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Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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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

Open to Public Inspection

	For th	e 2009 calen	dar year,	or tax year beginning	,	2009, and endin	g			,
		applicable		С				D Employe	er Identi	fication Number
		dress change	Please use IRS label	BENEFICENT TECHNO	LOGY INC. (BE	ENETECH)		77-0)555	413
	∺	-	or print or type.	480 CALIFORNIA AV		,		E Telephor		
	\vdash	me change	See	PALO ALTO, CA 943				1650	1) 6	44-3400
	Init	ial return	specific Instruc-	'				(030	,, 0	44-3400
	Ter	mination	tions.							
	Am	ended return						G Gross re	_	
	App	olication pending	F Name a	and address of principal officer $$	AMES R FRUCHT	ERMAN		a group return		liates? Yes X No
			SAME A	AS C ABOVE				affiliates incli attach a list		tructions) Yes No
$\overline{\Gamma}$	Tax-	exempt statu	ıs X 501	(c) (3) ◄ (insert no) 4947(a)(1)	or 527	11 110,	attach a list	(300 1113	u delloris)
J				TECH.ORG		<u> </u>	H(c) Group	exemption nu	mber 🏲	•
K		of organization	X Corpora		Other ►	L Year of Format				egal domicile CA
	rt I 🗈									
۳				ganization's mission or mos	t significant activities	BENETECH	'S MTS	STON T	S TO	CREATE
				HNOLOGY SOLUTIONS						
ဦ				APPLICATIONS_BETW						
ц Ц				SO SEE SCHEDULE C		שואנגר הוולצות הכה	, Times	7 2011	101	2444
ķ				if the organization discontin		disposed of mo	re than 2	 25% of its :		
ဗိ				bers of the governing body		disposed of file	no man z	-070 01 113 1	3	. 6
∞5				nt voting members of the go		I, line 1b)			4	5
i ii			•	yees (Part V, line 2a)		.,			5	65
Activities & Governance				eers (estimate if necessary)			Ì	6	1,600
્ર				ousiness revenue from Part		: 12			7a	0.
		_		s taxable income from Form					7b	0.
								Prior Year		Current Year
	8	Contributions	and oran	nts (Part VIII, line 1h)				3,091,5	29.	1,215,280.
ne Te				iue (Part VIII, line 2g)	•			6,448,1		7,362,736.
Revenue				art VIII, column (A), lines 3,	4 and 7d)			2,0		6,179.
æ				III, column (A), lines 5, 6d,				13,8		36,270.
				nes 8 through 11 (must equ				9,555,5		8,620,465.
_				ounts paid (Part IX, column		(),		,,,,,,		
				members (Part IX, column			<u> </u>			
	15	Selemos eth		hsation employee benefits	(A), iiile 4) (Bart IV solumn (A)	linos 5 10)	 	2,781,5	62	4,383,948.
စ						111162 2-10)	<u> </u>	2,701,302		4,303,340.
Expenses	16a	Professional	Tupdraisir	ng fees (Part IX, column (A)	, line ITe)					
×bé	b	Total fundra:	sing expe	A\$& (Pal 12000 lumn), 1	ine 25) 🟲	217,080.				
ш	17	Other expens	ses (Part	IX, column (A), lines l⊞a 1	d, 11f-24f).			3,130,9	04.	5,197,151.
	18	Total expens	es Add	rest BFI A must equal Part	IX, column (A), line	25)		5,912,4	9,581,099.	
	19	Revenue less	s expense	rest 13-1 Amust equal Part	12			3,643,1	18.	-960,634.
h 8							Begi	nning of Y	ear	End of Year
\$ a	20	Total assets	(Part X I	une 16)				5,051,2		4,290,157.
88		Total liabilitie	•					934,8		1,134,366.
Not Assets or Fund Balancos			•	ances Subtract line 21 fron	n luno 20			4,116,4		3,155,791.
	7 <u>7</u>		ure Blo		Time 20	•		1,110,1	27.	3,133,131.
100	rt II							- 		audadaa aad balaf daa
7		true, correct,	es of perjury, and complete	I declare that I have examined this Declaration of preparer (other than	officer) is based on all infor	mation of which prep	arer has any	knowledge	н шу кп	owledge and belief, it is
Ŝig		 					1	8-	15-1	' 6
He	JII ro	Signature	of officer					ate		
_	10	Signature			1					
SF		Type or n	rint name an		norta					
		1, ре от р				Date			ΤP	reparer's identifying number
Pa	·					Date	!	Check if self-		see instructions)
ga Pro	la	Preparer's	K	~ f '		8-13		employed P	Щ	000420745
	er's	signature		ow o	310				11	00430745
Us		Firm's name (A'S			_		26026
Or		employed), address, and		N WINCHESTER BLV						360232
		ZIP + 4	SAN					Phone no	(40	
Ma				with the preparer shown at						X Yes No
DA	А Г	Duite and And	and Dane	work Reduction Act Notic	a coe the conarate in	etructions		TEFA0113	12/29	9/09 Form 990 (2009)

