Form

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2003

Department of the Treasury Internal Revenue Service

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

The organization may have to use a copy of this return to satisfy state reporting requirements Open to Public Inspection For the 2003 calendar year, or tax year beginning 10/01/03, and ending 12/31/03 Please D Employer ID number C Name of organization 'Check if applicable use IRS 52-2193975 Address change label or The Weston A. Price Foundation Telephone number Name change print or 202-333-4325 type. Number and street (or P O box if mail is not delivered to street address) Room/suite Initial return See PMB 106-380, 4200 Wisconsin Ave. NW Accounting method: X Cash Final return Specific Other (specify) City or town, state or country, and ZIP + 4 Accrual Amended return Instruc-DC 20016 Application pending tions. Washington Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable H and I are not applicable to section 527 organizations H(a) Is this a group return for affiliates? trusts must attach a completed Schedule A (Form 990 or 990-EZ). G Website: ▶ www.westonaprice.org H(b) If "Yes," enter number of affiliates ▶ Organization type H(c) Are all affiliates included? (check only one)  $\blacktriangleright \mathbf{X}$  501(c) ( 3 )  $\lt$  (insert no ) 4947(a)(1) or (If "No." att a list See instr) Check here ▶ I if the organization's gross receipts are normally not more than \$25,00♥ H(d) is this a separate return filed by an The organization need not file a return with the IRS, but if the organization received a organization covered by a group ruling? Group Exemption Number ▶ Form 990 Package in the mail, it should file a return without financial data Some states M Check ► X if the organization is not required require a complete return. 79,607 Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ to attach Sch B (Form 990, 990-EZ, or 990-PF) Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.) Part I Contributions, gifts, grants, and similar amounts received 29,566 Direct public support 1a Indirect public support 1b 1c Government contributions (grants) C 29,566 noncash \$ 29,566 1d Total (add lines 1a through 1c) (cash \$ \_\_\_ d 10,649 Program service revenue including government fees and contracts (from Part VII, line 93) 2 39,392 See Stmt 1 3 3 Membership dues and assessments 4 4 Interest on savings and temporary cash investments 5 5 Dividends and interest from securities 6a Gross rents 6b Less rental expenses 6c Net rental income or (loss) (subtract line 6b from line 6a) C 7 Other investment income (describe) Gross amount from sales of assets other (B) Other (A) Securities 8a than inventory 8ь Less cost or other basis and sales expenses Gain or (loss) (attach schedule) Net gain or (loss) (combine line 8c, columns (A) and (B)) 8d Special events and activities (attach schedule) If any amount is from gaming, check here ▶ 9 Gross revenue (not including \$ 9a contributions reported on line 1a) 9b b Less direct expenses other than fundraising expenses 9с Net income or (loss) from special events (subtract line 9b from line 9a) 10a 10a Gross sales of inventory, less returns and allowances 10b b Less cost of goods sold Gross profit or (loss) from sales of inventory (attach so redule) a unique from line 10a) 10c C 11 11 Other revenue (from Part VII, line 103) 79,607 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c) nd 11) 12 12 74,023 13 13 Program services (from line 44, column (B)) AUG 1 7 2004 1,439 14 Management and general (from line 44, column (C)) 14 2,528 15 15 Fundraising (from line 44, column (D)) OGUEN, UÍ 16 16 Payments to affiliates (attach schedule) 77,990 17 Total expenses (add lines 16 and 44, column (A)) 17 1,617 18 18 Excess or (deficit) for the year (subtract line 17 from line 12) 13,842

Net assets or fund balances at beginning of year (from line 73, column (A))

Net assets or fund balances at end of year (combine lines 18, 19, and 20)

Other changes in net assets or fund balances (attach explanation)

