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Form 990

## **Return of Organization Exempt From Income Tax**

2008 No 1545-0047

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

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Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection For the 2008 calendar year, or tax year beginning October 1 2008, and ending September 30 , 20 09 Employer identification number Please C Name of organization SETI Institute B Check if applicable Doing Business As 2951356 Address change label or print or Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Name change type See 515 N. Whisman Rd. 650) 961-6633 Initial return Specific City or town, state or country, and ZIP + 4 ☐ Termination Instruc Mountain View, CA 94043 18,712,742 G Gross receipts \$ Amended return Name and address of principal officer Thomas Pierson, CEO H(a) Is this a group return for affiliates? Yes Vo Application pending Same as above H(b) Are all affiliates included? ☐Yes ☐No 4947(a)(1) or If "No," attach a list (see instructions) Website: ▶ www.seti.org H(c) Group exemption number ▶ Type of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation 1984 M State of legal domicile CA Part | Summary Briefly describe the organization's mission or most significant activities: We are a world renowned institution where scientists and educators come together in the quest to find life elsewhere. This includes the search for other Governance inhabited planets in our solar system and beyond, studies of the origins and early evolution of life, and understanding the potential of life to adapt to future challenges on Earth and in space. Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its assets. 16 Number of voting members of the governing body (Part VI, line 1a) . . . 4 14 Number of independent voting members of the governing body (Part VI, line 1b) 5 165 5 Total number of employees (Part V, line 2a) . . . . 6 98 Total number of volunteers (estimate if necessary 7a Total gross unrelated business revenue from Part VIII, line 2, Common Part VIIII, line 2, Common Part VIII, line 2, Com 7a 0 b Net unrelated business taxable income from Form 990-T, line-34 7h 0 **Current Year** MAY 1 8 2010 17,279,238 18,457,170 Contributions and grants (Part VIII, line 1h) 0 0 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3/4, and GDEN 92,348 28,516 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 0 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 17,371,586 18,485,686 0 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 0 Benefits paid to or for members (Part IX, column (A), line 4) 10,879,475 12,363,525 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) ▶ ..... 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 6,288,149 7,196,430 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 17,167,624 19,559,955 19 Revenue less expenses. Subtract line 18 from line 12 203,962 (1,074,269) Beginning of Year End of Year 13,478,572 14,205,984 20 Total assets (Part X, line 16) . 2,764,884 3,273,771 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 11,441,100 10,204,801 Part II Signature Block 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 Sian 5/14/2010 Signature of officer Here CFD Shannon Atkinson Type or print name and title Date Check if Preparer's identifying number Preparer's self-(see instructions) signature employed 🕨 🗌 Paid Preparer's Firm's name (or yours Use Only if self-employed), address, and ZIP + 4 Phone no ► ( May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)

Par	Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: The mission of the SETI Institute is to explore, understand and explain the origin, nature and prevalence of life in the universe.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.  Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$11,113,256 including grants of \$) (Revenue \$) The Carl Sagan Center for the Study of Life in the Universe (CSC) specializes in the broad interdiciplinary field of astrobiology, striving to understand all possible forms of life in the universe: past, present & future. We believe we are bringing together some of the best and brightest minds in science today to unlock the mysteries of the cosmos.  An example of some of the exciting work our scientists conducted in FY 09 are:  * Bioengineering designed to inform us about survial in space & how it could be developed to help fuel Earth with renewable energy sources.  * Investigating the extremes of physics to tell us the long-term prospects for life in the universe, including on Earth.  * A new understanding of geology at the atomic level is revealing clues about the origins of life & may also yield
	<ul> <li>answers to forecasting earthquakes.</li> <li>Revealing the strange phenomena that take place in ring systems around planets provides insight into how these worlds, and ours, were formed.</li> <li>CSC Research Scientists publish dozens of peer reviewed papers &amp; give presentations about their work to the public</li> </ul>
4b	(Code
	•••••
4c	(Code. ) (Expenses \$ 1,716,722 including grants of \$ ) (Revenue \$ ) The Center for Education and Public Outreach (EDU) at the SETI Institute develops curriculum and public programs that teach about the potential of life in the universe and other related sciences.  The SETI Institute EDU staff give numerous talks, participate in workshops and seminars and appear in many dozens of media interviews each year. Audiences range from students to professional educators to the general public. During FY 09 the SETI Institute's EDU programs reached thousands of people though both formal education channels and via involvement in trade shows & professional development workshops designed to teach
	educators about the science the Institute conducts and how to bring it to the classroom environment. 2009 was the fourth year of the SETI Institute's Astrobiology Research Experience for Undergraduates program. This program, which in sponsored by NSF and NASA, pairs students with scientists for summer research projects. Additionally, EDU staff lead the education and public outreach programs for NASA's Kepler and SOFIA missions.
4d	Other program services. (Describe in Schedule O ) (Expenses \$ 522,378 including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► \$ 16,577,083 (Must equal Part IX, Line 25, column (B))

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3_		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	<b>√</b>	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_6_		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	<b>✓</b>	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, IX, or X as applicable	11	✓	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>✓</b>
14a	Did the organization maintain an office, employees, or agents outside of the US?	14a		<b>-</b> ✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17 18		1
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
19 20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		1
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23	✓	L
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b–24d and complete Schedule K. If "No," go to question 25.	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .	24b		<b>-</b>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<b>✓</b>
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	✓	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L. Part III	27		<b>√</b>