Form	990 (2009) BENEFICENT TECHNOLOGY INC. (BENETECH)	77-0555413	Page 2
Par	t III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission:	· · · · · · · · · · · · · · · · · · ·	
	SEE SCHEDULE O		
		, , ,	
2	Did the organization undertake any significant program services during the year which were not listed or	n the prior	
	Form 990 or 990-EZ?	Yes	X No
	If 'Yes,' describe these new services on Schedule O	_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	rvices? Yes	X No
	If 'Yes,' describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program service	s by expenses. Section 50)1(c)(3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants are expenses, and revenue, if any, for each program service reported	io allocations to others, th	e totai
	,		
		- + 6.005	
4 a			7,497.
	BOOKSHARE: BOOKSHARE, WWW.BOOKSHARE.ORG, IS THE WORLD'S LARGEST A		
	LIBRARY FOR PEOPLE WITH PRINT DISABILITIES. THROUGH ITS TECHNOLO		
	PARTNERSHIPS, BOOKSHARE SEEKS TO RAISE THE FLOOR ON ACCESSIBILITY		
	INDIVIDUALS WITH PRINT DISABILITIES HAVE THE SAME EASE OF ACCESS		
	AS PEOPLE WITHOUT DISABILITIES. IN 2007, BOOKSHARE RECEIVED A \$:		
	AWARD FROM THE U.S. DEPARTMENT OF EDUCATION, OFFICE OF SPECIAL ED		
	(OSEP), TO PROVIDE FREE ACCESS FOR ALL U.S. STUDENTS WITH A QUAL		
	DISABILITY. THE BOOKSHARE LIBRARY NOW HAS MORE THAN 60,000 MEMBI		<u>S_AN</u>
	INITIATIVE OF BENETECH, WWW.BENETECH.ORG, A PALO ALTO, CA-BASED I	NONPROFIT_THAT	
	CREATES SUSTAINABLE TECHNOLOGY TO SOLVE PRESSING SOCIAL NEEDS.		
41	(Code:) (Expenses \$ 1,015,993. including grants of \$	(Revenue \$ 11	7,774.)
-7.	HUMAN RIGHTS: THE HUMAN RIGHTS PROGRAM (HRP) SUPPORTS HUMAN RIGHT	`	
	THE WORLD IN THEIR EFFORTS TO GATHER, ORGANIZE AND EVALUATE DATA		
	ABUSES. WHILE HUMAN RIGHTS GROUPS COLLECT LARGE AMOUNTS OF DATA,		THE
		RP DEVELOPED MART	
	AN INFORMATION MANAGEMENT TOOL THAT PROTECTS DATA ABOUT VICTIMS A		VITH
	THIS TOOL USERS CREATE A SEARCHABLE AND ENCRYPTED DATA BASE THAT		*====
	REMOTELY. THE HUMAN RIGHTS DATA ANALYSIS GROUP CONDUCTS STATIST		
	BEHALF OF HUMAN RIGHTS PROJECTS AROUND THE WORLD. OBJECTIVE, SCI		OF
	HUMAN RIGHTS VIOLATIONS GIVES VOICE TO THOUSANDS OF VICTIMS AND V		
	COME FORWARD TO TELL THEIR STORIES.		
40	(Code: Section 1) (Expenses \$ 363,260. including grants of \$)	(Revenue \$41	7,465.)
	MIRADI: MIRADI IS A USER-FRIENDLY PROJECT MANAGEMENT TOOL DESIG	NED SPECIFICALLY	FOR
	ENVIRONMENTAL CONSERVATIONISTS. MIRADI ENABLES PRACTITIONERS TO		
	RECORD, EVALUATE AND LEARN FROM THEIR PROJECTS. IT IS USED TO M		
	CONSERVATION PROJECTS - FROM SMALL COUNTY PARKS TO LARGE LAND TR		
	HABITATS, AND ASSIST IN THE IMPLEMENTATION OF GLOBAL POLICY-ORIE		
	PROTECT THE PLANET'S ECOLOGY.		
	d Other program services (Describe in Schedule O) SEE SCHEDULE O	-	
40	(Expenses \$ 57,394. including grants of \$) (Revenue	\$	`
	e Total program service expenses ► 8,372,730.	Ψ	
	e total program service expenses P 0/3/2/130.	•	

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	Χ_	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Χ	
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	N	'A
6	Did the organization maintain any donor advised funds or any similar funds or 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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		_X
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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Χ	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	:		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	<u>X</u>	
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	Х	
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	_	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	_	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		l x

77-0555413 Form 990 (2009) BENEFICENT TECHNOLOGY INC. (BENETECH) Page 4 Part IV Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part 22 Х IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Х 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c 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 d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d MA 25 a 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 Х 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b Х 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 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III 27 Х Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Х 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 contributions? If 'Yes,' complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 32 Х 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 Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R. 35 35 Part V, line 2 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 Х 36 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

Form 990 (2009)

X

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O

		I	Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S			
ь	Information Returns Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 64			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			J
	(gambling) winnings to prize winners?	1c	X	
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 65			
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		_	i
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь	N/	A
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X_
b	If 'Yes,' enter the name of the foreign country: ▶	i		
	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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с	N/	Ά
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Х
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6ь	N,	A
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		- <u>x</u>
b	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	N	/A
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year . 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	N	/A
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h	_N	KA_
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	-	Х
a	Sponsoring organizations maintaining donor advised funds.			<u> </u>
	Did the organization make any taxable distributions under section 4966?	9a		X
	Did the organization make any distribution to a donor, donor advisor, or related person?	9 b		X
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			ļ
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	a Gross income from other members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	N	A
	of 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			

Governing Body and Management

Section A.

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

				Yes	No					
1 a	Enter the number of voting members of the governing body	1a 6			1					
b	Enter the number of voting members that are independent	1 b 5			:					
2	Did any officer, director, trustee, or key employee have a family relationship or a business re officer, director, trustee or key employee?	elationship with any other	2		$\bar{\mathbf{x}}$					
3	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?									
4	4 Did the organization make any significant changes to its organizational documents									
	since the prior Form 990 was filed?									
5										
6 Does the organization have members or stockholders?										
7 a	a Does the organization have members, stockholders, or other persons who may elect one or governing body?	more members of the	7a		Х					
Ŀ	Are any decisions of the governing body subject to approval by members, stockholders, or o	ther persons?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions under the following:	ertaken during the year by			1					
a	a The governing body?		8a	X						
Ł	Each committee with authority to act on behalf of the governing body?		8ь	Х						
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who ca organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	innot be reached at the	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not	required by the Internal								
Reve	enue Code)									
		,		Yes	No					
10 a	a Does the organization have local chapters, branches, or affiliates?		10 a		X					
t	of Yes, does the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with those of the organization?	of such chapters, affiliates,	10 b	V	/A_					
	Has the organization provided a copy of this Form 990 to all members of its governing body		11	X	L					
	ADescribe in Schedule O the process, if any, used by the organization to review this Form 990	SEE SCHEDULE O								
	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х	<u> </u>					
	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	ū	12b	Х						
	Does the organization regularly and consistently monitor and enforce compliance with the positive of the second sec	olicy? If 'Yes,' describe in	12c	Х						
13	Does the organization have a written whistleblower policy?		13	Х						
14			14	Х	<u> </u>					
15	Did the process for determining compensation of the following persons include a review and persons, comparability data, and contemporaneous substantiation of the deliberation and determining the contemporaneous substantiation of the deliberation and determining the contemporare of the contemporare of the deliberation and deliberation and deliberation are contemporare of the contempor	approval by independent cision?			<u> </u>					
	The organization's CEO, Executive Director, or top management official		15a	X						
t	o Other officers of key employees of the organization SEE SCHEDULE O		15b	Х	ļ					
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions)									
16 a	a Did the organization invest in, contribute assets to, or participate in a joint venture or similal entity during the year?	r arrangement with a taxable	16a		X					
t	of If 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard status with respect to such arrangements?	n to evaluate its participation d the organization's exempt	16b	 N	A					
Sec	tion C. Disclosures									
17	List the states with which a copy of this Form 990 is required to be filed $ ightharpoonup \underline{CA}$									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a inspection. Indicate how you make these available. Check all that apply $ X $. Own website $ X $. Another's website $ X $. Upon request	and 990-T (501(c)(3)s only) av	/aılabl	e for	public					
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, statements available to the public SEE SCHEDULE O									
	State the name, physical address, and telephone number of the person who possesses the TERESA THROCKMORTON 480 CALIFORNIA AVE. #201 PALO ALTO,				430					