19

20

15,459

19 20

21

Part II Statement of All organizations	s must co	mplete column (A) Colum	ns (B), (C), and (D) are red	quired for section 501(c)(3	3) and (4) organizations
Functional Expenses and section 494	7(a)(1) no	nexempt charitable trusts	but optional for others (Se	e page 22 of the instruct	ons)
. Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	services	and general	(D) Fundatising
22 Grants and allocations (attach schedule)					
(cash \$ cash \$	) 22				
23 Specific assistance to individuals	23	-			
24 Benefits paid to or for members	24				
25 Compensation of officers, directors, etc	25				
26 Other salaries and wages	26				
Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29				
Professional fundraising fees	30				
31 Accounting fees	31	2 464	2 464		
32 Legal fees	32	3,464			
3 Supplies	33	266			
34 Telephone	34	1,297			
5 Postage and shipping	35	6,130	3,602		2,52
6 Occupancy	36				
7 Equipment rental and maintenance	37				
88 Printing and publications	38	20,897			
9 Travel	39	1,339			! !
O Conferences, conventions, and meetings	40	20,302	20,302		
1 Interest	41				
2 Depreciation, depletion, etc. (attach schedule)	42				<u> </u>
3 Other expenses not covered above (itemize) a	43a				
b See Statement 2	43b	24,295	22,856	1,439	
c	43c				
d	43d				
е	43e				
4 Total functional expenses (add lines 22 - 43) Organizations					
completing columns (B)-(D), carry these totals to lines 13-	15 44	77,990	74,023	1,439	2,528
loint Costs. Check ▶ ☐ If you are following SOP 98-2					
Are any joint costs from a combined educational campaign a	nd fund	raising solicitation repo	rted in (B) Program se	vices?	▶ ☐ Yes 🗓 No
"Yes," enter (i) the aggregate amount of these joint costs		, (iı) the amou	unt allocated to Program se	ervices \$	
iii) the amount allocated to Management and genera\$		, and (iv) the amou	unt allocated to Fundraisin	g\$	
Part III Statement of Program Service Ac	comp	lishments (See p	age 25 of the inst	ructions.)	
Vhat is the organization's primary exempt purpose?					Program Service
See Statement 3					Expenses (Required for 501(c)(3)
Il organizations must describe their exempt purpose achieved folients served, publications issued, etc. Discuss achievem	ements	in a clear and concise i	manner State the num	ber	(4) orgs , & 4947(a)(1)
of clients served, publications issued, etc. Discuss achievem organizations and 4947(a)(1) nonexempt charitable trusts mu	ents tha ist also	t are not measurable ( enter the amount of gra	ants and allocations to	others)	trusts, but optional for others )
a Organization of Educational					
4					
		(Grants and al	locations \$	)	20,302
Dissemination of research	nate	rial and edu	ucational		
publications through broch	ıres	and other	media.		
		(Grants and all	locations \$	)	53,721
c		(+	•		<b>4</b> .
		(Grants and all	locations \$	١	
d		(Cranto and an		,	
~					
		(Grants and all	locations \$	ν,	
e Other program services (attach schedule) See St	m+ 1	· · · · · · · · · · · · · · · · · · ·		<i>,</i>	
······································		,			74,023
f Total of Program Service Expenses (should equal line	<del>, ∪∪।∪</del>	mir (b), Flogram Selvic	.c.sj		Form <b>990</b> (200)

Form 990 (2003)

## Part IV Balance Sheets (See page 25 of the instructions.)

Note:	Where required, attached schedules and amoun column should be for end-of-year amounts only	nts within the description	(A) Beginning of year		(B) End of year
45	Cash-non-interest-bearing		13,842	45	15,45
46	Savings and temporary cash investments		46		
		1 1			
47a	Accounts receivable	47a			
b	Less allowance for doubtful accounts	47b		47c	
48a	Pledges receivable	48a			
b	Less allowance for doubtful accounts	48b		48c	
49	Grants receivable			49	
50	Receivables from officers, directors, trustees, ar	nd key employees			
	(attach schedule)	Ĺ		50	
51a	Other notes and loans receivable (attach				
1	schedule)	51a			
b	Less allowance for doubtful accounts	51b		51c	
52	Inventories for sale or use	].		52	
53	Prepaid expenses and deferred charges	— — — <del> </del>		53	
54	Investments-securities	► ☐ Cost ☐ FMV ☐		54	<del></del>
55a	Investments-land, buildings, and				
1	equipment basis	55a			
b	Less accumulated depreciation (attach	1 1			
1	schedule)	55b		55c	·
56	Investments-other (attach schedule)	· · · · · · · · · · · · · · · · · · ·		56	
1	Land, buildings, and equipment basis	57a			
Ь	Less accumulated depreciation (attach	1			
	schedule)	57b		57c	
58	Other assets (describe	— '		58	,
59	Total assets (add lines 45 through 58) (must eq	ual line 74)	13,842	59	15,459
60	Accounts payable and accrued expenses			60	
61	Grants payable			61	
62	Deferred revenue			62	
63	Loans from officers, directors, trustees, and key	employees (attach			
	schedule)	Ĺ		63	
64a	Tax-exempt bond liabilities (attach schedule)			64a	
ь	Mortgages and other notes payable (attach sche	dule)		64b	
65	Other liabilities (describe	)		65	
66	Total liabilities (add lines 60 through 65)		o	66	O
	nizations that follow SFAS 117, check here	X and complete lines			
"	67 through 69 and lines 73 and 74	_ ,			
F 67	Unrestricted		13,842	67	15,459
u 68	Temporarily restricted	F		68	
69	Permanently restricted	F		69	
Orga	nizations that do not follow SFAS 117, check I	nere ▶ ☐ and			
3	complete lines 70 through 74			İ	
70	Capital stock, trust principal, or current funds			70	
71	Paid-in or capital surplus, or land, building, and e	equipment fund		71	
72	Retained earnings, endowment, accumulated inc			72	
73	Total net assets or fund balances (add lines 6	F			
<b>e</b>	70 through 72,		ŀ	]	
5	column (A) must equal line 19, column (B) must	equal line 21)	13,842	73	15,459
74	Total liabilities and net assets / fund balances		13,842	74	15,459

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 DAA.

