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SCANNEL MAR 0 3 2011

Short Form 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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form
990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1 250,000 at the end of the year
may use this form

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

OMB No 1545 1150 -

2009

Open to Public Inspection

Α	For th	ne 2009 ca <u>l</u>	lendar y	year, or tax year beg	ginning	8/0 <u>1</u>	, 200	<u>9, and er</u>	ding	7/31			, 2010	
B	Check i	f applicable		С	•		'				D Em	ployer i	dentification nu	mber
Ш	Address	s change	Please use IRS	Smartmeme							21	0-18	97585	
Ш	Name o		label or print or	2940 16th St.	reet #2	201						ephone r		
\blacksquare	Initial re	eturn		San Francisc	o, CA 9	4103					(,	451)	255-913	33
H	Termina	ation	Specific									131)	255 515	
H		ed return	Instruc- tions										kemption	_
Ш	Applica	tion pending		<u> </u>								mber	1	
	•	Section 5	01(c)(3)) organizations and ch a completed Sch	4947(a)(1) .	nonexempt	่ charitable trust: 99ภ.ควา	s		ccounting other (spec		d _	Cash X	Accrual
				on a compressa con	<u> </u>	01111 000 01	556 <u>LL</u>).			heck •		tho oro	janization is	not
ı	Webs	ite: ► w	ww.sm	nartmeme.org					-				dule B (Forn	
J				nly one) — X 501(c)	(3) ◀	(insert no.)	4947(a)(1) or	527	9	90-EZ, or	990-PF	=)		550,
	Check			anization is not a sec					aross	receints a	re nor	mally i	not more th	 an
		00 A Form	990-EZ	or Form 990 return is	not require	ed, but if the	organization choo	ses to file	e a ret	urn, be sur	e to file	e a con	nplete return	<i></i>
L	Add I	ines 5b. 6b	o. and 7	b, to line 9 to deterr	mine gross	receipts, if	\$500,000 or mo	re, file Fi	orm 9	90			<u> </u>	
	ınstea	d of Form	990-EZ	7	o g. 000	, , , , , , , , , , , , , , , , , , , ,	4000,000 0, 1110					▶\$	17	77,341.
Pa	ırt I	Reve	nue, E	Expenses, and C	hanges	in Net As	sets or Fund	Baland	ces (See the	ınstru	action	s for Part	: T.)
	1	Contribution	ons, gif	ts, grants, and simil	ar amounts	s received						1	10	0,711.
	2	Program s	service	revenue including go	overnment	fees and co	ontracts				ĺ	2	7	76,617.
	3	Membersh	np dues	s and assessments							ſ	3		
	4	Investmen	it incom	ne								4		13.
	5 a	Gross amo	ount fro	om sale of assets oth	ner than inv	ventory		5 a					•	
	b	Less cost	or othe	er basis and sales e:	xpenses			5b						
Ŗ	С	Gain or (loss) from sa	ale of assets other than inv	ventory (Subtr	ract in 5b from	In 5a)					5 c		
ž	6	Special event	ts and act	tivities (complete applicat	ole parts of Sc	chedule G) If a	ny amount is from ga	amıng, che	ck here		\prod			
RE>E25	а	Gross reve	enue (n	ot including \$		of c	ontributions				_			
Ë	ľ	reported o	-					6a						
	b	Less direc	ct expe	nses other than fund	draising exp	penses		6b						
			· -	rom special events and ad		•	m line 6a)					6c		
	7a	Gross sale	es of inv	ventory, less returns	and allow	ances	•	7a			Ī			
		Less cost		=				7b				1		
	c	Gross prof	fit or (lo	oss) from sales of in	ventory (Si	ubtract line	7b from line 7a)	· · · · · · · · · · · · · · · · · · ·				7 c		
	8	Other revenue	e (descri	be ►			ŕ				Y	8		
			•	dd lines 1, 2, 3, 4, 5	c. 6c. 7c. a	and 8					_′ ▶	9	17	77,341.
				ar amounts paid (atta								10		.,
į				or for members	acii aciicaa	110)					-	11		
E	l	•		ompensation, and en	nnlovee he	nefite					-	12	10	0,273.
P				and other payments			actors				-	13		7,218.
Ņ	ı			utilities, and mainte		macm com	actor 5				-	14		0,200.
EXPEZSES	l		•	ions, postage, and s							-	15	_	3,756.
S				be ► See State							, l	16	3	3,730.
				Add lines 10 through			_ -				′ ⊳ ⊧	17		4,137.
) for the year (Subtr		from line 0	<u> </u>					18		3,204.
Ą			-				•					10		3,204.
A S S E T	19	Net assets	or tund	d balances at beginr n prior year's return)	ning of yea	r (from line	2/ column (A))	(must a	gree v	vith end-of	-year	19	1	8,919.
ŦĘ	20			net assets or fund b		attach evola	nation)				-	20		0, 515.
Ś				d balances at end of							▶	21		2,123.
D ₂	rt II							20 05 000	f.l.	- Farm 000				
<u>, a</u>		Daial	100 31	neets. If Total asset			(D) are \$1,200,00	or mo						
22	Cac	h, savings,	and .a	•	uons for Pa	ait II)			(A)	Beginning 21			(B) End of	
				ivestillerits						31,	665.		3	5,171.
		d and build	-	e ► See State	man+ ?		`			20	941.	23		7 422
		er assets (i a l assets .	uescribi	e see state	ment Z		_,					. 24		7,422.
			: (doso	ribe > Soo Stat	coment '	2	,				606.		5	2,593.
				ribe <a> See Stat <a>Ilances (line 27 of co)				687.			470.
41	146(a33では Uf I	unu Da	manices (mile 27 of co	viuitiii (D) I	must agree	with line 21)	j		40,	919.	27	5	2,123.

