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CANNED DEC 17 2012

Form **990**

Department of the Treasury Internal Revenue Service

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)

benefit trust or private foundation)

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

OMB No 1545-0047

2011

Open to Public Inspection

<u>A</u> _	For the	2011 cale	ndar year, or tax year beginning , 2011, and end	ng		, 20
В	Check if	applicable	C Name of organization The Biomimicry Institute		D Employ	er identification number
	Address	change	Doing Business As Biomimicry 3.8 Institute			86-1153859
	Name ch	nange	Number and street (or P O box if mail is not delivered to street address) Room/s	uite	E Telepho	ne number
	Initial ret	um	P.O. Box 9216			406-543-4108
	Terminat	ted	City or town, state or country, and ZIP + 4			<u> </u>
	Amende	d retum	Missoula, MT 59807		G Gross r	eceipts \$ 1,125,626
	Applicati	on pending	F Name and address of principal officer Bryony Schwan	H(a) Is this	group return	for affiliates? Yes V No
			Same as C Above	H(b) Are a	l affiliates i	ncluded? Yes No
<u> </u>	Tax-exer	mpt status	√ 501(c)(3)	If "N	o," attach	a list (see instructions)
J	Website	:► ww	w.biommicryinstitute.org	H(c) Group	exemption	n number ▶
K	Form of o	organization	Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form.	ation 2005	M State	of legal domicile MT
P	art I	Summ	ary			1
	1		escribe the organization's mission or most significant activities.			
Ð		The purp	oses of the Corporation shall be to naturalize biomimicry in the culture by	promoting th	e transfe	r of ideas, designs, and
Activities & Governance		strategie	s from biology to sustainable human systems design.			
Ë						
ove.	2	Check th	is box ▶ ☐ if the organization discontinued its operations or disposed	of more than	25% of	its net assets.
رت مع	3	Number	of voting members of the governing body (Part VI, line 1a)		3	9
Se Se	4	Number	of independent voting members of the governing body (Part VI, line 1b)	4	8
ξ	5	Total nur	nber of individuals employed in calendar year 2011 (Part V, line 2a)		5	2
Ç	6	Total nur	nber of volunteers (estimate if-necessary)—See-Schedule O		6	20
٩	7a	Total unr	elated business revenue from Part ဖြူ-င်စုပြုကြီး (၉) ြုံရှိမြို့ 12		7a	0
	ь	Net unrel	ated business taxable income from Form 990-17 line 34-		7b	0
			100 NOV 2 2012 SS	Prior Ye	ar	Current Year
Revenue	8	Contribut	tions and grants (Part VIII, line 1h) . NOV 1 9 2012		756,991	1,076,110
	9	Program	126,525	39,237		
ě	10	Investme	service revenue (Part VIII, line 2g) nt income (Part VIII, column (A), line 3 (4) and (7d)	1750	81	
Œ	11	Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1.1e).		7957	10,198
	12	Total reve	enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		893,223	1,125,626
	13	Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)			
	14	Benefits	paid to or for members (Part IX, column (A), line 4)			
S	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)		431,152	109,288
nse	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)			2988
Expenses	b	Total fund	draising expenses (Part IX, column (D), line 25) ▶ 157529			. 3
Ω ·	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		287,231	885,219
	18	Total exp	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		718,383	997,495
	19	Revenue	less expenses. Subtract line 18 from line 12	_	174,840	128,131
Net Assets or Fund Balances				Beginning of Cu	rrent Year	End of Year
sets	20	Total ass	ets (Part X, line 16)	1	,000,145	1,157,936
t As	21	Total liab	ılıtıes (Part X, lıne 26)		23,728	53,388
폴큐	22	Net asset	s or fund balances. Subtract line 21 from line 20		976,417	1,104,548
Pa	irt li	Signat	ure Block			
			y, I declare that I have examined this return, including accompanying schedules and state			ny knowledge and belief, it is
true	e, correct,	, and comple	ete Declaration of preparer (other than officer) is based on all information of which prepare	r has any knowle	edge	
		\			1111	3/12
Sig		Signa	ature of officer	C O Dat	e	
Hei	re	130	1 DIR PAUL B. TRIPP, TREASUR	2/2		
		Туро	or print name and title			
Pai	id	Print/Typ	pe preparer's name Preparer's signature D	ate	Check [ıf PTİN
	eparei	r			self-emp	
	e Only	I	ame ►	Firm	's EIN ▶	
	m		ddress ▶		ne no	
May	the IR	S discuss	this return with the preparer shown above? (see instructions)			Yes No
For	Paperw	ork Reduc	ction Act Notice, see the separate instructions.	lo 11282Y		Form 990 (2011)