04763								
Form 990 (2003)	The Weston A.	Price Founda	tion	52-2	193975			Page 4
Part'IV-A	Reconciliation of Rev	•	Pa		Reconciliation o	•	•	
•	Financial Statements	with Revenue per			inancial Statem	ents	with Ex	penses per
N/A	Return (See page 27	of the instructions.)	N,	/A F	Return			
a Total revenue	e, gains, and other support		а	Total expenses	and losses per			
<ul> <li>per audited fi</li> </ul>	inancial statements	[ a		audited financia	al statements		a	
b Amounts incl	luded on line a but not on		b	Amounts includ	ed on line a but not			
line 12, Form	n 990			on line 17, Form	n 990			
(1) Net unrealize	ed gains on		(1)	Donated service	es and use			
investments	\$			of facilities \$				
(2) Donated sen	vices and use	1	(2)	Prior year adjus	tments			
of facilities	\$			reported on line				
(3) Recoveries of	of prior	]		Form 990 \$				
year grants	\$	<b> </b>	(3)	Losses reported	d on line 20,			
(4) Other (specif	fy)	<b>i</b>		Form 990 \$				
., .,	••		(4)	Other (specify)				
	\$		' '				i	
Add amounts	s on lines (1) through (4)	] ь		\$				
	,, -			Add amounts or	n lines (1) through (4	) ▶	ь	
c Line a minus	line b	c	c	Line a minus lin	e b	▶	С	
d Amounts incl	luded on line 12,		d	Amounts include	ed on line 17,			
Form 990 but	t not on line a:			Form 990 but no	ot on line a:			
(1) Investment e	expenses		(1)	Investment expe	enses			
not included	on line		' '	not included on	line	1		
6b, Form 990	<b>)</b> \$			6b, Form 990 \$				
(2) Other (specif			(2)	Other (specify)	•			
	•		1			İ		
	\$			\$				
Add amounts	s on lines (1) and (2)	d		Add amounts or	n lines (1) and (2)	•	d	
e Total revenue	e per line 12, Form 990		е	Total expenses	per line 17, Form 99	0		
(line c plus lir	ne d)	e		(line c plus line	d)	▶	е	
Part V Lis	st of Officers, Director	s, Trustees, and Ke	y Empl	oyees (List eac	ch one even if not cor	npens	ated, see pa	age 27 of
the	e instructions )							
	(A) Nome and address		(B) T	itle and average er week devoted to	(C) Compensation (If not paid, enter	(D) emplo	Contrib to yee benefit	(E) Expense account and other
	(A) Name and address		ilouis pe	position	-0)	plans	yee benefit & deferred npensation	allowances
Sally W.			Pres	s & Treas				
4801 W S	t. Washington I	DC	Var		0		0	0

Mary G. Enig Vice Preside 12501 Prosperity Silver Spring MD 0 0 0 Var Tom Cowan Director 0 0 0 360 Sand Hill Road Peterborough NH Var Geoffrey Morell Secretary 4200 Wisconsin A Washington DC 0 0 0 Var Linda Joyce Forristal Director 5012 56th Place Hyattsville MD 0 0 Var 0 Cherie Calvert Director 0 0 0 Var Janice Curtain Director 0 0 0 Var

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?

