of other employees paid over \$50,000 ▶	None			

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
None		

Total number of others receiving over \$50,000 for professional services ▶	None	

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 ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI A Other organizations checking Yes, must complete Part VI B and attach a statement giving a detailed description of the lobbying activities		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?	X	

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

Part IV Reason for Non-Private Foundation Status (See 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)
- 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV A)
- 11 b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV A)
- 12 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See 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) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	695,091	837,770	1,532,838	650,216	3,715,915
16 Membership fees received	379,507	0	0	0	379,507
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	307,587	273,395	1,017,201	2,153,278	3,751,461
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	20	97	97	593	807
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	12,550	0	0	11,700	24,250
23 Total of lines 15 through 22	1,394,755	1,111,262	2,550,136	2,815,787	7,871,940
24 Line 23 minus line 17	1,087,168	837,867	1,532,935	662,509	4,120,479
25 Enter 1% of line 23	13,948	11,113	25,501	28,158	

26 Organizations described on lines 10 or 11

a Enter 2% of amount in column (e), line 24 ▶ 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 1997 through 2000 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 _____ ▶ 26d

22 _____ 26b _____

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

(2000) _____ (1999) _____ (1998) _____ (1997) _____

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

(2000) _____ (1999) _____ (1998) _____ (1997) _____

c Add Amounts from column (e) for lines 15 3,715,915 16 379,507 ▶ 27c

17 3,751,461 20 _____ 21 _____ 7,846,883

d Add Line 27a total _____ and line 27b total _____ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e 7,846,883

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶ 27f 7,871,940

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ 27g 99.68%

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ 27h 0.01%

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, 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?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe if 'No,' please explain (If you need more space, attach a separate statement) ----- ----- -----		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement) ----- ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75 50, 1975 2 C B 587, covering racial nondiscrimination? If 'No' attach an explanation		

Additional Information

Note A & B

Note A

American Botanical Council was created to provide the public with responsible information on herbs and medicinal plants

Note B

American Botanical Council publishes a quarterly scientific journal and operates various programs including the publication of various scientific books, monographs, production of professional continuing education seminars and modules, and consumer education materials

Form 990, Page 1, Part I, Line 10
Gross Sales of Inventory Statement

Description	Gross Sales Less Returns and Allowances	Less Cost of Goods Sold	Gross Profit (Loss)
HerbalGram Sales & Retail Sales	253,790	183,426	70,364
Total	<u>253,790</u>	<u>183,426</u>	<u>70,364</u>

Form 990, Page 2, Part II, Line 43
Other Expenses Stmt

Other expenses not covered above (itemize)	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Property & casualty insurance	17,767	14,924	1,777	1,066
Outside services	24,734	20,777	2,473	1,484
Telephone & utilities	33,481	28,124	3,348	2,009
Miscellaneous operating expense	16,070	13,497	1,607	966
Total	<u>92,052</u>	<u>77,322</u>	<u>9,205</u>	<u>5,525</u>

Form 990, Page 3, Part IV, Lines 57a & 57b
Land, Buildings and Equipment Statement

	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
Buildings	585,776	0	585,776
Machinery & equipment	364,029	0	364,029
Garden	54,904	0	54,904
Vehicles	19,500	0	19,500
Furniture	25,835	0	25,835
Security	1,813	0	1,813
Gift In Kind	23,431	0	23,431
Accumulated depreciation	0	532,440	-532,440
Total	<u>1,075,288</u>	<u>532,440</u>	<u>542,848</u>

Form 990, Page 3, Part IV, Line 58
Other Assets Statement

Line 58 - Other Assets:	Beginning of Year	End of Year
Costs incurred in writing & developing a book, The Guide	0	182,851
Gifts in Kind, Suspense	18,891	0
Total	<u>18,891</u>	<u>182,851</u>

Form 990, Page 3, Part IV, Line 65

Other Liabilities Statement

Line 65 - Other Liabilities:	Beginning of Year	End of Year
Unfulfilled subscription	57,386	28,838
Total	<u>57,386</u>	<u>28,838</u>

Supporting Statement of

Form 990 p 1/Line 20

Description	Amount
Beginning net asset adjustment	
Per 2000 990, Beginning Net Assets	-326,973
Per 2001 Audit Report, Beginning Net Assets	324,079
Total	<u>-2,894</u>

Supporting Statement of.

Form 990 p 3/Line 47a

Description	Amount
Receivables	145,872
Long term receivables	154,467
Total	<u>300,339</u>

Supporting Statement of

Form 990 p 3/Line 60, column (B)

Description	Amount
Accounts payable	111,336
Accrued liabilities	27,438
Total	<u>138,774</u>

Supporting Statement of

Form 990 p 3/Line 64b, column (B)

Description	Amount
Note payable to a bank	379,284
Draws on a \$75,000 revolving line of credit	67,662
Note payable to a corporation	63,373
Draws on a \$25,000 revolving line of credit	24,054
Principal portion of obligations under capital leases for office equipment, an annex building, and an automobile	11,863
Uncollateralized short-term note payable to the Executive Director	10,000
Total	<u>556,236</u>