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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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 cor	(B)	any C	une			er, un	ecit	(D)	(E)	(E)
(A) Name and Title	(b) Average	(C) Position (check all that apply)						Reportable	(E) Reportable	(F) Estimated
Name and Thie	hours per week	Individual trustee or director	Institutional trustee	Officer		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
JAMES R FRUCHTERMAN										
CHAIRMAN & CEO	40	X		Х				276,419	0	20,833
G. GERVAISE DAVIS III										
DIRECTOR	1	X						0	0	0
JAMES KLECKNER				l						
SECRETARY	1	X		X	<u> </u>			0	_0	0
J. LEIGHTON READ, M.D. DIRECTOR	1	x						0	0	0
CHRISTY CHIN										,
DIRECTOR	1	X				1	ļ	0	0	0
BRIAN BEHLENDORE										
DIRECTOR	1	Х						0	o	0
TERESA THROCKMORTON										
CFO	40			X				151,463	0	17,431
PATRICK BALL										
VP, HUMAN RIGHTS	40					X		120,419		9,252
BETSY BEAUMON										
VP & GM, LITERCY PROGRAMS	40					X		145,000		9,422
RICARDO TAN		Ì								
SEN SUP ENGINEER	40	<u> </u>	<u> </u>	Ļ		X		116,831		20,775
JOHN CROSSMAN								1		
DIR ENGINEERING	40	<u> </u>	_			X	$ldsymbol{f eta}$	126,600		18,314
BETSY BURGESS						l .				
DIR MARKETING	40	ļ	<u> </u>			X	1	152,398		20,889
				-						

Part VII: Section A. Officers, Directors, Trust	ees, K	íеу	Em	plo	ye	es,	and	d Highest Con	pensated Emp	loyees (cont.)
(A)	(B)	(B) (c)						(D)	(E)	(F)
Name and Title	Average hours per week	ndividual trustee	institutional trustee	check Officer	all Key emptoyee	Highest compensated employee	S Former	Reportable compensation from the organization (W-2/1099 MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
					_					
1 b Total							>	1,089,130.	0.	116 <u>,</u> 916.
2 Total number of individuals (including but not limite from the organization▶ 7	d to tho	se li	stec	d ab	ove) wh	o re	ceived more than	\$100,000 in reporta	able compensation
non the organization										Yes No

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person

	Yes	No
3		_ X_
4	X	
	1	
5	<u> </u>	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of Services	(C) Compensation
KEVIN SMITH 1818 11TH ST SW, LARGO, FL 33778	ENGINEERING SERVICES	125,632.
	LOBBY SERVICES	100,152.
COMPREHENSIVE COMPUTER CONSULTING 1500 W MAIN ST SUITE 100 SUN PRARI	ENGINEERING SERVICES	132,320.
CHERIE MILLER 1492 WEBSTER STREET PALO ALTO, CA 94301	MARKETING SERVICES	105,905.
	BOOK VALIDATION	205,913.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 5

Pa	rt VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lns 1a-1f. h Total. Add lines 1a-1f	1,215,280.			
PROGRAM SERVICE REVENUE	Business Code 2 a BOOKSHARE b MIRADI c HUMAN RIGHTS d e f All other program service revenue g Total. Add lines 2a-2f	6,827,497. 417,465. 117,774.	6,827,497. 417,465. 117,774.		
	3 Investment income (including dividends, interest and other similar amounts). 4 Income from investment of tax-exempt bond proceeds. 5 Royalties (i) Real (ii) Personal 6a Gross Rents b Less rental expenses c Rental income or (loss)	6,179.			6,179.
	d Net rental income or (loss). 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)				
OTHER REVENUE	8a Gross income from fundraising events (not including \$			-	
	c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				_
	11a MISC. INCOME b c d All other revenue e Total. Add lines 11a-11d	30,077.	30,077.		
	12 Total revenue. See instructions		7,392,813.	0.	12,372.

Part IX | Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must comp		(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	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	427,882.	74,633.	331,135.	22,114.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	2,677,040.	2,519,134.	71,437.	86,469.
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	1,279,026.	1,063,811.	169,985.	45,230.
10	Payroll taxes				
11	Fees for services (non-employees)				
á	Management				
ŀ	Legal				
(: Accounting				
(I Lobbying				
•	Prof fundraising svcs See Part IV, In 17				
1	Investment management fees				
9	g Other				
12	Advertising and promotion				
13	Office expenses	90,438.	82,264.	8,174.	
14	Information technology				
15	Royalties				
16	Occupancy	89,776.	89,776.		-
17	Travel	334,105.	310,986.	18,224.	4,895.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	145,533.	131,139.	14,044.	350.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	566,840.	555,732.	9,772.	1,336.
23		3,819.		3,819.	
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.)				
;	a OUTSIDE SRVS (SEE SCHEDULE O)	2,126,847.	1,869,580.	238,414.	18,853.
	SHARED EXP (SEE SCHEDULE O)	955,423.	792,159.	128,381.	34,883.
	BOOK COLLECTION & DEVELOPMENT	677,259.	677,259.		
	d COMMUNICATION & INTERNET FEES	166,078.	163,812.	2,239.	27.
	SUBSCRIPTIONS & DUES	15,995.	12,493.	975.	2,527.
	f All other expenses	25,038.	29,952.	-5,310.	396.
	Total functional expenses. Add lines 1 through 24f	9,581,099.	8,372,730.	991,289.	217,080.
	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				
BAA	campaign and fundraising solicitation				Form 990 (2009)

Form 990 (2009)

(A) Beginning of year (B) End of year 128,570. 52,701. Cash - non-interest-bearing 1 2 1,232,107. 638,336 Savings and temporary cash investments 375,217. 729,783. 3 3 Pledges and grants receivable, net 314,608. 467,343. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L 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 7 Notes and loans receivable, net 8 Inventories for sale or use 3,151. 5,247. 9 Prepaid expenses and deferred charges 170,013 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 23,770. 10b 146,243 43,125. 10 c **b** Less: accumulated depreciation. 11 11 Investments — publicly-traded securities 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 1,639,579. 1,231,084. 14 14 Intangible assets 700,857. 755,963. 15 15 Other assets See Part IV, line 11 5,051,284. 4,290,157. Total assets Add lines 1 through 15 (must equal line 34) 16 16 17 1,071,037. Accounts payable and accrued expenses 887,590. 17 18 18 Grants payable 47,267. 63,329 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Complete Part X of Schedule D 934,857. 26 1,134,366. 26 Total liabilities. Add lines 17 through 25 |X| and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 1,905,359 27 1,415,507. 27 Unrestricted net assets 2,211,068 28 1,740,284. Temporarily restricted net assets 29 Permanently restricted net assets Q R and complete Organizations that do not follow SFAS 117, check here FUND lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 BALANCES 31 Paid-in or capital surplus, or land, building, and equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 4,116,427. 3,155,791. 33 Total net assets or fund balances. 33 5,051,284 4,290,157 34 Total liabilities and net assets/fund balances