D IV	Ole a statistical and	D	0-1-1	/
Part IV	Checklist of	Required	Schedules	(continuea)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	1	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	1	
	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		<b>√</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>✓</b>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<b>√</b>

Form **990** (2008)

Pa	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	}		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 165	2b	·	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	<u> </u>		
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	_		
•	Regarding Prohibited Tax Shelter Transaction?	5c		1
	Did the organization solicit any contributions that were not tax deductible?	6a		<b>-</b>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?.	6b	ļ	
7	Organizations that may receive deductible contributions under section 170(c).			ĺ
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		- ;-
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		<b>✓</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section	1		
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			1
9	organization, have excess business holdings at any time during the year?  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	8		
a	Did the organization make any taxable distributions under section 4966?	9a		<b>/</b>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<b>√</b>
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ŀ		i
11	Section 501(c)(12) organizations. Enter.			ı
а	Gross income from members or shareholders	l		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	İ		
122	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	- 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b	120		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O See instructions			
1a	Enter the number of voting members of the governing body <u>1a</u> <u>16</u>			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	_2_	<b>✓</b>	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		✓_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓_
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6		✓_
7a				
	of the governing body?	7a		✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	✓	
ь	Each committee with authority to act on behalf of the governing body?	8b	✓	
9a		9a		1
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	✓	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
<u> </u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		✓
sec	tion B. Policies	<del></del> 1		
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		<b>√</b>	No
12a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	Yes ✓	No
12a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b	<b>✓</b>	No
12a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c	<b>√</b>	No
12a b c	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13	<b>&gt; &gt; &gt; &gt;</b>	No
12a b c 13	Does the organization have a written conflict of interest policy? If "No," go to line 13  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?	12b 12c	<b>✓</b>	No
12a b c	Does the organization have a written conflict of interest policy? If "No," go to line 13  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by	12b 12c 13	<b>&gt; &gt; &gt; &gt;</b>	No
12a b c 13 14	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14	<b>&gt; &gt; &gt; &gt;</b>	No
12a b c 13 14 15	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14	<b>y y y y y</b>	No
12a b c 13 14 15	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14	<b>y y y y y</b>	No
12a b c 13 14 15	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14	<b>y y y y y</b>	No
12a b c 13 14 15	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b	<b>y y y y y</b>	No
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12b 12c 13 14	<b>y y y y y</b>	No
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12b 12c 13 14 15a 15b	<b>y y y y y</b>	No
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12b 12c 13 14 15a 15b	<b>y y y y y</b>	No
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13.  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	12b 12c 13 14 15a 15b	<b>y y y y y</b>	No No
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13.  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure	12b 12c 13 14 15a 15b	<b>y y y y y</b>	No
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13.  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed California	12c 13 14 15a 15b	\frac{1}{\sqrt{1}}	No
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13.  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed  California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)	12c 13 14 15a 15b	\frac{1}{\sqrt{1}}	No
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13.  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed California.  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(cavailable for public inspection Indicate how you make these available. Check all that apply.	12c 13 14 15a 15b	\frac{1}{\sqrt{1}}	No
12a b c 13 14 15 a b	Does the organization have a written conflict of interest policy? If "No," go to line 13.  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Does the organization have a written document retention and destruction policy?  Does the organization have a written document retention and destruction policy?  Does the organization have a written document retention and destruction policy?  Does the organization have a written document retention and destruction policy?  Does the organization in compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed ▶California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(cavallable for public inspection Indicate how you make these available. Check all that apply.	12b 12c 13 14 15a 15b 16a	√	No
12a b c 13 14 15 a b 16a b	Does the organization have a written conflict of interest policy? If "No," go to line 13.  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection Indicate how you make these available. Check all that apply.  □ Own website □ Another's website □ Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict or the process in schedule O whether (and if so, how), the organization makes its governing documents, conflict or the process in schedule O whether (and if so, how), the organization makes its governing documents, conflict or the p	12b 12c 13 14 15a 15b 16a	√	No
12a b c 13 14 15 a b 16a b	Does the organization have a written conflict of interest policy? If "No," go to line 13.  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Does the organization have a written document retention and destruction policy?  Does the organization have a written document retention and destruction policy?  Does the organization have a written document retention and destruction policy?  Does the organization have a written document retention and destruction policy?  Does the organization in compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed ▶California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(cavallable for public inspection Indicate how you make these available. Check all that apply.	12b 12c 13 14 15a 15b 16a 16b	✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓	No

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not co		any o	offic	er,	dıre	ctor,	trus	stee, or key em	ployee.	
(A)	(B)				C)	· · · · ·		(D)	(E)	(F)
Name and Title	Average	Posit	on (d	checi	k all	that ap	oply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
John Gertz Chairman	15+	1						0	0	0
Joel Birnbaum Vice-Chairman	1+	<b>√</b>						0	0	0
Thomas Pierson Secretary & CEO	50+	1		1	✓			159,792	0	37,094
Alan Bagley Trustee	1+	1						0	0	0
Linda Bernardi Trustee	2+	✓						0	0	0
John Billingham Trustee	1+	✓						0	0	0
Baruch Blumberg Trustee	1+	<b>√</b>						0	0	0
Gregory Coy Trustee	1+	<b>*</b>						0	0	0
Paul Elliot Trustee	1+	<b>✓</b>						0	0	0
Andrew Fraknoi Trustee	1+	<b>✓</b>						0	0	0
Dane Glasgow Trustee	1+	<b>✓</b>						0	0	0
David Liddle Trustee	1+	<						0	0	0
Greg Papadopoulos Trustee	1+	1						0	0	0
David Pratt Trustee	1+	<b>√</b>						0	0	0
Pierre Schwob Trustee	1+	,						0	0	0
William Welch Trustee	10+	<i>,</i>						0	0	0
Shannon Atkinson Chief Financial Officer	40+			1				122,253	0	23,496