If "Yes," attach schedule-see page 28 of the instructions

▶ ☐ Yes 🗓 No

77 W 78a Di 79 W 80a Is 80a Is 81a Er b Di 82a Di re 83a Di 84a Di 85 50 b Di ff re c Di d Se e Ag f Ta g Do	d the organization engage in any activity ach activity are any changes made in the organizing "Yes," attach a conformed copy of the child the organization have unrelated busine "Yes," has it filed a tax return on Form 95 as there a liquidation, dissolution, terminatement the organization related (other than by assembership, governing bodies, trustees, of "Yes," enter the name of the organization of the organization file Form 1120-POL for the organization file Form 1120-POL for the organization receive donated service at substantially less than fair rental value "Yes," you may indicate the value of these venue in Part I or as an expense in Part I did the organization comply with the public did the organization comply with the disclosed the organization solicit any contributions "Yes," did the organization include with every gifts were not tax deductible? In (c)(4), (5), or (6) organizations a Were did the organization make only in-house lot "Yes" was answered to either 85a or 85b, delived a waiver for proxy tax owed for the page of the organization and similar amounts for the organization of section 162(e) lobbying and political expensions agregate nondeductible amount of section of the organization of section of the organization of section of the organization and political expensions are section 162(e) lobbying and political expensions.	y not previously y not previously g or governing hanges ess gross inco 190-T for this y hation, or subs association with officers, etc., to n  ures. See line 8 for this year? here or the use here If (See instruct c inspection re cosure requirem his or gifts that every solicitation e substantially bobbying expension, do not comp here prior year from members	y reported to the documents but no me of \$1,000 or sear? Stantial contraction in a statewide or roo any other exeminate and statewide or roo any other exeminate and statewide or materials, equivalent in the properties of materials, equivalent in the properties of materials for reports relating to one were not tax ded on an express state all dues nondeductives of \$2,000 plete 85c through	IRS? If "Yes," attack of reported to the IR more during the year in during the year? If mationwide organizat pt or nonexempt org check whether it is uipment, or facilities his amount as eturns and exemption uid pro quo contribu uctible? htement that such co	r covered by the recovered by the recove	s return? mmon	N/A N/A N/A N/A	76 77 78a 78b 79 80a 81b 82a 83a 83b 84a 85a 85b	X	X X X X
81a Err b Di ff re 83a Di ff re C Di d Se e Ag f Ta g Di	did the organization engage in any activity ach activity are any changes made in the organizing "Yes," attach a conformed copy of the child the organization have unrelated busine "Yes," has it filed a tax return on Form 95 as there a liquidation, dissolution, terminatement the organization related (other than by assembership, governing bodies, trustees, or "Yes," enter the name of the organization of the organization file Form 1120-POL for the organization file Form 1120-POL for the organization receive donated service at substantially less than fair rental value "Yes," you may indicate the value of these venue in Part I or as an expense in Part I did the organization comply with the public did the organization comply with the disclosed the organization solicit any contributions "Yes," did the organization include with every gifts were not tax deductible? (1(c)(4), (5), or (6) organizations a Were did the organization make only in-house lot "Yes" was answered to either 85a or 85b, delived a waiver for proxy tax owed for the pagregate nondeductible amount of section 162(e) lobbying and political expendigregate nondeductible amount of section	y not previously y not previously g or governing hanges ess gross inco 190-T for this y hation, or subs association with officers, etc., to n  ures. See line 8 for this year? here or the use here If (See instruct c inspection re cosure requirem his or gifts that every solicitation e substantially bobbying expension, do not comp here prior year from members	y reported to the documents but no me of \$1,000 or sear? Stantial contraction in a statewide or roo any other exeminate and statewide or roo any other exeminate and statewide or materials, equivalent in the properties of materials, equivalent in the properties of materials for reports relating to one were not tax ded on an express state all dues nondeductives of \$2,000 plete 85c through	IRS? If "Yes," attack of reported to the IR more during the year in during the year? If mationwide organizat pt or nonexempt org check whether it is uipment, or facilities his amount as eturns and exemption uid pro quo contribu uctible? htement that such co	r covered by the recovered by the recove	s return? mmon	N/A N/A N/A	77 78a 78b 79 80a 81b 82a 83a 83b 84a 84b 85a	x	x x x
ea 77  W 78a  Di 79  W 80a  Is 80a  Is 80a  Is 81a  Er 81a  Di 82a  Di 84a  Di 84a  Di 85  50 86  B 87  B 87  B 88  B 89  B 80  B 80  B 81  B 81  B 82  B 83  B 84  B 85  B 86  B 87  B 88   ach activity lere any changes made in the organizing "Yes," attach a conformed copy of the ch d the organization have unrelated busine "Yes," has it filed a tax return on Form 98 las there a liquidation, dissolution, terminal atement the organization related (other than by as embership, governing bodies, trustees, or "Yes," enter the name of the organization inter direct and indirect political expenditur d the organization file Form 1120-POL fo d the organization receive donated service at substantially less than fair rental value "Yes," you may indicate the value of these evenue in Part I or as an expense in Part I d the organization comply with the public d the organization solicit any contribution: "Yes," did the organization include with ex gifts were not tax deductible? Int(c)(4), (5), or (6) organizations a Were d the organization make only in-house lot "Yes" was answered to either 85a or 85b, ceived a waiver for proxy tax owed for the ues, assessments, and similar amounts for goregate nondeductible amount of section	g or governing hanges ess gross inco 190-T for this y nation, or substantially obbying expension, do not comper from members from members incompers or get a substantially obbying expension, do not comper from members incompers or get a substantially obbying expension, do not comper from members incompers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension, do not compers or get a substantially obbying expension.	documents but no me of \$1,000 or rear? stantial contraction in a statewide or roo any other exems and 81 instructions of materials, equipments for reaching to quirements for reaching to quirements for reaching to quirements relating to quirements relat	ot reported to the IR more during the year in during the year? If nationwide organizat pt or nonexempt org check whether it is uipment, or facilities his amount as sturns and exemption uid pro quo contribu uctible? Itement that such co	r covered by the recovered by the recove	s return? mmon	N/A N/A N/A	77 78a 78b 79 80a 81b 82a 83a 83b 84a 84b 85a	x	x x x	
77 W	lere any changes made in the organizing "Yes," attach a conformed copy of the child the organization have unrelated busine "Yes," has it filed a tax return on Form 98 has there a liquidation, dissolution, terminatement the organization related (other than by assembership, governing bodies, trustees, or "Yes," enter the name of the organization of the organization file Form 1120-POL for the organization receive donated service at substantially less than fair rental value "Yes," you may indicate the value of these venue in Part I or as an expense in Part I did the organization comply with the public of the organization comply with the disclosed the organization solicit any contribution: "Yes," did the organization include with exigifts were not tax deductible?  11(c)(4), (5), or (6) organizations a Were did the organization make only in-house lot "Yes" was answered to either 85a or 85b, delived a waiver for proxy tax owed for the pagregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and political expending gregate nondeductible amount of section 162(e) lobbying and po	hanges ess gross inco 190-T for this y nation, or subs association with officers, etc., to ures. See line 8 for this year? It (See instruct or inspection re osure requirem ns or gifts that every solicitation e substantially obbying expension, do not comple prior year from members	ame of \$1,000 or rear? stantial contraction h a statewide or reo any other exem and 81 instructions e of materials, equ Do not include the ctions in Part III) equirements for real ments relating to qu were not tax ded on an express sta all dues nondeduction ditures of \$2,000 plete 85c through	more during the year of during the year? If nationwide organization or nonexempt organization or nonexempt organization or nonexempt organization or nonexempt organization or nonexempt or facilities amount as amount as atturns and exemption und pro quo contribution of the second of the second or not organized or not organized or not organized or not not organized or not not organized or not not organized or not not not not not not not not not not	r covered by the response of t	mmon	N/A N/A N/A	77 78a 78b 79 80a 81b 82a 83a 83b 84a 84b 85a	x	x x x
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78a Di     b If 79 W 80a Is 80a Is     b If 81a Er     b Di 82a Di     or     b If 84a Di 84a Di 85 50     b Di If re     c Di     d Se     g Do	d the organization have unrelated busine "Yes," has it filed a tax return on Form 95 fas there a liquidation, dissolution, terminatement the organization related (other than by assembership, governing bodies, trustees, or "Yes," enter the name of the organization of the organization file Form 1120-POL for the organization receive donated service at substantially less than fair rental value "Yes," you may indicate the value of these venue in Part I or as an expense in Part I de the organization comply with the public of the organization solicit any contribution: "Yes," did the organization include with example were not tax deductible? Of (c)(4), (5), or (6) organizations a Were of the organization make only in-house lot "Yes" was answered to either 85a or 85b, deeived a waiver for proxy tax owed for the pagregate nondeductible amount of section 162(e) lobbying and political expendignegate nondeductible amount of section	ess gross inco 190-T for this y nation, or subs association with officers, etc., to n  ures. See line 8 for this year? It (See instruct c inspection re osure requirem ns or gifts that every solicitation e substantially obbying expension, do not comple prior year from members	rear?  Itantial contraction  Itantial contraction  Itantial contraction  Itantial contraction  Itantial contraction  Itantial contractions  Itantial contractions  Itantial contraction  Itantial cont	n during the year? If nationwide organizat pt or nonexempt org check whether it is uipment, or facilities his amount as eturns and exemption uid pro quo contribu uctible? htement that such co	f "Yes," attach attion) through coganization?  exempt or 81a at no charge  82b n applications? ontributions he organization	mmon	N/A N/A N/A	78b 79 80a 81b 82a 83a 83b 84a 84b	x	x
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	e books are in care of <b>Sally</b>		LON			•	202-	333	-43	<b>Z</b> 3
	cated at > Washington, D					+4▶ 200	10 /			
	ection 4947(a)(1) nonexempt charitable tri	rusts filing For	m 990 in lieu of F	· 4044 Ob l. b					,	
an	d enter the amount of tax-exempt interes				iere	▶ -92	. 1			