Form 99	.011)	Page 2
Part d	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	🖎
• 1	riefly describe the organization's mission:	
	he Biomimicry Institute's mission is to naturalize biomimicry in the culture by promoting the transfer of ideas, designs, and	<u> </u>
	trategies from biology to sustainable human systems design	
	lease see Schedule O - Pages 4 to 5	
2	d the organization undertake any significant program services during the year which were not listed on the	
	nor Form 990 or 990-EZ?	⊠ No
3	"Yes," describe these new services on Schedule O. Id the organization cease conducting, or make significant changes in how it conducts, any program	
3		⊠ No
	"Yes," describe these changes on Schedule O.	
4	escribe the organization's program service accomplishments for each of its three largest program services, as mea spenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the analysis and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	ode:) (Expenses \$ 348,378 including grants of \$) (Revenue \$ 34,91 ducation Programs	12)
	thile biomimicry offers us a completely new way of problem solving, few engineers and designers think about turning to na	ture as a
	ource of inspiration. Our educational institutions do not encourage engineers or designers to take biology courses, nor have	
	ologists been trained to apply their field of study to address human problems. The Biomimicry Institute's goal is to change	
	aradigm by training engineers and designers, both within industry and at universities, to look to nature for solutions. Our	
	ducation program is working to integrate biomimicry into our educational system at every level from K-12 schools, colleges	and
	niversities to non-formal venues	
	NIVERSITY EDUCATION	
	ur primary goal with our university education program is to establish the first biomimicry degree programs. Our objectives	ın 2011
	ere to	
	Support, facilitate and promote the development of biomimicry degrees at Biomimicry Affiliate Program universities and re	ecruit at
	Continued on Schedule O - Pages 5 to 9	
4b	ode:) (Expenses \$ 216,241 including grants of \$) (Revenue \$	0)
	skNature (Biomimicry Design Portal)	
	ractitioners of biomimicry design express one consistent need—access to relevant biological information organized by des	
	ngineering function. Innovators working on safer antimicrobials, for instance, can't learn about how nature resists biofilmi	
	e form of snail shells, kelp fronds, and dolphin skin e.g.—all in one place. Until we developed www AskNature org, there wa	
	atalogue of nature's solutions to design and engineering challenges. AskNature is the world's first and only digital library o	
	ature's solutions organized by function and the only resource that can serve as a cross-pollinating tool and collaboration fo	orum
	nong biologists, engineers, designers and other innovators	
	or the last few years we focused our efforts on developing the first beta version of the site, populating it with content, devel	
	ome tools and soliciting feedback from users. In 2011 we began planning a major upgrade of the site. In June, after a nation	· · • • • • • • • • • • • • • • • • • •
	earch, we hired a new AskNature project manager and added additional staff to the team. In 2011 we also greatly improved	
	uality and quantity of content on AskNature adding more than 100 new strategy pages. We also created in-depth case studiontlined on Schedule O - Page 9	es that
40		r \
4c	ode:) (Expenses \$ 57,543 including grants of \$) (Revenue \$ 4,32 and the design Challenge	<u>5</u>)
	or the last two years the Biomimicry Institute has been collaborating with our affiliate universities and other universities to i	dovolon
	e curricula and methodology for a biomimicry design challenge. The Biomimicry Institute facilitated the design process fro	
	prototype and created the interdisciplinary and collaborative design teams of university students and faculty from five sch	
	ne teams collaborated via web tools and conference calls over a semester to solve the design challenge Pacific Outdoor	
	quipment (POE) sponsored the first two design challenges by providing a real-life design challenge and experts in materials	s design
	DE then took the final designs to market Executives from POE told us that the student design teams far outperformed design	
	ey had worked with in the past. For students, the biomimicry design challenges provide them with not only an opportunity	~
	BOUT biomimicry, they actually learn HOW to apply the methodology. Teachers also learn to teach biomimicry in a more pr	
	nd relevant way	
	aving developed the methodology and protocol for these courses, in 2011 we expanded the challenge both in length and so	ope
	ontinued on Schedule O - Page 10	
4d	her program services (Describe in Schedule O)	
	xpenses \$ 160,026 including grants of \$) (Revenue \$ 0)	
10	tel program carries eveneses 702 100	