Part VII Section A. Officers, Directors,	rustees, Ke	y Emp	oloy	ees,	an	d Hig	hes	t Compensate	d Employees (c	ontinue	d)
(A)	(A) (B) (C)		(D)	(E)	(F)						
Name and title	Average hours per week	Individual trustee	Institutional trustee	Officer	Rey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fr org	stimated nount of other pensation om the janization
	:	ıstee	trustee		ee	pensated					d related anizations
Rocco Mancinelli Research Scientist, Pl	40+					/		160,989	(		39,541
Kenneth Souza Research Scientist	40+					1		154,200	(		17,116
Jill Tarter Director, Center for SETI Research	50+					/		143,783	(		21,569
Jon Jenkins Research Scientist, PI	40+					1		142,014	(	)	34,156
Karen Randall Director of Special Projects	50+	_						128,858	(	)	18,654
						1					
						<u> </u>					741.
							-				
	-		_								
										ļ	
											· · · · ·
1b Total		·					<b>&gt;</b>	1,011,889	C		191,626
2 Total number of individuals (including the organization ► 24	ose in 1a) wh	no rec	eive	ed n	nore	e thar	า \$1	00,000 in repo	rtable compen	sation f	rom the
									··		Yes No
3 Did the organization list any former offi employee on line 1a? If "Yes," complete	cer, director Schedule J	or tru for su	uste ich i	e, k <i>ındı</i>	ey vidu	emplo <i>ial</i> .	oyee	e, or highest c	ompensated 	3	· · · · · · · · · · · · · · · · · · ·
For any individual listed on line 1a, is the the organization and related organization											
<ul><li>individual.</li><li>Did any person listed on line 1a receiv</li></ul>	e or accrue	 çom;	pens	satio	on f	rom :	any	unrelated org	 anization for	4	
services rendered to the organization? If Section B. Independent Contractors	"Yes," com	olete :	Sch	edu.	ie J	for s	uch	person	<u> </u>	5	
Complete this table for your five highest compensation from the organization	compensate	d ind	epe	nde	nt c	contra	cto	rs that received	d more than \$1	00,000	of
(A) Name and business a	ddress							(B) Description of se	ervices	(C)	
Minex Engineering, 1000 Apollo St. Antioch							АТ	A design & m	aint.		212,637
Mars Institute, PO box 6, NASA Research P			, CA	94	035	5	-	ogram logistic			301,400
Inxitu, 2551 Casey Ave, Suite A, Mountain \	iew, CA 940	743					ins	stmnt tests & c	uata dhal.		235,064
Total number of independent contractor	s (includina i	those	in 1	1) w	ho	recen	/ed	more than \$10	00.000 in		
compensation from the organization >				,					,		:

Part	l VII	Statement of Re	venue					
			W W W W W W W W		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues . Fundraising events Related organizations Government grants (contr All other contributions, gifts, g and similar amounts not include Noncash contributions include Total. Add lines 1a–1f	grants, ded above 1f	45,201 15,045,611 3,366,358 (141,099)	18,457,170			
				Business Code				
Program Service Revenue	2a b c d e f	All other program servi		. •	0			
	3	Investment income (inc	luding dividends	, interest, and	44 427			44.407
	4 5	other similar amounts) Income from investment of Royalties	of tax-exempt bond	d proceeds	41,137			41,137
	b c	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (lo	oss) .	. •		ange and the second and and and and and and and and and a		
	7a	Gross amount from sales of assets other than inventory	(i) Securities 216,324	(ii) Other				
	С	Less cost or other basis and sales expenses . Gain or (loss) Net gain or (loss)	228,945 (12,621)	<b>&gt;</b>	(12,621)			(12,621)
Revenue		Gross income from events (not including \$ of contributions reported See Part IV, line 18.			(12,021)			(12,021)
Other	b	Less. direct expenses Net income or (loss) fro	a b . b . om fundraising e	vents <b>&gt;</b>				
		Gross income from gam	ing activities.					
	b	See Part IV, line 19 Less. direct expenses. Net income or (loss) fro	. a	ties ▶				1
	b	Gross sales of inverteurns and allowances Less: cost of goods so Net income or (loss) from	a ld , b	ory . ►				
		Miscellaneous Revi		Business Code				
	11a b c							
		All other revenue .  Total. Add lines 11a-1	1d		0			
		Total Revenue. Add III 9c, 10c, and 11e			18,485,686			28,516