	A. Price Foun			193975		Page
	ne-Producing Activitie				540 540 544	
Note: Enter gross amounts unless othe	r		usiness income		/ sec 512, 513, or 514	(E) Related or
indicated		(A) Business code	(B) Amount	(C) Exclusion	(D) Amount	exempt function
93 Program service revenue -a Education Materi	al Donations			code		10,34
				<del>-   -   -</del>		30
******				<del></del>		
c				+ +		
				<u> </u>		
Medicare/Medicaid payments					-	-
• •	ent agencies					
<ul> <li>g Fees and contracts from governme</li> <li>Membership dues and assessment</li> </ul>	-					39,39
•						
<ul> <li>Interest on savings and temporary</li> <li>Dividends and interest from securit</li> </ul>	Г			+ +		
` '	ai estate	-				<del></del>
a debt-financed property	}			<del></del>	<del></del>	
b not debt-financed property				<del></del>		
8 Net rental income or (loss) from pe	rsonal property					·
9 Other investment income	-4646					
Gain or (loss) from sales of assets				+ +		
Net income or (loss) from special e	Г					
Gross profit or (loss) from sales of	-	<del></del>				
O3 Other revenue a		· · · · · · · · · · · · · · · · · · ·		+ +		
b				<del>-   -</del>		
c						
d		· · · · · · · · · · · · · · · · · · ·		+ +		
e(D) (D) and				0	0	50,04
Subtotal (add columns (B), (D), and	· · · ·			<u> </u>	<u> </u>	50,04
5 Total (add line 104, columns (B), (I		) Dort I				30,04
ote: Line 105 plus line 1d, Part I, should	ctivities to the Accom		f Evennt Du	150000 (S/	o page 34 of th	o instructions \
	for which income is reported mpt purposes (other than by i				lly to the accomplish	ment
• of the organization's exer		providing runds i	or such purpose	5)	· · · · · · · · · · · · · · · · · · ·	
See Statemen	<u> </u>					· · · · · · · · · · · · · · · · · · ·
				· · · ·		
Part IX Information Regard	ding Taxable Subsidia	rice and Die	renarded Er	tities (See	nage 34 of the	instructions \
(A)	(B)		(C)			(E)
Name, address, and EIN of corporation partnership, or disregarded entity	on, Percentage of ownership interest		ire of activities	T	(D) otal income	End-of-year assets
N/A	Ownership interest	%				833613
M/ A		%		<del></del>		<del>-</del>
		%		<del></del>		
		% %				
Part X Information Regard	ding Transfers Associ		reonal Rand	efit Contrac	ts (See page 34 of	the instructions \
						Yes X No
(a) Did the organization, during the	•	•			ai bellelli collillact/	
(b) Did the organization, during the	• • • • •	-	a personal bene	ant contract?		∐ Yes X No
Note: If "Yes" to (b), file Form 8870 a	ına rorm 4/∠U (see instructio	)IIS)				