	0 (2011)			Page 3
Part	Checklist of Required Schedules		Yes	No
٠1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	√	NO
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	\ <u> </u>	х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			T.
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		√
b	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	11b		· ·
С	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	11c		√
d	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	11d		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>✓</u>
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	
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, Parts II and IV	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>·</u>
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 (see instructions)	17		<u>✓</u>
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		<u>·</u>
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		· /
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>√</u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	225	

	90 (2011)		1	Page 4
Part	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		Yes	No
E	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		√
23	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 Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
c b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
	to defease any tax-exempt bonds?	24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 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 Schedule L, Part I	25b		✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	-	→
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<u>√</u> ✓
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	1	
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		<u>√</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<u>*</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		<u>▼</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	/	<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	√
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u>✓</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37	_	<u>✓</u>
	19? Note. All Form 990 filers are required to complete Schedule O	38 Form	990	(2011)
		. 01111		(

Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part **V** Check if Schedule O contains a response to any question in this Part V . Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 2a **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a **b** If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . 3b 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 If "Yes," enter the name of the foreign country: ▶ See instructions for 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? . . . b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b 7 Organizations that may receive deductible contributions under section 170(c). 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 If "Yes." did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c **d** If "Yes," indicate the number of Forms 8282 filed during the year | 7d | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 . . 10a **b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter Gross income from members or shareholders . Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . Section 501(c)(29) qualified nonprofit health insurance issuers. 13 a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which 13b 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

The Biomimicry Institute Form 990 (2011) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year. . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during A.A. the year by the following: The governing body? . Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No **10a** Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c See Schedule O 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? . . .See Schedule O 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official . . . See Schedule O 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure

- List the states with which a copy of this Form 990 is required to be filed None
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply,
 - ☐ Another's website Upon request
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization. ► Bryony Schwan, 140 South 4th Street West, Suite 2, Missoula, MT 59801 Ph 406-543-4108

Form 990 (2011) Page **7**

Part ³ VII	Compensation of Officers, Directors	, Trustees	s, Key Employees,	Highest	Compensated	Employees,	and
	Independent Contractors						

Check if Schedule O contains a response to any question in this Part VII 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

- 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, if any. 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 neither the organization no	r any relate	d org	anız	atıc	n c	ompe	nsa	ted any curren	t officer, director	, or trustee.	
	ı	(C)									
, (A)	(B)	(do not check r					one	(D)	(E)	(F)	
Name and Title	Average hours per	verage box, unless person is both an						Reportable compensation	Reportable compensation from	Estimated amount of	
	week (describe hours for related organizations in Schedule O)	week describe nours for related panizations Schedule control to the schedule c		related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations						
				_		ä				· · · · · · · · · · · · · · · · · · ·	
(1) Janine Benyus		١.			Į						
President	40			✓_			L		146,363	10,838	
(2) David Fox	4										
Vice President	2	✓		<u> </u>							
(3) Mary Hansel											
Treasurer	5	✓	L	✓							
(4) Susan MacCormac											
Secretary	5	✓		✓.							
(5) David Oakey											
Director	5	\	L_								
(6) Joel Makower]							1			
Director	1	\									
(7) Lynelle Cameron]							!			
Director	1	✓									
(8) Cynthia Hester											
Director	11	1					<u> </u>				
(9) Duke Stump											
Director	5	✓									
(10) Bryony Schwan											
Executive Director	56			✓				42,885	69,423	8,901	
(11)											
(12)							_				
(13)									1,		
(14)									<u> </u>		