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3) and 501 All other organizations must complete colu				C), and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	309,465	0	291,213	18,252
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	9,411,826	8,096,992	1,019,017	295,817
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	563,092	472,174	69,023	21,895
9	Other employee benefits	1,376,445	1,156,233	191,301	28,911
10	Payroll taxes	702,697	589,927	90,865	21,905
11	Fees for services (non-employees)				
	Management				
þ	Legal	38,483	19,563	18,920	0
	Accounting	46,208	0	46,208	0
	Lobbying	30,000	30,000		0
	Professional fundraising services. See Part IV, line 17		*	*	
	Investment management fees .				<del></del>
_	Other				
12	Advertising and promotion	521,736	347,291	158,400	16,045
13 14	Office expenses Lifering Information technology	349,084	208,062	136,081	4,941
15	Royalties	3.0,00	200,002	100,001	4,341
16	Ossupensu	682,555	3,890	678,665	0
17	Travel	836,204	822,751	6,673	6,780
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	86,251	67,086	18,875	290
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	475,496	294,090	181,406	0
23	Insurance	33,328	3,294	30,034	0
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)	-	,		
а	Subcontracts	2,670,060	2,670,060	0	
b	Temporary help & consultants	702,658	607,012	79,018	16,628
С	Equipment	378,719	378,487	0	232
d	Lab & chemical supplies	132,065	128,756	3,309	0
е	Allocation of facilities cost cntr-rpt'd in C	0	585,468	(660,698)	75,230
_ f	All other expenses	213,583	95,947	82,067	35,569
25 26	Total functional expenses. Add lines 1 through 24f	19,559,955	16,577,083	2,440,377	542,495
	Joint Costs. Check here ► ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,447,013	1	406,331
	2	Savings and temporary cash investments	363,093	2	248,842
	3	Pledges and grants receivable, net	2,077,729	3	3,142,249
ts	4	Accounts receivable, net	168,000	4	368,000
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.	207,525	5	186,971
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ä	9	Prepaid expenses and deferred charges	262,205	9	303,734
	10a	Land, buildings, and equipment cost basis 10a 10,071,081			
	b	Less accumulated depreciation Complete Part VI of Schedule D 4,178,148	6,213,115	10c	5,892,933
	11	Investments—publicly traded securities , .	3,467,304	11	2,929,512
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11 .		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	14,205,984	16	13,478,572
	17	Accounts payable and accrued expenses	1,592,397	17	1,934,989
	18	Grants payable		18	
İ	19	Deferred revenue	667,053		870,331
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	<del>,</del>
	24	Unsecured notes and loans payable		24	
	25	Other liabilities. Complete Part X of Schedule D	505,434	25	468,451
	26	Total liabilities. Add lines 17 through 25	2,764,884	26	3,273,771
Balances		Organizations that follow SFAS 117, check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			,
anı	27	Unrestricted net assets	10,462,780	27	9,382,389
Bal	28	Temporarily restricted net assets	973,060		817,152
	29	Permanently restricted net assets	5,260	29	5,260
or Fund		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Vet	33	Total net assets or fund balances	11,441,100	33	10,204,801
_	34	Total liabilities and net assets/fund balances	14,205,984	34	13,478,572
Pa	rt XI	Financial Statements and Reporting			
					Yes No
1	Acc	ounting method used to prepare the Form 990 🔲 Cash 🛛 Accrua	al 🗌 Other		
2a		e the organization's financial statements compiled or reviewed by an inc	dependent accountant	?	2a ✓
b	Wer	e the organization's financial statements audited by an independent acc	countant? .		2b √
С	If "Y	es" to lines 2a or 2b, does the organization have a committee that assumes	responsibility for overs	sight of	/
_		audit, review, or compilation of its financial statements and selection of an ir			2c √
3а		result of a federal award, was the organization required to undergo an		forth I	1 1 / 1
L		Single Audit Act and OMB Circular A-133?			3a ✓
ຼບ	- 11 Y	es," did the organization undergo the required audit or audits?			3b   √

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047
2008
Open to Public

Inspection

Name of the organization

SETI Institute

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is (Please check only one organization)

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii).

A school described in section 170(b)(1)(A)(iii). (Attach Schedule E.)

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the popular is name, with and state)

2		school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
3		hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)
4		medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the ospital's name, city, and state:
5		n organization operated for the benefit of a college or university owned or operated by a governmental unit described in ection 170(b)(1)(A)(iv). (Complete Part II.)
6		federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	<b>I</b>	n organization that normally receives a substantial part of its support from a governmental unit or from the general publicescribed in section 170(b)(1)(A)(vi). (Complete Part II )
8		community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9		n organization that normally receives (1) more than 33%% of its support from contributions, membership fees, and gross eceipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33%% of its apport from gross investment income and unrelated business taxable income (less section 511 tax) from businesse cquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
10		n organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)
11		n organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out th urposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See <b>section</b> <b>09(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h.
е		Type I b Type II c Type III—Functionally integrated d Type III—Other y checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified ersons other than foundation managers and other than one or more publicly supported organizations described in section 09(a)(1) or section 509(a)(2)
f		the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting rganization, check this box
g		ince August 17, 2006, has the organization accepted any gift or contribution from any of the ollowing persons?
		A person who directly or indirectly controls, either alone or together with persons described in (ii)  Yes No and (iii) below, the governing body of the supported organization?
		i) A family member of a person described in (i) above?
		ii) A 35% controlled entity of a person described in (i) or (ii) above?
h		rovide the following information about the organizations the organization supports
(i)		f supported (ii) EIN (iii) Type of organization (described on lines 1–9 above or IRC section (described on lines 1–9 above or IRC section (iv) Is the organization in col (iv) Is the organization in col (iv) of your (iv) organized in the (viii) Amount of the organization in col (iv) of your (iv) organized in the