(b) Did	the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit enganization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	fit contract? Yes X No
Note: If "	Yes" to (b), file Form 8870 and Form 4720 (see instructions)	
Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which pre  Signature of officer  Type or print name and title	
Paid Preparer's Use Only	signature	arer's SSN or PTIN (See Gen Instr W) 5-80-2777  EIN

**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

**Supplementary Information-(See separate instructions.)** 

OMB No 1545-0047

2003

Department of the Treasury Internal Revenue Service Name of the organization

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

	Meston A. Price Foundation			52-219397	
Part I	Compensation of the Five Highest Pa				stees
	(See page 1 of the instructions. List each	ch one. If there are nor	ne, 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 ben plans & deferred compensation	(e) Expense account and other allowances
NONE					
otal numbe	r of other employees paid over		•		
50,000	<b>&gt;</b>				
Part II	Compensation of the Five Highest Pai (See page 2 of the instructions. List each				enter "None.")
	(a) Name and address of each independent contractor pai	d more than \$ 50,000	(b) Type	of service	(c) Compensation
NONE					
					, , .
otal numbe	r of others receiving over \$50,000 for	·-		·	
rofessional					
or Paperwe	ork Reduction Act Notice, see the Instructions for F	orm 990 and Form 990-EZ.		Schedule A (Form 9	90 or 990-EZ) 200:

<u>sche</u>	<u>edule</u>	A (Form 990 or 990-EZ) 2003 The Weston A. Price Foundation 52-21939/3		P	age 2
P	art l	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	Du	ring the year, has the organization attempted to influence national, state, or local legislation, including any			
		empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid	1		
_		ncurred in connection with the lobbying activities > \$ (Must equal amounts on line 38,	1		
		rt VI-A, or line i of Part VI-B)	1		Х
		ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other			
	•	anizations that made an election under section so t(ii) by him given or so made complete an election of			
	-	lobbying activities	ľ		
•		ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
2					
		estantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or			
		any taxable organization with which any such person is affiliated as an officer, director, trustee, majority			
		ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the			
	trar	nsactions )			
а	Sal	e, exchange, or leasing of property?	2a		x
b		nding of money or other extension of credit?	2b		X
		rishing of goods, services, or facilities?	2c		X
G			2d		X
d	Pay	ment of compensation (or payment or reimbursement of expiration if more than \$1,000)?	20		32
	_		0-		v
е		nsfer of any part of its income or assets?	2e		X
3a		you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how	1 -		37
	•	determine that recipients qualify to receive payments)	3a		X
3b		you have a section 403(b) annuity plan for your employees?	3b		X
4	Did	you maintain any separate account for participating donors where donors have the right to provide advice	ŀ		
	on i	the use or distribution of funds?	4		X
Pá	art l'	V Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
he.	orgai	nization is not a private foundation because it is. (Please check only ONE applicable box.)			
5	ח	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)			
6	H	A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7	Н	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)			
8	Н	A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)			
9	Н	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, cit	h.		
9	Ш	A medical research organization operated in conjunction with a nospital Section 170(0)(1)(A)(iii) Enter the nospital s name, on	Ly,		
		and state ▶			
0		An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A	.)(IV)		
	ш	(Also complete the Support Schedule in Part IV-A )	,, ,		
1a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public			
		Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A)			
1b	$\Box$	A community trust. Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
2	Н	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
4	Ш	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 acquire	a		
_	$\Box$	by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)			
3	Ш	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations			
		described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See			
		section 509(a)(3) )		_	
		Provide the following information about the supported organizations (See page 5 of the instructions)			
		(a) Name(s) of supported organization(s)	) Line n		ſ
			from a	pove	_
	_				_
4	Ш	An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 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.