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. TEEA0803L 01/30/10

Form 990-EZ (2009)

UII	1990-EZ (2009) Smallmeme				.T02	7585 Page 2
<u>Par</u>	t III Statement of Program Ser	vice Accomplishments	(See the instruction	ns.)	-	Expenses
	is the organization's primary exempt purpose? Edi				(Regi 5017	uired for section (3) and (4)
Pesc	cribe what was achieved in carrying out the cribe the services provided, the number of	e organization's exempt purp	oses. In a clear and co	ncise manner,	orgai	nizations and section (a)(1) trusts; optional
roa	ribe the services provided, the number of ram title.	persons benefited, or other re	elevant information for	eacn	4947 for o	(a)(1) trusts; optional :hers)
	Provide education and tra	ining to young lea	ders through '			
20	(Strategy, Training and O					
			s tor routill th	-a-11111111111111111111111111111111111		
	program and strategy and		. 			
	(Grants \$) If the	is amount includes foreign gr	ants, check here.		28 a	172,830.
29						
					i	Ti.
	(Grants \$) If the	is amount includes foreign gr	ants check here	╌╌╌╌┍╢	29 a	
30	<u> </u>		unto, unot tra			
30						
		-	·			
					20	
-		is amount includes foreign gr	ants, check here		30 a	
31	Other program services (attach schedule					
		is amount includes foreign gr	ants, check here		31 a	
	Total program service expenses (add lin				32	172,830.
Par	t IV List of Officers, Directors,			e even if not comp	pensa	
	(a) Name and add	(b) Title and average hours	(c) Compensation (If	(d) Contributions		(e) Expense account
	(a) Name and address	per week devoted to position	not paid, enter -0)	employee benefit plan deferred compensat		and other allowances
Dor	yle Canning	President & CEO	41,367.			
•			41,30/.	5,5	υυ.	0.
	Williams St	40.00				
	naica Plain, MA 02130					
<u>Pai</u>	rtick Reinsborough	Treasurer	41,367.	5,5	00.	0.
294	40 16th Street. Ste 201	40.00				
Sar	n Francisco, CA 94103					
	ana McDavis-Conway	Director	0.		0.	0.
	40 16th Street. Ste 201	2.00	.		٥.	
		2.00				
	n Francisco, CA 94103					
	ryrose Dolezal	Director	0.		0.	0.
	10 16th Street, Ste 201	2.00				
Sar	n Francisco, CA 94103					
113	yse Hogue	Director	0.		0.	0.
294	40 16th Street, Ste 201	2.00		i		
	n Francisco, CA 94103					
	our K .Modi	Director			_	
		Director	0.		0.	0.
	40 16th Street, Ste 201	2.00				
	n Francisco, CA 94103					<u> </u>
	yka Sadarangani	Director			0.	0.
294	40 16th Street, Ste 201	2.00]		
	n Francisco, CA 94103	<u> </u>				
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Par	TV Other Information (Note the statement requirements in the instrs for Part V.) See Sta	teme	ent	4
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		х
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		Х
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990 T			
á	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35 a		X
ł	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		<u> </u>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
	Enter amount of political expenditures, direct or indirect, as described in the instructions 0.			,,
t	Did the organization file Form 1120-POL for this year?	37 b		<u>X</u>
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38 a		X
ŀ	o If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations Enter			ļ
á	Initiation fees and capital contributions included on line 9			
ŧ	Gross receipts, included on line 9, for public use of club facilities N/A			1
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ► 0., section 4912 ► 0., section 4955 ►			ĺ
	Seeken F01/c1/2) and F01/c1/4) are seeken F01/c1/4) are seeken F01/c1/4) and F01/c1/4) are seeken F01/c1/c1/4) are seeken F01/c1/4) are seeken F01/c1/4) are seeken F01/c1/4) are seeken F01/c1/4) are seeken F01/c1/6) are seeken F01/c1/c1/4) are seeken F01/c1/c1/4) are seeken F01/c1/c1/6) are seeken F01/c1/c1/c1/6) are seeken F01/c1/c1/c1/c1/c1/c1/c1/c1/c1/c1/c1/c1/c1			Ì
ľ	b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 Schedule L, Part I	40 b		x
(Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
(Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 0.			
•	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		x
41	List the states with which a copy of this return is filed None			
42 a	a The organization's books are in care of ► Jen Angel Telephone no ► (510)	910	-562	77
	Located at ► 2940 16th Street #201 San Francisco CA ZIP + 4 ► 94103			·
Ł	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	No
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If 'Yes,' enter the name of the foreign country			
				1
	See the unit values for everythere and films requirements for Form TD C 00 22.1 December 5 Forman Dark and Forman LA			1
_	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts at the Calendar year, did the organization maintain an office outside of the U.S.?	40 -		x
C	If West to the the server of the face of t	42 c		
	If Yes, enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here		▶ □	N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year			N/A
		 -	Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes.'			
DAA	Form 990 must be completed instead of Form 990-EZ	45		X (2000)