(i) Name of supported organization	(II) EIN	(iii) Type of organization (iv) is the organization (described on lines 1-9 above or IRC section (see instructions)) governing document		sted in your	the organization in		organizat	s the ion in col zed in the S?	(vii) Amount of support	
			Yes	No	Yes	No	Yes	No		
									-	
Total	÷									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (a) 2004 Calendar year (or fiscal year beginning in) > (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 13,722,958 13,226,061 15,217,181 17,279,238 18,457,170 77,902,608 include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 13,722,958 13,226,061 15,217,181 17,279,238 18,457,170 77,902,608 Total. Add lines 1-3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount 1,595,803 shown on line 11, column (f) Public support. Subtract line 5 from line 4. 76,306,805 Section B. Total Support (a) 2004 (b) 2005 Calendar year (or fiscal year beginning in) (c) 2006 (d) 2007 (e) 2008 (f) Total 13,722,958 13,226,061 15,217,181 17,279,238 18,457,170 77,902,608 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 2,573,561 1,460,404 176,101 92,348 28,516 4,330,930 sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . 82,233,538 Total support. Add lines 7 through 10 . 11 0 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here П Section C. Computation of Public Support Percentage 92 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 % 70 15 % Public support percentage from 2007 Schedule A, Part IV-A, line 26f 16a 331/3 % support test - 2008. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 331/3 % support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . . . . . b 10%-facts-and-circumstances test-2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. F 1

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you checke	ed the box o	n line 9 of Pa	art I.)			
	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 6	The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support					·	<del></del>
Ca	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						<u> </u>
14	First five years. If the Form 990 is for to organization, check this box and stop	here		nd, third, fourth	n, or fifth tax y	/ear as a secti	on 501(c)(3) . ► □
Sec	tion C. Computation of Public Sup		<del></del>			<del>,,</del>	
15 16	Public support percentage for 2008 (lin Public support percentage from 2007 S	e 8, column (f Schedule A, Pa	) divided by linart IV-A, line 2	ne 13, column ( 7g .	(f)) .	15	<u>%</u> %
Sec	tion D. Computation of Investmer						
17	Investment income percentage for 2008	3 (line 10c, co	lumn (f) divided	d by line 13, co	olumn (f)) .	17	%
18	Investment income percentage from 20	07 Schedule	A, Part IV-A, lır	ne 27h	•	18	<u>%</u>
19a b	33% % support tests – 2008. If the organ 17 is not more than 33% %, check this be 33% % support tests – 2007. If the organ	ox and <b>stop h</b> e ization did not	e <mark>re.</mark> The organi check a box or	zation qualifies i line 14 or line	as a publicly 19a, and line 1	supported org 6 is more than	anızatıon ► 🗆 33½%, and
20	line 18 is not more than 33½%, check this						
20	Private foundation. If the organization	aia not check	a box on line 1	14, 19a, or 19b	, check this b	ox and see ins	structions 🕨 🔲

chedule A (F	orm 990 or 990-EZ) 2008 Pa	ige 4
Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 1 Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)	0;
N/A		
717		
		•
•••••		
		•
		•

### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

OMB No 1545-0047

Department of the Treasury

For Organizations Exempt From Income Tax Under section 501(c) and section 527

- ▶ To be completed by organizations described below.

Interna	al Revenue Service	Attach to Form 99	0 or Form 990-EZ.		Inspection
If the	e organization answered "Ye Section 501(c)(3) organizations	s," to Form 990, Part IV, line 3, or Fo Complete Parts I-A and B Do not co	orm 990-EZ, Part V omplete Part I-C	I, line 46 (Political Camp	paign Activities), then
•	Section 501(c) (other than sect	tion 501(c)(3)) organizations Complete	Parts I-A and C bel	ow Do not complete Par	rt I-B
•	Section 527 organizations: Co	mplete Part I-A only			
•	Section 501(c)(3) organizations	s," to Form 990, Part IV, line 4, or Fo that have filed Form 5768 (election un	nder section 501(h))	Complete Part II-A Do r	not complete Part II-B
		that have NOT filed Form 5768 (electio		(h)) Complete Part II-B [	o not complete Part II-A
	e organization answered "Ye Section 501(c)(4), (5), or (6) org	s," to Form 990, Part IV, line 5 (Proxy	y rax), then		
	me of organization	anizations Complete Part III	<del></del>	Employ	yer identification number
	Tl Institute			94	2951356
_	rt I-A To be complet	ed by all organizations exemptions for Schedule C for details.			
1	Provide a description of the	he organization's direct and indirec	et political campa	on activities in Part IV	
2	Political expenditures .	-		\$_	30,000
3	Volunteer hours				0
Pa		ed by all organizations exemitions for Schedule C for details		n 501(c)(3).	
1	Enter the amount of any e	excise tax incurred by the organiza	tion under section	1 4955	0
2	<del></del>	excise tax incurred by organization		section 4955 . > \$	0
3		d a section 4955 tax, did it file For	m 4720 for this y	ear?	🗌 Yes 🔲 No
4a	Was a correction made?				· · 🗌 Yes 🔲 No
	If "Yes," describe in Part			- 504(-)	
Pa		ed by all organizations exemitions for Schedule C for details		n 501(c), except se	etion 501(c)(3).
1	Enter the amount directly activities	expended by the filing organization.	on for section 52	7 exempt function \$	
2	Enter the amount of the fill 527 exempt function active	ling organization's funds contribute	ed to other organi	zations for section	
3	Total of direct and indirect on Form 1120-POL, line 1	t exempt function expenditures. Ac	dd lines 1 and 2 a	and enter here and	
4	,	file Form 1120-POL for this year?			. Yes No
5		s and employer identification number		n 527 political organiza	tions to which payments
		ount paid and indicate if the amour			
		promptly and directly delivered to a stee (PAC). If additional space is need			eparate segregated fund
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
		<del></del>			<del></del>