BAA

Part X

Balance Sheet

orm 990 (2009) BENEFICENT TECHNOLOGI INC. (BENETECH) //-0	1555413	Pa	ige 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			!
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b Were the organization's financial statements audited by an independent accountant?	2b	Х	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th review, or compilation of its financial statements and selection of an independent accountant?	ne audit, 2c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue consolidated basis, separate basis, or both:	ed on a		:
Separate basis X Consolidated basis Both consolidated and separate basis			-
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	Single 3 a	х	
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired audit	х	

BAA

Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name o	f the	organization							Employer	ıdentificat	ion number
BEN	EF.	ICENT TECHNOI	LOGY INC. (BEN	ETECH)					77-05	555413	3
Parl	<u> </u>	Reason for Pul	blic Charity Statu	s (All organizations	must c	omple	te this	part.)	See II	nstructi	ions
The c	rga	nization is not a priv	vate foundation becau	se it is: (For lines 1 thro	ugh 11,	check o	nly one	box)			
1	1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).										
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's										
		name, city, and sta	te:								
5	5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)										
6 7	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8		A community trust	described in section 1	170(b)(1)(A)(vi). (Complet	te Part I	1.)					
9		from activities related investment income	d to its exempt function	more than 33-1/3 % of its s s — subject to certain exce ss taxable income (less omplete Part III.)	eptions, a	and (2) r	o more t	han 33-	1/3 % of	its suppo	ort from gross
10	П			exclusively to test for pu	ıblıc safe	ety. See	section	509(a)	(4).		
11		An organization or	ganized and operated orted organizations d	exclusively for the beneficescribed in section 509(a ration and complete lines	fit of, to a)(1) or s 11e thi	perform section	the fun 509(a)(2	ctions o	of, or car section	ry out th 509(a)(3	ne purposes of one or). Check the box that
		a Type I	b Type II	c Type III						d \square	Type III- Other
е		By checking this bo	ox. I certify that the or	ganization is not controll n one or more publicly si	led direc	tly or in	directly	by one	or more ed in sec	dısqualı	fied persons other
f		If the organization check this box	received a written det	ermination from the IRS	that is a	Type I	, Type II	or Typ	e III sup	porting o	organization,
g		Since August 17, 2	006, has the organiza	tion accepted any gift o	r contrib	ution fro	om any	of the fo	ollowing	persons	Yes No
		(i) a person who	directly or indirectly overning body of the si	controls, either alone or upported organization?	together	with pe	rsons d	escribe	d ın (ıı) a	and (III)	11 g (i)
		• •	ber of a person desc	• •							11 g (ii)
		•	· ·	described in (i) or (ii) al	bove?						11 g (iii)
h		` '	•	he supported organization							
	(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) organizat (i) listed gove	is the ion in col i in your irning ment?	the organ	ou notify ization in (i) of ipport?	organizat	s the ion in col zed in the 5 ?	(VII) Amount of Support
					Yes	No	Yes	No	Yes	No	

									İ		
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 Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') 891,331. 3,091,529. 1,215,280 3,589,918. 2,571,195 11.359.253. Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf 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 0. the public without charge 3,091,529. 1,215,280. 3,589,918. 2,571,195 11,359,253. Total. Add lines 1-through 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 shown on line 11, column (f). 4,036,191. Public support. Subtract line 5 7,323,062. from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► (c) 2007 (d) 2008 (e) 2009 (f) Total (a) 2005 (b) 2006 891,331 3,091,529. 215,280 11,359,253. 3,589,918. 2,571,195 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 296,581 108,575 15,900 12,385 684,892. 251,451 sımılar sources Net income from unrelated business activities, whether or not the business is regularly 0. carried on Other income Do not include gain or loss from the sale of capital assets (Explain in 0. Part IV) Total support. Add lines 7 through 10 12,044,145. Gross receipts from related activities, etc (see instructions) 12 | 15,439,043. 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 Section C. Computation of Public Support Percentage 14 60.8% 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 58.1% 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33-1/3 support test − 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2009 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 - 2008. 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.

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 chec	ked the box on li	ne 9 of Part I)				
Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')			- 111			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge	i i					
7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		-				
	Public support (Subtract line						
	7c from line 6)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.			-			
	Add lines 10a and 10b Net income from unrelated business activities not included inline 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).						
14	Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	is for the organiz stop here		nd, third, fourth,	or fifth tax year a	s a section 501(c)(3) -
	tion C. Computation of Pu			10		T ==	T
	Public support percentage for 20			ne 13, column (f))	15	%
_	16 Public support percentage from 2008 Schedule A, Part III, line 15 16 %						
	Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 %						
17					umn (1))	17	<u>%</u>
18 19 a	Investment income percentage f	organization did not	check the box on	line 14, and line 15	is more than 33-1/	3%, and line 17 is r	
ŀ	more than 33-1/3%, check this to 33-1/3 support tests — 2008. If this not more than 33-1/3%, check	he organization d	id not check a bo	x on line 14 or 19	9a. and line 16 is	more than 33-1/3	%, and line 18
20	Private foundation. If the organ						

Schedule A	(Form 95	30 or 99	U-EZ) 2	2009 1	BENEF	ICENI	. TLU	INOLOG	Y INC	. (BEI	NETECH))	11-0555	9413	Pa	age 4
PartilV	Supple Part II.	menta	al Info 7a or	rmatio 17b: a	n. Cor	nplete	this pa	art to p Provid	rovide le anv	the exp	olanation dditiona	ns requi	red by F	art II, lii ee instru	ne 10; uctions.	
				,		,										
																
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: complete Parts I-A and C below Do not complete Part I-B Section 527 organizations: complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete

	•	,' to Form 990, Part IV, line 5 (Proxy Tax), t rganizations: Complete Part III	hen			
	of organization	Iganizations. Complete rait in		Employer (dentifica	tion number	
	NEFICENT TECHNOLOGY	TNC (DENETECU)		77-055541		
		rganization is exempt under section	n 501(c) or is a s			
		organization's direct and indirect political c				
	Political expenditures	organization's direct and indirect political c	ampaign activities in	r aitiv ►\$	α	
	Volunteer hours			Ψ.	<u> </u>	
		rganization is exempt under section	on 501(cV3)		<u> </u>	
		ise tax incurred by the organization under		►Ś	0.	
		ise tax incurred by the organization managers		v. ►s	0.	
	_	section 4955 tax, did it file Form 4720 for		٧.	Yes No N/	Α
	Was a correction made?	i section 4355 tax, did it life i offit 4720 for	tilis year		Yes No	• •
	If 'Yes,' describe in Part IV				☐ 1 c 3 ☐ 110	
		rganization is exempt under section	n 501(c) eyeen	t section 501(c)(3)	<u> </u>	
		pended by the filing organization for section				
				•		
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt ►\$		
3	Total of exempt function exp line 17b	enditures. Add lines 1 and 2 Enter here a	nd on Form 1120-PO	^{L,} ▶\$		
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No	
5	made For each organization	and employer identification number (EIN) I listed, enter the amount paid from the filin ere promptly and directly delivered to a se the (PAC). If additional space is needed, pre	an organization's fund	ts. Also enter the amou	nt of political	
	(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-	

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule C (Form 990 or 990-EZ) 2009

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.)

	Lobbyin	g Expenditures During 4-	Year Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount		339,985.	445,623.	634,361.	1,419,969.
b Lobbying ceiling amount (150% of line 2a, column (e))					2,129,954.
c Total lobbying expenditures		22,107.	126,255.	131,226.	279,588.
d Grassroots nontaxable amount		84,996.	111,406.	158,590.	354,992.
e Grassroots ceiling amount (150% of line 2d, column (e))					532,488.
f Grassroots lobbying expenditures					0.

BAA

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (F	orm 990 or 990-EZ) 2009 BENEFICENT TECHNOLOGY INC. (BENETECH)		-0555	
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	i illec	ı FOM	
		(6	a)	(b)
		Yes	No	Amount
legisl	g the year, did the filing organization attempt to influence foreign, national, state or local ation, including any attempt to influence public opinion on a legislative matter or referendum, gh the use of		_	1
a Volur	nteers?			
	staff or management (include compensation in expenses reported on lines 1c through 1i)?			
d Mailir	ngs to members, legislators, or the public?	<u> </u>		
e Publi	cations, or published or broadcast statements? .			
f Gran	is to other organizations for lobbying purposes?			
g Direc	t contact with legislators, their staffs, government officials, or a legislative body?.			
h Rallie	s, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other	activities? If 'Yes,' describe in Part IV			
j Total	Add lines 1c through 1i			
	ne activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>	<u> </u>	
	s,' enter the amount of any tax incurred under section 4912			
	s,' enter the amount of any tax incurred by organization managers under section 4912		 -	
	filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1) (5)	l l	
Part III-A	Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or so	ection 501(c)(6).
				Yes No
1 Were	substantially all (90% or more) dues received nondeductible by members?			1
2 Did tl	ne organization make only in-house lobbying expenditures of \$2,000 or less?			2
	ne organization agree to carryover lobbying and political expenditures from the prior year?			3
Part III-E	Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection 501(c)(6)
	if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line	3 is a	nswe	red 'Yes.'
1 Dues	, assessments and similar amounts from members .		1	
2 Secti expe	on 162(e) non-deductible lobbying and political expenditures (do not include amounts of political nses for which the section 527(f) tax was paid).			
a Curre	ent year		2a	
b Carry	over from last year		2ь	
c Total			2с	
3 Aggre	egate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
does	the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pol	ss itical		
	nditure next year?		5	
777	ble amount of lobbying and political expenditures (see instructions).] 3	
Complete	Supplemental Information this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, a	nd Par	t II-B, I	ıne 1ı.
Also, comp	olete this part for any additional information.			

Schedule C (Form 990 or 990-EZ) 2009 BENEFICENT TECHNOLOGY INC. (BENETECH)	77-0555413	Page 4
Schedule C (Form 990 or 990-EZ) 2009 BENEFICENT TECHNOLOGY INC. (BENETECH) Part IV縣 Supplemental Information (continued)	· · · · · · · · · · · · · · · · · · ·	
		

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions

Department of the Treasury Internal Revenue Service Name of the organization

BENEFICENT TECHNOLOGY INC. (BENETECH)

Inspection: Employer Identification numbe

77-0555413 ুরিট্রিল্প Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete ।f the organization answered 'Yes' to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year). Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?? Partill Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a a Total number of conservation easements

b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c 2d d Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section No 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for

Partills Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.
 - Revenues included in Form 990, Part VIII, line 1
 - (ii) Assets included in Form 990, Part X.
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

conservation easements

OMB No 1545-0047

Schedule D (Form 990) 2009 BENEFI				77-055		² age 2
Part III Organizations Maintain	ing Collection	ons of Art, Histo	<u>rical Treasures, o</u>	r Other Similar Ass	ets (continue	:d)
3 Using the organization's acquisition items (check all that apply):	accession and	other records, chec	k any of the following	that are a significant us	se of its collection	n
a Public exhibition		d Loan o	or exchange programs			
b Scholarly research		e U Other				
c Preservation for future generate						
4 Provide a description of the organia Part XIV		•	•		se in	
5 During the year, did the organization assets to be sold to raise funds rational states.	in solicit or rece her than to be i	eive donations of art maintained as part o	, historical treasures, if the organization's co	or other similar ollection?	☐ Yes ☐	No
Part IV Escrow and Custodial A 9, or reported an amour	Arrangemen	ts Complete if o	rganization answe			
1 a Is the organization an agent, truste included on Form 990, Part X?	e, custodian, o	r other intermediary	for contributions or ot	her assets not	Yes]No
b If 'Yes,' explain the arrangement in	Part XIV and	complete the follows	ng table:			
					Amount	
c Beginning balance				. 1c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1f	_	1
2a Did the organization include an am		90, Part X, line 21?			Yes	No
b If 'Yes,' explain the arrangement in			d Wastes Farms O	00 Dart IV June 10		
Part V Endowment Funds Com				 	1	le e e l
1 - Dogway of wood bolones	(a) Current year	(b) Prior year	(c) Two years bad	ck (d) Three years back	(e) Four years	Dack
1 a Beginning of year balance					 	
b Contributions					+	
c Net Investment earnings, gains, and losses						
d Grants or scholarships						
Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance.	 			<u> </u>		
2 Provide the estimated percentage of	•					
a Board designated or quasi-endown	· ·	%				
b Permanent endowment ►						
c Term endowment ►	—⁴					
3a Are there endowment funds not in organization by:	the possession	of the organization	that are held and adm	ninistered for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b if 'Yes' to 3a(ıı), are the related org	anizations liste	ed as required on So	hedule R? .		. 3b	
4 Describe in Part XIV the intended u	=	·			<u> </u>	
Part VI Investments-Land, Bui				(, line 10.		
Description of investment		Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Val	lue
1 a Land						
b Buildings	<u> </u>		, ,			
c Leasehold improvements	<u> </u>					
d Equipment .		170,013.		146,243.	23,	<u>770.</u>
e Other						
Total. Add lines 1a through 1e (Column	(d) must equal	Form 990, Part X, c	olumn (B), line 10(c).)			<u>770.</u>
BAA				Sche	dule D (Form 990)) 2009