Part VI	501(c)(3) o	11(c)(3) organizations or organizations and seed complete the tables	ction 4947(a)(1) no	nexempt charitat	t charitable trusts only ble trusts must answer	y. All sed question	ction ns	
AG Did th	no organization	ongogo in direct or indire	et political composan co	tuutiaa an bahalf af a			Yes	No
for pu	ublic office? If '\	res,' complete Schedule (c, Part I	divides on benan or o	or in opposition to candidate	46		X
		engage in lobbying activit				47		X
48 Is the	organization a	school as described in se	ction 170(b)(1)(A)(ii)?	If 'Yes,' complete Sch	nedule E.	48		X
49 a Did th	ne organization	make any transfers to an	exempt non-charitable	related organization?	•	49a		Х
b If 'Ye	s,' was the rela	ted organization a section	527 organization?	•		49b	1	
50 Comp	olete this table foyees) who eac	for the organization's five h received more than \$10	highest compensated e 0,000 of compensation	mployees (other than from the organization	officers, directors, trustees	and key		
		of each employee paid	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account other allo	nt and	i
None_								
f Total	number of othe	er employees paid over \$1	00,000					
comp		address of each independent conti		 	(b) Type of service	(c) Comp		_
None_		.						
d Total	number of othe	er independent contractors	each receiving over \$1	100 000	<u> </u>			
• 1013.	Trainbor of other		reach receiving ever \$1					_
Sign Here	true, correct, and c	complete Declaration of preparer (ined this return, including acco	empanying schedules and sta all information of which prep	atements, and to the best of my know barer has any knowledge	-	elief, it is	<u>/</u> L
tere	Signature of of	$\boldsymbol{\nu}$	•		Date			V
	► Particl	Reinsborough			Treasurer	 		
	Type or print in	and the				narer's Idon! 4	una N	mbor
Paid	Preparer's signature	Charles T Frich	ie CDA	Date	Sell-	parer's Identif e instructions) 7 x	ying Nu	oef
re-		Cough & Association			employed ► N/	A		
oarer's Jse	Firm's name (or yours if self-	Couch & Associa		· · · · · · · · · · · · · · · · · · ·		1/3		
Jse Only	employed), address, and	6500 Fairmount		, .		N/A	0000	
	ZIP + 4	El Cerrito, CA			Phone no ► (510		$\overline{}$	
nay the IR	o aiscuss tnis r	eturn with the preparer sh	iown above / See instru	CUONS	 	►X Yes		No
MM						Form 990	J-EZ (\2009