Р	ao	e	2

Pa		nizations exempt under section 501(c)(3)		768					
	(election under section 50	01(h)). See the instructions for Schedule C for	or details.						
Α	Check ► ☐ if the filing organization belongs to an affiliated group.								
В	Check ► ☐ if the filing organization	checked box A and "limited control" provisi	ons apply.						
	Limits on Lob	(a) Filing	(b) Affiliated						
	(The term "expenditures" m	eans amounts paid or incurred.)	organization's totals	group totals					
18	Total lobbying expenditures to influence	e public opinion (grass roots lobbying) .							
t	Total lobbying expenditures to influence	e a legislative body (direct lobbying) .	30,000						
(	: Total lobbying expenditures (add lines		30,000						
c			19,529,955						
6	Total exempt purpose expenditures (ac	ld lines 1c and 1d)	19,559,955						
f	Lobbying nontaxable amount. Enter the	e amount from the following table in both							
	columns.	, and the second	1,000,000						
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:							
	Not over \$500,000	20% of the amount on line 1e							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000							
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000							
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000							
	Over \$17,000,000	\$1,000,000							
ç	Grassroots nontaxable amount (enter 2	5% of line 1f)	250,000						
ŀ	Subtract line 1g from line 1a Enter -0-	If line g is more than line a	0						
i	Subtract line 1f from line 1c Enter -0-	If line f is more than line c	0						
j		either line 1h or line 1i, did the organization file Fo	orm 4720 reporting						
	section 4911 tax for this year?			Yes ✓ No					

# 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 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) Total					
2a Lobbying non-taxable amount	943,350	993,292	1,000,000	1,000,000	3,936,642					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					5,904,963					
c Total lobbying expenditures	78,469	62,686	38,085	30,000	209,240					
d Grassroots non-taxable amount	235,838	248,328	250,000	250,000	984,166					
e Grassroots ceiling amount (150% of line 2d, column (e))					1,476,249					
f Grassroots lobbying expenditures	0	0	0	0	0					

Pa	To be completed by organizations exempt under section 501(c)(3) that have 5768 (election under section 501(h)). See the instructions for Schedule C for complete the complete of the complete					
	<u> </u>	(a	<u>)</u>		(b)	
		Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, 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 1c through 1i)?					
С	Media advertisements?					_
d e f						
g h	Direct contact with legislators, their staffs, government officials, or a legislative body?					
i	Other activities? If "Yes," describe in Part IV  Total lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				w n remm me	
С	If "Yes," enter the amount of any tax incurred under section 4912					
	To be completed by all organizations exempt under section 501(c)(4), section 501(c)(6). See the instructions for Schedule C for details.	on :	501(	c)(5), c	or	-
1 2 3	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No
Pa	To be completed by all organizations exempt under section 501(c)(4), section section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" of question 3 is answered "Yes." See Schedule C instructions for details.					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of	**************************************			
	Current year	}	2a 2b			
b		ŀ	2b			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	•	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
5	and political expenditure next year?	.	<u>4</u> 5		_	
	rt IV Supplemental Information	•			-	
	applete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line, complete this part for any additional information				B, lini	e 1ı
			• • • • •			

Schedule C (For	orm 990 or 990-EZ) 2008	Page 4
Part IV	Supplemental Information (continued)	
N/A		
		•••••
		•••••
		***************************************
		•••••
•••••		
••••••		
•	······	•••••
	······································	
		•••••
	······································	

### SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

	or the organization		Employer identification number
SE	I Institute		94 2951356
Pa	Organizations Maintaining Do the organization answered "Yes	onor Advised Funds or Others" to Form 990, Part IV, line 6	Similar Funds or Accounts. Complete if
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and funds are the organization's property, sub		
6	Did the organization inform all grantees, of used only for charitable purposes and not impermissible private benefit?		lonor advisor or other
Pa			red "Yes" to Form 990, Part IV, line 7.
1		g , recreation or pleasure)	hat apply). Preservation of an historically important land area Preservation of certified historic structure ution in the form of a conservation easement
	on the last day of the tax year.		Held at the End of the Year
а	Total number of conservation easements.		2a
b	Total acreage restricted by conservation e	easements	2b
С	Number of conservation easements on a		
d	Number of conservation easements include		2d
3	Number of conservation easements modified the taxable year ▶	fied, transferred, released, exting	uished, or terminated by the organization during
4	Number of states where property subject	to conservation easement is local	ıted ▶
5	Does the organization have a written police enforcement of the conservation easement	by regarding the periodic monitor	ing, inspection, violations, and
6			easements during the year
7	Amount of expenses incurred in monitorin	ng, inspecting, and enforcing ease	ements during the year ► \$
8	Does each conservation easement reported 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	ed on line 2(d) above satisfy the r	equirements of section Yes No
9	In Part XIV, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conservations.	the text of the footnote to the or	in its revenue and expense statement, and ganization's financial statements that describes
Pai	Organizations Maintaining Coll Complete if the organization ansi		sures, or Other Similar Assets. IV, line 8.
1a		sets held for public exhibition, edu-	ts revenue statement and balance sheet works of cation, or research in furtherance of public service, describes these items
b	historical treasures, or other similar assets provide the following amounts relating to	s held for public exhibition, educa these items:	evenue statement and balance sheet works of art, ation, or research in furtherance of public service,
	(i) Revenues included in Form 990, Part \		▶ \$
	(II) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works following amounts required to be reported	s of art, historical treasures, or od under SFAS 116 relating to the	ther similar assets for financial gain, provide the se items
а	Revenues included in Form 990, Part VIII,	line 1 .	<b>▶</b> \$
b	Assets included in Form 990, Part X		. \$