TEEA3302L 02/02/10

Schedule D (Form 990) 2009 BENEFICENT TECH	NOLOGY INC. (BENET	ECH) 77-0555413 Page 3
Part VII Investments—Other Securities See	Form 990, Part X, line	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
~~		
		·
Total. (Column (b) must equal Form 990 Part X, col (B) line 12) ▶		
Part VIII Investments—Program Related (Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost or end-or-year market value

		W
T. I. (0.1 (1) (1.5 (10) 1.7 (10) 1.7 (10) 1.7 (10)		
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13) Part IX Other Assets (See Form 990, Part	Y line 15)	
•) Description	(b) Book value
	,	
BENGINEERING STOCK		10,000.
DEPOSITS		51,834.
LT RECEIVABLE		400,000.
RELATED ENTITY RECEIVABLE BE		239,022.
ROUNDING		1.
		-
Total. (Column (b) must equal Form 990, Part X, col.(E	3). line 15)	▶ 700,857.
Part X Other Liabilities (See Form 990, Part X)		, , , , , , , , , , , , , , , , , , , ,
(a) Description of Liability	(b) Amount	
Federal Income Taxes	1	
· · · · · · · · · · · · · · · · · · ·		
		_
		4
		\dashv
		\dashv
		\dashv
		_
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		7
2. FIN 48 Footnote In Part XIV, provide the text of the		s financial statements that reports the organization's liability
for uncertain tax positions under FIN 48		

Sche	dule D (Form 990) 2009 BENEFICENT TECHNOLOGY INC. (BENETECH) 7	7-05554	13	Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII,column (A), line 12)		8,620,	465.
2	Total expenses (Form 990, Part IX, column (A), line 25)		9,581,	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-960,	
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-960,	634.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per F	<u>Return</u>		
1	Total revenue, gains, and other support per audited financial statements .	11-	8,725,	784.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments 2a	4		
	Donated services and use of facilities . 2b 105,319	-		
	Recoveries of prior year grants .	-		
	Other (Describe in Part XIV)	_		
e	Add lines 2a through 2d	2e		319.
3	Subtract line 2e from line 1	3	8,620,	465.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investments expenses not included on Form 990, Part VIII, line 7b	⊣		
	Other (Describe in Part XIV) . 4b			
	Add lines 4a and 4b.	4c		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	8,620,	465.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per		0 606	410
1	·	1 1	9,686	418.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	Donated services and use of facilities 2a 105,319	-		
	Prior year adjustments Cother losses 2b 2c	-		
		-{		
	I Other (Describe in Part XIV) . 2d	2e	105	319.
5	Subtract line 2e from line 1	3	9,581	
Л	Amounts included on Form 990, Part IX, line 25, but not on line 1:		7,301	, 0 , 0 ,
7	Investments expenses not included on Form 990, Part VIII, line 7b			
	O Other (Describe in Part XIV)	┥ !		
	Add lines 4a and 4b.	4c		
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	9,581	.099.
	t XIV Supplemental Information		•	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part I 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this mation	V, lines 1b part to prov	and 2b, Par	t V, itional
			_ _	
		 -	-	

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Schedule D (Form 990) 2009 BENEFICENT TECHNOLOGY INC. (BENETECH) PartsXIV Supplemental Information (continued)	77-0555413	Page 5
Partial Supplemental Information (continued)		
	. _	
		

. . .

Schedule F (Form 990)

Totals

Statement of Activities Outside the United States

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service	► A	ttach to Form 990	. ► See separate instructions		Open to Public Inspection
Name of the organization				Employer idea	ntification number
BENEFICENT TECHNO	OLOGY INC. (BEN	IETECH)		77-0555	5413
	rmation on Activiti Part IV, line 14b.	es Outside the	e United States. Complet	e if the organizat	ion answered 'Yes'
1 For grantmakers. Do grantees' eligibility fo	es the organization ma or the grants or assistar	intain records to s ace, and the selec	substantiate the amount of the tion criteria used to award the	grants or assistance, grants or assistance	the Yes No N/
-			edures for monitoring the use of	f grant funds outside	the United States
3 Activities per Region (a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	expenditures in region
AFRICA	0	0	PROGRAM SERVICES	HUMAN RIGHTS	166,665.
ASIA	0	0	PROGRAM SERVICES	HUMAN RIGHTS	162,391.
ASIA	0	0	PROGRAM SERVICES	LITERACY FOR	146,777.
				DISABLED	
CENTRAL AMERICA	0	0	PROGRAM SERVICES	HUMAN RIGHTS	93,155.
SOUTH AMERICA	0	0	PROGRAM SERVICES	HUMAN RIGHTS	173,203.
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Schedule F (Form 990) (2009)

742,191.

77-0555413

Page 2

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BENEFICENT TECHNOLOGY INC. (BENETECH)

Schedule F (Form 990) 2009

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to
Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000
Use Schedule F-1 (Form 990) if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other)			*	1	ļ				
(h) Description of non-cash assistance									
(g) Amount of non-cash assistance									
(f) Manner of cash disbursement									
(e) Amount of cash grant									:
(d) Purpose of grant									
(c) Region									
(b) IRS code section and EIN (if applicable)									
1 (a) Name of organization									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3 Enter total number of other organizations or entitles

BAA

Schedule F (Form 990) 2009

77-0555413

BENEFICENT TECHNOLOGY INC. (BENETECH)

Schedule F (Form 990) 2009

Partills Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance

TEEA3503L 07/06/09

BAA

Schedule F (Form 990) 2009

Schedule F	(Form 990) 2009	BENEFICENT	TECHNOLOGY	INC.	(BENETECH)		77-0555413	Page 4
Part IV	Supplemental	Information			(=====			
			formation required	l in Part	I, line 2, and any a	dditional inform	ation	
	Complete tino par	to provide the ini	omiation required		i, into E, and any a	ida iti di itali		-
						- 		
			. 					
				~ -				
							. 	