	. Tou may use the worksheet in the institu					
Cale	ndar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15	Gifts, grants, and contributions					
-	received (Do not include unusual					
	grants See line 28)	52,448	47,824	29,864	37,710	167,846
16	Membership fees received	119,618	88,776	61,400		269,794
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					0
18	Gross income from interest, dividends,					
	amounts received from payment 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					0
19	Net income from unrelated business					·
	activities not included in line 18				:	0
20	Tax revenues levied for the organization's		·			
	benefits and either paid to it or expended on					
	its behalf					0
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					0
22	Other income Attach a schedule Do not					
	include gain or (loss) from					0
	sale of capital assets  Total of lines 15 through 22	172,066	136,600	91,264	37,710	437,640
23		172,066	136,600	91,264	37,710	437,640
24	Line 23 minus line 17	1,721	1,366	913	37,710	457,040
25	Enter 1% of line 23	<del></del>			· · · · · · · · · · · · · · · · · · ·	8,753
26	Organizations described on lines 10 o				▶ 26a	0,133
D	Prepare a list for your records to show th					
	governmental unit or publicly supported of	-	-		- 201	
	amount shown in line 26a Do not file th	-		these excess amount		437,640
	Total support for section 509(a)(1) test E				▶ 26c	437,040
đ	Add Amounts from column (e) for lines	18			<b>.</b>	
		22	26b		▶ 26d	427 640
	Public support (line 26c minus line 26d to				26e	437,640
	Public support percentage (line 26e (r				▶ 26f	100.000%
27	Organizations described on line 12:					
	person," prepare a list for your records to	*		ed in each year from,	each "disqualified perso	
	Do not file this list with your return. E					N/A
	• • •	001)	(2000)		(1999)	
b	For any amount included in line 17 that w					
	show the name of, and amount received	=	_			
	(Include in the list organizations describe	_				
	the difference between the amount received	ved and the larger amo	ount described in (1) or	(2), enter the sum of t	these differences (the e	
	amounts) for each year.					N/A
	(2002) (2	001)	(2000)	1	(1999)	
C	Add Amounts from column (e) for lines	15				
	17	20	21		▶ 27c	····
d	Add Line 27a total	and line 27	'b total		▶ 27d	
е	Public support (line 27c total minus line 2				▶ 27e	
f	Total support for section 509(a)(2) test. E	Inter amount on line 23	3, column (e)	▶ 27f		
g	Public support percentage (line 27e (n	umerator) divided by	line 27f (denominato	or))	▶ 27g	%
<u>h</u>	Investment income percentage (line 1	8, column (e) (numera	ntor) divided by line 2	27f (denominator))	▶ 27h	%
28	Unusual Grants: For an organization de	scribed in line 10, 11, o	or 12 that received any	unusual grants during	1999 through 2002,	
	prepare a list for your records to show, for	or each year, the name	of the contributor, the	date and amount of th	e 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 page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

20	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	N/A	Yes	No
29		29	162	NO
20	other governing instrument, or in a resolution of its governing body?	29	+	$\vdash$
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,		1	ŀ
0.4	programs, and scholarships?	30	<del> </del> -	<del> </del>
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	ľ		
	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	+	$\vdash$
	If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement)	1		ļ
		•	]	
			1	ŀ
		1		
32	Does the organization maintain the following			
а	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	ľ		
	basis?	32b	<u> </u>	<u> </u>
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	İ		
	with student admissions, programs, and scholarships?	32c	ļ	<u> </u>
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		<u> </u>
	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			
		i		
а	Students' rights or privileges?	33a	<u> </u>	<u> </u>
b	Admissions policies?	33b		<u> </u>
С	Employment of faculty or administrative staff?	33c	ļ	<u> </u>
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e	<u></u>	
	·			1
f	Use of facilities?	33f	<u> </u>	<u> </u>
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		<u> </u>
			}	
	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		
		1		
b	Has the organization's right to such aid ever been revoked or suspended?	34b	<u> </u>	
	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	ĺ		
	of Rey, Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		ŀ

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))

**Lobbying Activity by Nonelecting Public Charities** Part VI-B

(For reporting only by organizations that did not complete Part VI-A) (	See pag	<u>le 12</u>	of the	<u>e instructions.</u>	)N/A
the year, did the organization attempt to influence national, state or local legislation, including any					

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

- Volunteers
- Paid staff or management (Include compensation in expenses reported on lines c through h.) h
- Media advertisements

50 Grassroots lobbying expenditures

- Mailings to members, legislators, or the public Ы
- Publications, or published or broadcast statements
- Grants to other organizations for lobbying purposes
- Direct contact with legislators, their staffs, government officials, or a legislative body
- Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- Total lobbying expenditures (Add lines c through h.)