_	с
שמפש	

Par	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (continu	ued)
•	(A) Name and title	(B) Average hours per week	Position (do not check more that box, unless person is bofficer and a director/tr					n an	(D) Reportable compensation	(E) Reportable compensation from		(F) Estimated amount of
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-M	ons	other compensation from the organization and related organizations
(15)												
(16)												
(17)						-		-				
(18)										-		
(19)												· · · · · · · · · · · · · · · · · · ·
(20)												
(21)						_				_	+	
(22)			-									
(23)											-	
(24)										- .	-	
(25)									-	· · · · · · ·		
1b c	Sub-total				•	 	•	>	42,885		0	19,739
d	Total (add lines 1b and 1c)	not limited					above	► e) wh	42,885 no received mo		5,786 00,000	19,739 of
3	Did the organization list any former off employee on line 1a? If "Yes," complete S	icer, direct						mpl	loyee, or high	est compe	nsated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater tha										
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or ind	ıvıdual 	5 /
Section	on B. Independent Contractors											
1	Complete this table for your five highest of compensation from the organization. Rep year.											
	(A) Name and business addr	ess							(B) Description of se	ervices	((C) Compensation
N/A										-		
2	Total number of independent contractor received more than \$100,000 of compens							the	ose listed abo	ve) who	N. j.	

Page 9

_	990 (20	Statement of Revenue				Page 9
			Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 1f 1.0				
휼	_	and similar amounts not included above 1f 1,0 Noncash contributions included in lines 1a-1f: \$	76,110 254]
Son	9 h	Total. Add lines 1a–1f	. 1,076,110		, ,	
	† · · ·	Business				
Ven	2a	Education Workshops/Speaking Eng 6116	00 22,789	22,789		
æ	b	Online Courses 6116	7,885	7,885		
<u>Vi</u> Ce	С	Student Design Challenge 6116	00 4,325	4,325		
Ser	d	Biomimicry Products 61160	00 4,238	4,238		
Program Service Revenue	e f	All other program service revenue .				
<u> </u>	g	Total. Add lines 2a–2f	▶ 39,237	**	\$	**
	3	Investment income (including dividends, into and other similar amounts)	. ▶ 81			81
	4	Income from investment of tax-exempt bond procee	ds▶	- <u>-</u>		
	5	Royalties	. 10,198	10,198		
		(i) Real (ii) Perso	onal	· 1 × 6.	Berth State	Anna 4.4 1 1 2
	6a	Gross rents .				
	b	Less rental expenses	* ,	7 m 4 7	* 3	
	C	Rental income or (loss)		<u></u>		· · · · · · · · · · · · · · · · · · ·
	7a	Net rental income or (loss) Gross amount from sales of assets other than inventory	er 'X A		* · · · · · · · · · · · · · · · · · · ·	
	ь	Less cost or other basis and sales expenses .				
	c	Gain or (loss)	——————————————————————————————————————			
	d	Net gain or (loss)	>	\$ \$\delta \$\delta \text{\$\delta qquad \text{\$\delta \text{\$\delta \text{\$\delta \text{\$\delta \text{\$\d		
enne	8a	Gross income from fundraising events (not including \$	* * * * * *			
Other Rev		of contributions reported on line 1c). See Part IV, line 18 a	` (
Ę	ь	Less: direct expenses b				
0		Net income or (loss) from fundraising events	D		- No No	
		Gross income from gaming activities. See Part IV, line 19 a	* .		\$0 \$0	* *
	b	Less: direct expenses b Net income or (loss) from gaming activities		*	* * * * * * * * * * * * * * * * * * * *	·
	1 -	Gross sales of inventory, less, returns and allowances a	\$\ \tag{\frac{1}{2}} \ \ta	* * *	.; «	. , ,,, ,
	b	Less cost of goods sold b	*	\$ · · · ·	<i>*</i> · *	
i	c	Net income or (loss) from sales of inventory Miscellaneous Revenue Business	Code			
	44=	iviisceliarieous rievenue Business (- Joue	<u> </u>		4
	11a					
	b					
	C d	All other revenue				
	e	Total. Add lines 11a-11d	•	, -		
	12	Total revenue. See instructions.	1,125,626	40.425		
			1,125,026	49,435		81 5 990 (2044)