SCHEDULE J (Form 990)

Compensation Information

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

2009

Department of the Treasury Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 Attach to Form 990.
 See separate instructions.

Open to Public Inspection

Name of the organization
BENEFICENT TECHNOLOGY INC. (BENETECH)

Employer identification number

77-0555413

a.	rt I Questions Regarding Compensation			
			Yes	No
1:	a 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)			l i
ı	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b	N	/A
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	V	/A
3	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		Ì	
	Independent compensation consultant X Compensation survey or study			;
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
	a Receive a severance payment or change-of-control payment?	4a		X
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4ь		X
•	c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		1	
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			
	a The organization?	5a	<u> </u>	X
	b Any related organization?	5b	<u> </u>	Х
	If 'Yes' to line 5a or 5b, describe in Part III.		1	
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:			
	a The organization?	6a	<u> </u>	X
	b Any related organization?	6b	<u> </u>	X
	If 'Yes' to line 6a or 6b, describe in Part III			ļ
7	For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7	х	
8	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 in Part III	8		х
9	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	l N	/A

77-0555413

BENEFICENT TECHNOLOGY INC. (BENETECH)

Schedule J (Form 990) 2009

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. Partill Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	Compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	•	(l) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·(I)(B)	reported in prior Form 990 or Form 990-EZ
JAMES R FRUCHTERMAN	Ξ	223, 552.	52, 867.	0	0.	20,833.	297, 252.	0
	€	 	0 0			0	0	0.
TERESA THROCKMORTON	Θ	128,463.		0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 1	17,431_	168,894.	
	(ii)		.0	0.		0.	의	0.
BETSY BEAUMON	(0)	145,000.	.0	0 0 0 0 0 0 0 0 0 0	0	9,422.	154,422.	0 0
	(ii)]]]	0	0.		0.		0.
BETSY BURGESS	Θ	140,398.	12,000.	 		20, 889.	173, 287.	0
	[(ii)	0.	0.	0.		0.	0.	0.
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	(ii)							
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	ε	1 1 1	1 1 1	 		1 1 1 1 1 1 1	1 1 1 1 1 1	
	€							
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ВАА				TEEA4102L 02	02/02/10		Sched	Schedule J (Form 990) 2009

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-ÉZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Schedule L (Form 990 or 990-EZ) 2009

Name of the organization						Em	ıployer ıd	entıfica	tion nui	mber		
BENEFICENT TECHNOLOGY INC. (B	ENETE	CH)				7	7-055	5413	3			
Part I Excess Benefit Transaction Complete if the organization answe	s (sect red 'Yes'	on 501	l (c)(3) a n 990, Part	nd section IV, line 25a o	501(c)(4 r 25b, or F	l) organıza orm 990-EZ,	ations Part V	only , line 4). 10b.			
1 (a) Name of disqualified person					(h) Description	of transaction					(c) Corr	ected?
1 (a) Name of disqualified person				·	(D) Description	1 01 1101130011071					Yes	No
2 Enter the amount of tax imposed on the section 4958.	Ť		_		ersons dur	ing the year	under	► \$. ► s				
3 Enter the amount of tax, if any, on line 2 Part II Loans to and/or From Interes				organization				ې				
Complete if the organization answe				: IV, line 26 or	Form 990	-EZ, Part V, I	ine 38a	١.				
(a) Name of interested person and purpose	(b) Loan the orga	to or from	(c) princi	Original pal amount	(d) Ba	lance due	(e) In d	efault?	(f) App by boo	ard or	(g) W agree	ritten ment?
	То	From	1				Yes	No	Yes	No	Yes	No
					_							
							-					
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		l		- A			+	İ				
Total Part III Grants or Assistance Benef	ittina l	ntoroc	tod Para	▶ \$							<u> </u>	
Part III Grants or Assistance Benefication Complete if the organization	answe	ered 'Y	es' on F	orm 990. P	art IV. li	ne 27.						
(a) Name of interested person	T			interested person			c) Amoun	t and tv	ne of as	sistano		
(a) Harrie of interested person	`	D / (Clation	the organ		U		-, , aou		po 0, 03		•	
		•										
F	<u> </u>	 			_							
Part IV Business Transactions Invo Complete if the organization	olving I	I nteres ered'Ye	ted Pers	orm 990, Pa	art IV, III	ne 28a, 28	Bb, or	28c.				
(a) Name of interested person		elationship ested perso organizati	n and the	(c) Amou transacti	nt of on \$	(d) De	scription	of trans	action		organi	aring of zation's nues?
											Yes	No
AMANDA THROCKMORTON	FAMIL	Y MEMB	ER		57,767.	EMPLOYMEN	T				<u> </u>	X
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or 990-EZ.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2009

OMB No 1545-0047

Open to Public Inspection

Employer Identification number 77-0555413

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

* Attach to Form 990. * See separate instructions.

(BENETECH)

BENEFICENT TECHNOLOGY INC.

Department of the Treasury Internal Revenue Service Name of the organization

Schedule R (Form 990) (2009) (F)
Direct controlling
entity (F)
Direct controlling
entity Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (E)
Public charity status (if section 501(c)(3)) (E) End-of-year assets Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) (**D)** Exempt Code section **(D)** Total income TEEA5001L 02/05/10 (C)
Legal domicile (state or foreign country) (C)
Legal domicile (state or foreign country) BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (B)
Primary activity (B)
Primary activity (A) Name, address, and EIN of related organization (A) Name, address, and EIN of disregarded entity

Page 2 77-0555413 (BENETECH) Schedule R (Form 990) 2009 BENEFICENT TECHNOLOGY INC.