	If "Yes" to any of the above	, also attach a statement	giving a detailed description o	f the lobbying activities.
--	------------------------------	---------------------------	---------------------------------	----------------------------

Ye	S	NO	Amount

Schedule A (Form 990 or 990-EZ) 2003

_	_		_	•	^	~	^	_	_	
ጉ	7	_	7		ч	٩.	ч	•	5	

Page 6

	art VII			ransfers To and Transaction	ons and Relationships With Noncharit	able		age c
_		<b>Exempt Organiz</b>	ations (S	ee page 12 of the instruction	ons.)			
51	=		·=		with any other organization described in section			
				3) organizations) or in section 527,			<u></u>	
-8			nization to a	noncharitable exempt organization	of	54-(1)	Yes	No X
	(i) Cash					51a(i)	-	X
	- · ·	r assets				a(ii)	<del>                                     </del>	
t			ts with a noi	ncharitable exempt organization		b(i)		x
	• •	-		le exempt organization		b(ii)		X
		al of facilities, equipme		· =		b(iii)		X
		bursement arrangeme				b(iv)		Х
		s or loan guarantees				b(v)		X
	(vi) Perfo	ormance of services or	membership	or fundraising solicitations		b(vi)		X
c	Sharing of	facilities, equipment, m	naılıng lists, d	other assets, or paid employees		C		X
C		=			mn (b) should always show the fair market value o	f the		
	-	_	-		zation received less than fair market value in any			
			nt, show in c T	olumn (d) the value of the goods, o			-	
	(a)	(b)	Nama	(C)	(d)  Description of transfers, transactions, and sharing	a arrange	monte	
	Line no	Amount involved	Name (	of noncharitable exempt organization	Description of transfers, transactions, and snam	y arranger	nens	
N	I/A							
			<del> </del>					
			<u> </u>	<del></del>				
	•	-						
 52a	Is the organ	L	I ectly affiliate	d with, or related to, one or more to	ex-exempt organizations			
	_	•	_	than section 501(c)(3)) or in section	n 527?	- 🗌 Ye	es X	No
b	If "Yes," co	mplete the following so	hedule.	I	<b>_</b>			
		(a)		(b)	(C)			
	N/A	Name of organization		Type of organization	Description of relationship			
							,	
							<u> </u>	
	<del></del>							—
	•							
_								
				<del>"-</del>				
		······································						—
				,	4			

04763 The Weston A. Price Foundation
Federal Statements

FYE: 12/31/2003

# Statement 1 - Form 990, Part I, Line 3 - Membership Dues and Assessments

	Amount		
\$_	39,392		
\$	39,392		
	\$		

04763 The Weston A. Price Foundation

52-2193975

# **Federal Statements**

FYE: 12/31/2003

# Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising	
	\$	\$	\$	\$	
Expenses					
Miscellaneous	75	5	75		
Bank Charges	364	1	364		
Director's Insurance	1,000	)	1,000		
Credit Card Expense	1,218	1,218			
Office Help	7,475	7,475			
Miscellaneous	1,782	2 1,782			
Educational Website	1,130	1,130			
Computer Consulting	137	7			
Campaign-Soy Alert	10,000	10,000			
Campaign-Growing Connections	1,114				
Total	\$ 24,295	22,856	\$ 1,439	\$0	

### Statement 3 - Form 990, Part III - Organization's Primary Exempt Purpose

The Corporation is organized and will be operated for charitable and educational purposes including to disseminate nutrition research and to promote education, research and activism in the field of nutrition and food production.

### Statement 4 - Form 990, Part III, Line e - Other Program Services

04763 The Weston A. Price Foundation 52-2193975 **Federal Statements** 

52-2193975

FYE: 12/31/2003

# Statement 5 - Form 990, Part VIII - Relationship of Activities

<u>Line No.</u>	Description
93a	Certain fees and reimbursements are received in relation to the educational conference to reduce the cost of the
93b	program to the organization. Certain reimbursements are received for educational information provided to other exempt organizations.



# The Weston A. Price Foundation



# Board

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Geoffrey Morell, ND, JP, Secretary
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Continuing Education: Carol Ecshe, RN