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

		neme							20-18	397585	5		
Part	1	Reason for Pu	blic Charity Statu	is (All organizations	must d	comple	te this	part.)	See ii	nstruct	ions		
The o	rgar	nization is not a pri	vate foundation becau	use it is (For lines 1 thro	ugh 11,	check o	nly one	box)					
1		A church, conventi	on of churches or ass	ociation of churches des	cribed in	section	n 170(b)	(1)(A)(i)).				
2	П	A school described	I in section 170(b)(1)(A)(ii). (Attach Schedule	E)								
3	П	A hospital or coope	erative hospital servic	e organization described	ın secti	on 170(b)(1)(A)((iii).					
4	П	A medical research	n organization operate	ed in conjunction with a h	nospital (describe	d in sec	tion 17	0(b)(1)(A	()(iii) Er	nter the hos	spital's	5
		name, city, and sta											
5		An organization op 170(b)(1)(A)(iv). (0	perated for the benefit Complete Part II)	of a college or university	y owned	or oper	ated by	a gove	rnmental	unit de	scribed in s	ection	n
6 7	П	An organization that		governmental unit descri substantial part of its su					t or from	n the ger	neral public	: desci	rıbed
8				art ii <i>)</i> 170(b)(1)(A)(vi) . (Comple	to Part I	н							
9		-		more than 33-1/3 % of its		•	tributions	mamh	archin fa	ec and	Troce racain	te	
J	_	from activities relate investment income	d to its exempt function	ns – subject to certain exce ess taxable income (less	entions. a	and (2) r	no more i	than 33-	1/3 % of	its sunni	ort from aros	55	after
10		An organization or	ganized and operated	exclusively to test for pu	ublic safe	ety See	section	1 509(a)	(4).				
11		more publicly supp	orted organizations of	exclusively for the bene described in section 509(zation and complete lines	a)(1) or	section	509(a)(2	octions o 2) See	of, or car section	rry out tl 509(a)(3	ne purpose). Check t	s of or ne box	ne or k that
		a Type I	b Type II	c Type II	I – Fund	ctionally	ıntegraf	ted		d 🗌	Type III-	Other	r
е		By checking this both than foundation ma 509(a)(2)	ox, I certify that the or anagers and other tha	rganization is not control in one or more publicly s	led direct upportec	ctly or in d organi	directly zations	by one describ	or more ed in sec	disqual ction 509	ified perso (a)(1) or s	ns oth ection	ner
f			received a written def	termination from the IRS	that is a	а Туре І	, Type II	l or Typ	e III sup	porting	organizatio	n,	
g		Since August 17, 2	2006, has the organiza	ition accepted any gift o	r contrib	oution fro	om any	of the f	ollowing	persons	7		
												Yes	No
		(i) a person who below, the go	o directly or indirectly overning body of the s	controls, either alone or upported organization?	together	with pe	rsons d	escribe	d ın (ıı) a	and (III)	11 g (i)		
		(ii) a famıly mem	nber of a person desc	cribed in (i) above?							11 g (ii)		
		(iii) a 35% contro	illed entity of a persor	n described in (i) or (ii) a	bove?						11 g (iii)		
<u>h</u>		Provide the following	ng information about	the supported organization	ons								
	(1)	Name of Supported Organization	(II) EIN	(III) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organizal (i) listed gove	Is the lion in col d in your erning ment?	the organ	rou notify nization in (i) of upport?		on in col	(VII) Amour	t of Sup	port
					Yes	No	Yes	No	Yes	No		_	
								`					
													