(J) General or managing partner? ž **Parking** Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) (H)
Disproportionate
allocations? Ŷ Yes Share of total income Share of end-of-year assets (E)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) Direct controlling entity e (C)
Legal
domicile
(state or
foreign (B) Primary Activity (A)
Name, address, and EIN of related organization

Iparitive Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	axable as a Cor d organizations	poration or Tru treated as a co	ust (Complete orporation or t	if the organizations the	ation answered 'Ye tax year.)	ss' to Form 990, Pa	ırt IV,
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign c	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(B) (C) (D) Type of entity Activity Legal domicile Direct (C corp, S corp, C country) (C country) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(G) Share of end-of-year assets	(H) Percentage ownership
BENGINEERING, INC							
PALO ALTO, CA 94306	ENGINEERING SVCS	ď	N/A	C CORP	63.	5,246.	100.00

Schedule R (Form 990) (2009)

TEEA5002L 02/05/10

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77-0555413

Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	٩
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV:			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a	×
b Giff grant or capital contribution to other organization(s)		1 b	×
c Gift, grant, or capital contribution from other organization(s)	•	1c	×
d Loans or loan quarantees to or for other organization(s)		×	
e Loans or loan quarantees by other organization(s)		1e	×
f Sale of assets to other organization(s).		7	×
g Purchase of assets from other organization(s)		19	×
h Exchange of assets		무	×
i Lease of facilities, equipment, or other assets to other organization(s)		<u>.</u>	×
i Lease of facilities equinoment or other assets from other organization(s)			×
k Performance of services or membership or fundraising solicitations for other organization(s)		1 4	×
I Performance of services or membership or fundraising solicitations by other organization(s)		11	×
m Sharing of facilities, equipment, mailing lists, or other assets		1	×
n Sharing of paid employees		r L	×
o Reimbursement paid to other organization for expenses		10	×
p Reimbursement paid by other organization for expenses	•	1p	×
q Other transfer of cash or property to other organization(s)		19	×
r Other transfer of cash or property from other organization(s)		11	×
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	and transaction thresho	splo	
(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved	g
(1) BENGINEERING, INC	D	8	800.
(2)			
(3)			
(4)			
(5)			
9			
BAA TEEA5003L 02/05/10	Schedule	Schedule R (Form 990) (2009)	(600)

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Rativing Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships

Name, address, and EIN of entity (A) Primary activity (State or foreign section (Solico)(3) (C) (B) (C) (C) (C) (C) (C) (C	(B) Primary activity	(C) Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	(E) Share of end-of-year assets	(F) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?	al or ging er?
			Yes No		Yes No	•	Yes	No
								
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ВАА		TEEA5004L 02/05/10				Schedule R (Form 990) (2009)) (066 u	2009)

SCHEDULE O (Form 990)

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Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

BENEFICENT TECHNOLOGY INC. (BE	ETECH) [77-0555413
FORM 990, PART III, LINE 1 - ORGA	NIZATION MISSION
BENETECH'S_MISSION_IS_TO_CR	ATE INNOVATIVE TECHNOLOGY SOLUTIONS TO SERVE ALL OF
HUMANITY. WE EXIST TO BRIDG	THE GAP IN SOCIAL APPLICATIONS BETWEEN WHAT'S POSSIBLE
AND WHAT'S SUFFICIENTLY PRO	ITABLE. CURRENTLY WE TACKLE ISSUES SUCH AS HUMAN RIGHTS
VIOLATIONS, PARITY OF ACCES	TO INFORMATION, LITERACY AND ENVIRONMENTAL
CONSERVATION. WE ARE DRIVEN	BY THE IDEA THAT OUR TECHNOLOGY SOLUTIONS WILL BE
REAPPLIED AND ADAPTED AROUN	THE WORLD TO REMOVE BARRIERS AND ALLOW PEOPLE TO HELP
THEMSELVES_AND_OTHERS_FOR_G	NERATIONS TO COME.
FORM 990, PART III, LINE 4D - OTH	ER PROGRAM SERVICES DESCRIPTION
ROUTE 66: ROUTE 66 IS AN IN	OVATIVE INTERNET-BASED SERVICE OFFERING LITERACY
MATERIALS_TO_ADOLESCENT_AND	YOUNG ADULTS WHO HAVE A VARIETY OF PHYSICAL COGNITIVE,
COMMUNICATIVE, LINGUISTIC A	D SENSORY IMPAIRMENTS. IN ADDITION, ROUTE 66 LITERACY
OFFERS INSTRUCTIONAL STRATE	SIES ALLOWING A LITERATE PERSON TO BECOME AN EFFECTIVE
LITERACY TUTOR.	
FORM 990, PART VI, LINE 11 - FOR	M 990 REVIEW PROCESS
AT LEAST ONE WEEK PRIOR TO	TILING RETURN, THE 990 IS EMAILED TO ALL BOARD MEMBERS
WITH REQUESTS FOR COMMENTS	OR QUESTIONS. CFO ALSO MEETS WITH THE CEO AND CHAIRMAN
OF THE BOARD FOR FURTHER 99	REVIEW PRIOR TO FILING.
FORM 990, PART VI, LINE 12C - EXP	LANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS
EMPLOYEES AND DIRECTORS REC	CIVE BENETECH'S CONFLICT OF INTEREST POLICY ANNUALLY AND
MUST SUBMIT AN ACKNOWLEDGME	NT TO HUMAN RESOURCES. CEO AND CFO SUBMIT ADDITIONAL
ANNUAL WRITTEN CONFLICT OF	INTEREST LETTERS TO THE BOARD OF DIRECTORS.
FORM 990, PART VI, LINE 15B - CO	IPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYE
CEO AND CFO SALARIES ARE DE	TERMINED BY THE BOARD OF DIRECTORS BASED ON PERFORMANCE
AND COMPARABLE DATA FROM:	COMPDATA, GUIDE STAR, NON-PROFIT TIMES SALARY SURVEY,

Name of the organization	Employer identification number
BENEFICENT TECHNOLOGY INC. (BENETECH)	77-0555413
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCES	S FOR OFFICERS & KEY EMPLOYEE
PROFESSIONALS FOR NON-PROFITS SALARY RANGE SURVEY AND CONSULT	ANT-SUPPLIED HI TECH
DATA. THE COMPARABLE DATA IS ALSO USED FOR KEY EMPLOYEE SALARY	GUIDELINES. ALL
EMPLOYEE SALARIES OTHER THAN CEO AND CFO ARE APPROVED BY CEO	AND VICE PRESIDENT OF
HUMAN RESOURCES. THIS PROCESS WAS USED IN 2009.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY	VAILABLE
ANNUAL AUDITED FINANCIALS ARE MADE AVAILABLE TO THE PUBLIC BY	POSTING TO BENETECH'S
WEBSITE AFTER BOARD APPROVAL. AVAILABLE UPON REQUEST ARE: AUI	DITED FINANCIALS,
GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY.	
FORM 990. PART IX, LINE 24A - OUTSIDE SERVICES	
SERVICES PROVIDED BY COMPANIES PRIMARILY FOR DESIGN ENGIN	NEERING,
FINANCIAL AUDIT AND TAX PREPARATION, AND TEMPORARY ACCOUNT	TING AND
ADMINISTRATION ASSITSTANCE.	
FORM 990, PART IX, LINE 24B - SHARED EXPENSES	
FORM 990, PART IX, LINE 24B - SHARED EXPENSES RENT, TELEPHONE, OFFICE SUPPLIES, EQUIPMENT, LIABILITY IS	NSURANCE,
	NSURANCE,
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