Page	2

Par	rt III Organizations Mair	ntaining (	Collections	of Art, H	istorica	l Treasure	s, or (	Other Similar	Asset	s (conti	nued)
3	Using the organization's acceutems (check all that apply):	ssion and	other record	s, check	any of the	he following	that a	re a signıfıcan	t use o	f its col	ilection
а	Public exhibition			d		oan or exch					
b	Scholarly research			е		Other					
С	Preservation for future ge	enerations									
4	Provide a description of the or Part XIV.	rganızatıor	n's collections	s and exp	olain hov	v they furthe	er the c	organization's	exempt	purpos	ie in
5	During the year, did the organiz assets to be sold to raise funds	ation solici rather thai	t or receive do	onations o	of art, his	torical treasi e organizatio	ures, or on's col	other similar lection?	. [	] Yes [	☐ No
Par	Trust, Escrow and Part IV, line 9, or rep						on ans	swered "Yes"	to Forr	n 990,	
	Is the organization an agent, to included on Form 990, Part X	?			·			r other assets	not _	] Yes [	□ No
b	If "Yes," explain the arrangem	ent in Part	XIV and cor	nplete the	e follow	ng table.	Γ				
							-		Amour	it	
	Beginning balance .						10	;			
	Additions during the year						, <u>1c</u>	ı			
е	Distributions during the year						1€	<u> </u>			
f	Ending balance						, <u>1f</u>				
2a b	Did the organization include a If "Yes," explain the arrangem	n amount ent in Par	on Form 990 t XIV	), Part X,	line 21?	•	•		. ∟	Yes	∐ No
Par	rt V Endowment Funds			zation ai	nswered	d "Yes" to	Form	990, Part IV,	line 10	).	
		(a)	Current year	(b) Pro	or year	(c) Two year	s back	(d) Three years b	ack (e)	Four year	rs back
1a	Beginning of year balance.		5260								
b	Contributions										!
c	Investment earnings or losses										-
d											
е	Other expenditures for faciliand programs	I .					-				
	Administrative expenses										
g	End of year balance	· • [	5260								
2	Provide the estimated percent	age of the	year end ba	lance hel	d as:						
а	Board designated or quasi-en	dowment	▶	%							
b	Permanent endowment ▶	100 9	6								
С	Term endowment ▶	%									
3a	Are there endowment funds no	t in the po	ssession of th	ne organiz	ation tha	at are held a	nd adn	ninistered for th	he		
	organization by	•		-						Yes	s No
	(i) unrelated organizations								. 3	a(ı)	<b>√</b>
	(ii) related organizations .								. 3	a(II)	<b>√</b>
b	If "Yes" to 3a(II), are the relate	d organiza	itions listed a	as require	d on Sc	hedule R?	•		. Li	3b	
4	Describe in Part XIV the intend										
Par	rt VI Investments – Lan	d, Buildir	gs, and Eq	uipmen	t. See F	<u>orm 990, F</u>	art X,	line 10.			
	Description of investment		(a) Cost or ot (investm			st or other s (other)	(c)	Depreciation	(d)	Book val	ue
1a	Land										
	Buildings										
	Leasehold improvements				48	4,354		357,485		126,869	
	Equipment				9,58	36,727		,820,663	5	,766,06	4
e	Other .										
Tota	al. Add lines 1a-1e (Column (d) sh	ould equal	Form 990, Pa	rt X, colur	nn (B), Iır	ne 10(c))		<b>&gt;</b>		5,89	2,933

Part VII Investments—Other Securities	s. See Form 990, Part X.	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	
Closely-held equity interests			
Other			
			·
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Relate	d. See Form 990, Part X	line 13.	<del></del>
(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year m	
-			
			*
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets. See Form 990, Pa	· · · · · · · · · · · · · · · · · · ·		T
. P. Villager Annual Addition and	(a) Description		(b) Book value
			-
1			
Total. (Column (b) should equal Form 990, Part X, co.	( (D) h== 45 )		
Part X Other Liabilities. See Form 990,			L
(a) Description of liability	(b) Amount		
Federal income taxes			
Unitrust Payable	377,37		
Deferred Lease Incentive	91,07	9	
		_	
		<del>-</del>	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25 ) ▶	468,45	1	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Dago	Δ