otal													

Pai	t II Support Schedule for			Sections 170	(b)(1)(A)(iv) an	d 170(b)(1)(A)	(vi)
	(Complete only if you check	ed the box on line	5, 7, or 8 of Par	t I)				
	tion A. Public Support			1	1		<u>-</u>	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	19	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')							
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge							
4	Total. Add lines 1-through 3							
5	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)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support							
	ndar year (or fıscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009 (f)		(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	vities, etc (see ins	structions)				12	
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth,	or fifth tax year a	s a section s	501(c)	(3)
	tion C. Computation of Pul			11 (6)				
14 15	Public support percentage for 20 Public support percentage from	•	• • • • • • • • • • • • • • • • • • • •	ne 11, column (t)		İ	14 15	<u>%</u> %
16 a	33-1/3 support test – 2009. If the and stop here. The organization	e organization did qualifies as a put	not check the bo	ox on line 13, and rganization	d the line 14 is 33	-1/3 % or m	ore, cl	heck this box
t	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pub	not check a box olicly supported o	on line 13, or 16a rganization	a, and line 15 is 3	3-1/3% or m	nore, c	check this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	ind-circumstance:	s' test, check this	box and stop her	re. Explain i	n Part	IV how
t	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.							
18	Private foundation. If the organi	zation did not che	ck a box on line,	13, 16a, 16b, 17a	a, or 17b, check th	nis box and	see in	structions -
BAA					Sc	hedule A (F	orm 99	90 or 990-EZ) 2009

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

	(Complete only if you che	cked the box on lir	ne 9 of Part I)				
Sec	tion A. Public Support						
	ıdar year (or fıscal yr begınnıng ın)►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	163,205.	109,413.	152,714.	136,517.	100,711.	662,560.
	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	116,627.	120,398.	63,295.	59,370.	76,617.	436,307.
3	Gross receipts from activities that are not an unrelated trade or business under section 513	,	,	,			0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5	279,832.	229,811.	216,009.	195,887.	177,328.	1,098,867.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	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	0.	0.	0.	0.	0.	0.
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line 7c from line 6)						1,098,867.
Sec	tion B. Total Support	<u> </u>	J	<u></u>			1,090,007.
Cale	ndar vear (or fiscal vr heginning in)	(a) 2005	(b) 2006	(c) 2007	(4) 2008	(e) 2009	(f) Total
	ndar year (or fiscal yr beginning in) Amounts from line 6	(a) 2005 279, 832	(b) 2006	(c) 2007 216, 009	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	279,832.	229,811.	216,009.	195,887.	177,328.	1,098,867.
9 10 a	Amounts from line 6 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	279,832. 677.	229,811.	216,009.	195,887. 9.	177,328.	1,098,867. 1,077.
9 10 a	Amounts from line 6 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	279,832.	229,811.	216,009.	195,887.	177,328.	1,098,867.
9 10 a b	Amounts from line 6 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	279,832. 677.	229,811.	216,009.	195,887. 9.	177,328.	1,098,867. 1,077. 0. 1,077.
9 10 a b c 11	Amounts from line 6 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990	677.	229,811. 130.	248.	9.	177,328.	1,098,867. 1,077. 0. 1,077. 0. 1,079.
9 10 a b c 11 12	Amounts from line 6 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	677.	130. 130.	248.	9.	177,328.	1,098,867. 1,077. 0. 1,077. 0. 1,079.
9 10 a b c 11 12 13 14 Sec	Amounts from line 6 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lns 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	677. 677. s for the organiza stop here	130. 130. tion's first, secondercentage	248. 248.	9.	177, 328. 13. 13. a section 501(c)	1,098,867. 1,077. 0. 1,077. 0. 1,099,944. (3)
9 10 a b c 11 12 13 14 Sec	Amounts from line 6 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	677. 677. stop here blic Support Po	130. 130. 130. etion's first, second ercentage (f) divided by line	248. 248.	9.	177, 328. 13. 13. a section 501(c)	1,098,867. 1,077. 0. 1,077. 0. 1,099,944. (3) ▶ □
9 10 a b c 11 12 13 14 Sec 15 16	Amounts from line 6 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20	279, 832. 677. 677. 677. stop here blic Support Polic Support Support Polic Support S	130. 130. 130. ercentage (f) divided by line Part III, line 15	248. 248.	9.	177, 328. 13. 13. a section 501(c)	1,098,867. 1,077. 0. 1,077. 0. 1,099,944. (3)
9 10 a b c 11 12 13 14 Sec: 15 16 Sec:	Amounts from line 6 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pull Public support percentage from 20 public support percentage from 21 tion D. Computation of Inv	279, 832. 677. 677. 677. s for the organiza stop here blic Support Polic 130. 130. 130. 130. ercentage of) divided by line Part III, line 15 ne Percentage	248. 248. 3, third, fourth, of third, column (f)).	9. 9. fifth tax year as	177, 328. 13. 13. a section 501(c)	1,098,867. 1,077. 0. 1,077. 0. 1,099,944. (3) 99.9% 0.0%	
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20	279, 832. 677. 677. s for the organization here blic Support Po 99 (line 8, column 2008 Schedule A, estment Incom or 2009 (line 10c,	130. 130. 130. 130. ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided	248. 248. 3, third, fourth, one 13, column (f)).	9. 9. fifth tax year as	177, 328. 13. 13. a section 501(c) 15 16	1,098,867. 1,077. 0. 1,077. 0. 1,099,944. (3) ▶ □
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and the composition of Pullic support percentage from 20 public support percentage from 20 public support percentage from 20 public support tests – 2009. If the comore than 33-1/3%, check this box	279, 832. 677. 677. s for the organization here blic Support Po 99 (line 8, column 2008 Schedule A, estment Incom or 2009 (line 10c, rom 2008 Schedule organization did not organization did	130. 130. 130. 130. 130. ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 check the box on line The organization	248. 248. 248. 4, third, fourth, of third, fourth, of third, fourth, of third, fourth, of third, and line 15 is equalifies as a pull	9. 9. fifth tax year as more than 33-1/39 blicly supported o	177, 328. 13. 13. 13. 15. 16. 17. 18. 4, and line 17 is no rganization	1,098,867. 1,077. 0. 1,077. 0. 1,099,944. 3) 99.9% 0.0% 0.1% 0.0%
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and thom C. Computation of Pullic support percentage from 25 tion D. Computation of Investment income percentage fill inve	279, 832. 677. 677. 677. 677. 677. 909 (line 8, column 2008 Schedule A, estment Incomor 2009 (line 10c, or 2008 Schedule A) and stop here. The organization did not concern and stop here. The organization did not concern and stop here. The organization did not concern and stop here. The organization did not concern and stop here. The organization did not concern and stop here.	229,811. 130. 130. 130. 130. ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 check the box on line The organization d not check a box here. The organiz	248. 248. 248. 4, third, fourth, of third, fourth, of third, fourth, of third, fourth, of third, and line 15 is qualifies as a pullon line 14 or 19a cation qualifies as	9. 9. fifth tax year as more than 33-1/39 blicly supported on, and line 16 is me a publicly suppo	177, 328. 13. 13. 13. 15. 16. 17. 18. %, and line 17 is no reganization fore than 33-1/3% orted organization.	1,098,867. 1,077. 0. 1,077. 0. 1,099,944. (3) 99.9% 0.0% 0.1% 0.0% xt