_			<u></u>
Pa	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1_	18,485,686
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,559,955
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	(1,074,269)
4	Net unrealized gains (losses) on investments	4	(162,030)
5	Donated services and use of facilities	5_	
6	Investment expenses	6	ļ
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4–8	9_	(162,030)
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	(1,236,299)
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	18,323,656
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments 2a (162,030	4	
b	Donated services and use of facilities	-	
С.	Recoveries of prior year grants . 2c	-	
d	Other (Beschibe in Fart Arty)	٠,	(462,020)
е	Add lines 2a through 2d	26	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
3	Subtract line 2e from line 1	3	18,485,686
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	-	
b	Other (Describe in Part XIV)		-
_	Add lines 4a and 4b	40	<del></del>
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)  **EXIII** Reconciliation of Expenses per Audited Financial Statements With Expenses.	5	10,100,000
1	Total expenses and losses per audited financial statements	1	19,559,955
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	$\dashv$	
þ	Prior year adjustments	$\dashv$	
C	Losses reported on Form 990, Part IX, line 25	$\dashv$	
d	Other (Describe in Part XIV)	-	
e	Add lines 2a through 2d	26	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		_
с 5	Add lines <b>4a</b> and <b>4b</b>	5	
	t XIV Supplemental Information	5	19,559,955
The the per	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ai 2b; Part V, line 4, Part X, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.  SETI Institute intends to establish a permanent endowment to ensure that future generation excitement of our mission and help to answer the questions about life in the universe. The commandation are present the first future endowment.	s car curre	n continue to foster ent balance of our set aside for our

Scheaule D (For	m 990) 2008	Page 5
Part XIV	Supplemental Information (continued)	······································
N/A		
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#### SCHEDULE J (Form 990)

Department of the Treasury

in Part III

Internal Revenue Service

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

20**08** 

Open to Public Inspection

Name of the organization Employer identification number **SETI Institute** 94 : 2951356 **Questions Regarding Compensation** Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or 1b provision of all of the expenses described above? If "No," complete Part III to explain . . . 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a a Receive a severance payment or change of control payment? 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of 5a a The organization?. . 5b **b** Any related organization? If "Yes" to line 5a or 5b, describe in Part III 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of 6a a The organization?.... 6b **b** Any related organization? If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe

Page 2

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed Schedule J (Form 990) 2008

Part II Officers,

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		At he completed (a)	7 147 C 147 C 147 C 147 C 147 C 147 C					
(A) Name		(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	7			compensation				
Thomas Pierson	€ 3	159,792			13,303	23,791	196,886	134,550
					7.00	0.1	000	10000
Rocco Mancinelli	E E	606,001			13,383	901,02	056,002	136,07
Kenneth Souza	ε	154,200			13,114	4,002	171,316	132,775
	<u>(ii)</u>							
Jon Jenkins	ε	142,014		1	12,123	22,033	176,170	119,625
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### SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-FZ, Part V, line 38a or 40b.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service "Yes" on Form 990, Part IV, Inne 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.							Open To Public Inspection						
Name of the organization SETI Institute	1	Employer 94					er identification number 2951356						
Part I Excess I	Benefit Transactions (	section	501(c)(	(3) and sect	ion 501(	c)(4) organ	izations o	only)	m 990	-F7 F	Part V	line 4	Πh
				103 01110111	1 000, 1 41	(14, 1110 20	u 01 200,	0. 1 0			urt v,	т	rected?
1 (a) Name	e of disqualified person				(b) [	Description of	transaction	l				Yes	No
				ļ								-	ļ
		<u> </u>									<u>-</u>		
2 Enter the amoun	nt of tax imposed on the	ne orga	nization	managers	or disqu	alified ners	sons duri	na the	- Vear			<u> </u>	<u> </u>
under section 4		_				•			, you	► \$ ► \$			
	o and/or From Interes												
	mpleted by organizations t			Yes" on Form	990, Par	t IV, line 26	, or Form	990-E	Z, Parl	t V, lin	ie 38a	l.	
(a) Name of interest	ed person and purpose		to or from	n (c) Orig principal a		(d) Balan	ce due	(e) In	default?	by bo	proved pard or nittee?		/ritten ment?
		То	From	j				Yes	No	Yes	No	Yes	No
Thomas Pierson, Ho	ome mortgage		✓	;	343,713		186,971		<b>✓</b>	✓		✓	
			-									-	
											_		
Total		<u> </u>	ł		▶ \$		186,971				L		<u> </u>
Part III Grants of	or Assistance Benefitt				<del></del>	990 Part I							
	nterested person			nship between interested person and the organization (c) Amount of grant or type			e of assistance						
						<u></u>							
	s Transactions Involvi empleted by organization				n Form	990, Part I	V, line 28	3a, 28	b, or	28c			
(a) Name of intere		(b) R	elationshi	p between on and the	(c) An	nount of saction	1	(d) Description of transaction			on	(e) Sharing of organization's revenues?	
		<u> </u>										Yes	No
William Welch		Truste				165 353	Consult		on-go	ing g	rant	ļ	1
Jill Tarter		vvite c	f Trust	ee	<del> </del>	165,352	Employ	ee	<del></del>			<del> </del> -	<b>✓</b>
		<del> </del>										<del>  -</del>	$\vdash$

### **SCHEDULE O** (Form 990)

## Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

**SETI Institute** 

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Inspection Employer identification number

2951356

94

ichedule O (Form 990) 2008	Page 2
lame of the organization	Employer identification number
SETI Institute	94 2951356
FORM 990, Part VI Governance, Management & Disclosure, Section B, line 19, Distribution	of Financial Statements and
Governing Documents.	•••••
The SETI Institute distributes its financial information to the public via Dun and Bradstree	t and other outside websites,
such as Guidestar. We also make our form 990 and financial statements available upon re	equest. Governing documents
nay also be made available upon request.	
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