Schedule /	(Form 990 or 990	D-EZ) 2009 Si	martmeme			20-1897585	Page 4
Part IV] Supplementa Part II, line 1.	l Information 7a or 17b: an	ı. Complete t ıd Part III. lır	this part to provide ne 12. Provide any	e the explanations in other additional in	required by Part II, lin formation. See instruc	e 10; ctions
				io izi i rovido dilig	other daditional in	TOTTI COO MISUA	<u> </u>
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Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev 4-2009)

Department of the Treasury Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns **Electronic Filing** (*e-file*). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www irs gov/efile and click on *e-file for Charities & Nonprofits*. Name of Exempt Organization Employer identification number Type or print Smartmeme 20-1897585 File by the due date for filing your return See Number, street, and room or suite number. If a P.O. box, see instructions 2940 16th Street #201 instructions City town or post office, state, and ZIP code. For a foreign address, see instructions San Francisco, CA 94103 Check type of return to be filed (file a separate application for each return) Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (section 401(a) or 408(a) trust) Form 5227 X Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 Telephone No ► (510) _ 910-5627 _ _ _ _ If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group. check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 3/15 , 20 11 , to file the exempt organization return for the organization named above The extension is for the organization's return for alendar year 20 _ _ _ or |X| tax year beginning 8/01 , 20 09 , and ending 7/31 , 20 10Initial return 2 If this tax year is for less than 12 months, check reason Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a |\$ nonrefundable credits. See instructions 0. b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit 3b \$ 0. c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) 0. See instructions 3c |\$ Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868	(Rev 4-2009)						Page 2
• If you a	are filing for an Addi	tional (Not Automatic) 3-N	lonth Extensi	on, complete only	y Part II and check	this box	► X
Note. Only	complete Part II if y	ou have already been gra	nted an auton	natic 3-month exte	ension on a previou	usly filed Fori	m 8868
• If you a		matic 3-Month Extension,					·
Part II		Automatic) 3-Month	Extension	of Time. Only	file the original	(no copies	s needed).
	Name of Exempt Organiza	ation				Employer iden	tification number
Type or print	Smartmeme					20-1897	585
File by the	Number street and room	or suite number. If a P O box se	e instructions			For IRS use on	ly
extended due date for filing the	2940 16th St	reet_#201					10
return See instructions	City town or post office s	state and ZIP code. For a foreign a	address see instru	ictions]		
	San Francisc	o, CA 94103		_			
Check type	e of return to be filed	(File a separate applicati	on for each re	eturn)			•••
Form 9	90	Form 990-PF			Form 1041-A	4	Form 6069
Form 9	990-BL	Form 990-T (section 401	(a) or 408(a)	trust)	Form 4720		Form 8870
X Form 9	990-EZ	Form 990-T (trust other	than above)		Form 5227		
STOP! Do	not complete Part II	if you were not already gi	anted an aut	omatic 3-month ex	xtension on a prev	nously filed F	orm 8868.
	oks are in care of 🕒		. .				
Teleph	one No ►_(<u>51</u> 0)_	910-5627	FAX No	-		_	_
If the o	organization does not	have an office or place o	f business in	the United States,	, check this box		▶ 📗
		, enter the organization's					If this is for the
whole grou	up, check this box	► If it is for part of the	ne group, check	this box	and attach a list w	ith the name	s and EINs of all
	the extension is for						
4 I requ	uest an additional 3-i	month extension of time u	ntil <u>6/15</u>	, 20 <u>_</u> 1	L <u>1</u>		
5 For c	alendar year	_ , or other tax year begii	nning <u>8/</u> 0	1 , 20_	$\underline{09}$, and ending $$	_ <u>7/</u> 31	, 20 <u>_ 1 0</u>
		than 12 months, check rea					
7 State	e in detail why you ne	eed the extensionTa	xpayer r	espectfully	<u>requests ac</u>	dditional	l_time_to
gat	her informati	ion_necessary_to	file a c	omplete and	accurate to	ax returi	<u>1</u>
	s application is for Fo efundable credits Se	orm 990-BL, 990-PF, 990- e instructions	Γ, 4720, or 60	69, enter the tenta	ative tax, less any	8a	\$
paym		orm 990-PF, 990-T, 4720, any prior year overpaymen					\$
c Balar with I	nce Due. Subtract lin FTD coupon or, if red	e 8b from line 8a Include quired, by using EFTPS (E	your paymer lectronic Fed	t with this form, o eral Tax Payment	or, if required, depo System) See inst	osit rs 8c	\$
		S	ignature a	nd Verification	n		
Under penaltie correct and co	es of perjury. I declare that I omplete and that I am auth	have examined this form, includin orized to prepare this form	g accompanying s	chedules and statement	ts, and to the best of my	knowledge and b	elief it is true
Signature -		Title	► Presi	dent & CEO		Da	ite ►

FIFZ0502L 03/11/09

Form 8868 (Rev 4-2009)

BAA

2009	Federal Statements		Page 1
Client SMARTMEM	Smartmeme		20-1897585
1/20/11			04 36PM
Statement 1 Form 990-EZ, Part I, Line 16 Other Expenses			
Bank Charges Board Meetings Book Events Communication Depreciation Dues & Subscriptions Fundraising Interest paid Network and Special Events Other Payroll admin fees Postage and shipping Retreats Supplies Travel Unfiled USSF		\$ Total \$	77. 2,152. 1,203. 6,855. 1,305. 16. 3,108. 141. 9,111. 600. 1,308. 310. 3141,305. 5,014. 472. 2,549. 32,690.
Statement 2 Form 990-EZ, Part II, Line 24 Other Assets			
Accounts Receivable Machinery and Equipment Prepaid Expenses and Deferred		\$ 18,935. \$ 1,406. 600. \$ 20,941. \$	15,060. 1,762. 600. 17,422.
Statement 3 Form 990-EZ, Part II, Line 26 Total Liabilities			
Accounts Payable and Accrued		Beginning	Ending 470. 470.
Statement 4 Form 990-EZ, Part V Regarding Transfers Associated wit	n Personal Benefit Contracts		
indirectly, to pay premiums o	ring the year, pay premiums	ct?	No No