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).

	Check if Schedule O contains a respon-	se to any question	in this Part IX		
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				£ * ^;
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16			***	
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	44,678	22,592	16,175	5,911
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			:	
7	Other salaries and wages	46,153			46,153
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,385			1,385
9	Other employee benefits	9,257	775	4	8,478
10	Payroll taxes [7,815	2,027	1,514	4,274
11	Fees for services (non-employees):				
а	Management				
b	Legal	700	700		
С	Acçounting	8,215	5,938	1,010	1,267
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	2,988	* 4 6	and a filter place and	2,988
f	Investment management fees				
9	Other See Schedule O	759,015	661,481	29,398	68,136
12	Advertising and promotion				
13	Office expenses	10,416	5,874	2,449	2,093
14	Information technology	8,074	7,984	40	50
15 16	Royalties		· 		
16 17	Occupancy	57.530	40.704	0.777	
18	Travel	57,526	42,724	3,777	11,025
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	31,281	30,471	515	295
20	Interest				
21	Payments to affiliates	- 500			
22 23	Depreciation, depletion, and amortization .	500 2,396		500	
	Insurance	2,390	,	2,396	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If	, *	·	* "	,
	line 24e amount exceeds 10% of line 25, column			. , , , ,	, , ,
	(A) amount, list line 24e expenses on Schedule O.)	, A.			
а	Communications	6,391	1,622	` · · · · · · · · · · · · · · · · · · ·	4,769
ь	Workers Compensation Insurance	705	1,022		705
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	997,495	782,188	57,778	157,529
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here □ if following SOP 98-2 (ASC 958-720)			5,,,,,,	107,020
	10110 Willing 0.01 00-2 (1100 000-120)				

F	art X	Balance Sheet			raye II
<u> </u>			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	784,042	_1	954,252
	2	Savings and temporary cash investments	199,291	2	199,589
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	15,829	4	4,095
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	^
ts	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		, ,	Sagara Sagara
Assets	7	Notes and loans receivable, net		7	
Ą	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	698	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	,		g • 🐠 • 1
	ь	Less: accumulated depreciation 10b	285	10c	0
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,000,145	16	1,157,936
	17	Accounts payable and accrued expenses	19,519	17	53,388
	18	Grants payable	13,313	18	33,300
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.			
,	I		~ · · · · · · · · · · · · · · · · · · ·	21	*
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	The state of the s
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	-
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	4209	25	
	26	Total liabilities. Add lines 17 through 25	23,728	26	53,388
ses		Organizations that follow SFAS 117, check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.		<u></u> 0	\$ 35,500
Ĕ	27	Unrestricted net assets	264,478	27	320,979
Sak	28	Temporarily restricted net assets	711,939	28	783,569
P	29	Permanently restricted net assets	1,1,7000	29	703,303
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.		× 4	
Š	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ąŝ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
e	33	Total net assets or fund balances	976,417	33	1 104 5 40
Z	34	Total liabilities and net assets/fund balances	1,000,145	34	1,104,548
-	<u> </u>	Total national of and flot abbotto/fund balances	1,000,145	J-4	1,157,936 Form 990 (2011)

Form 9	90 (2011)		Pa	age 12
Par	TXI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			. 🗆
•				
1	Total revenue (must equal Part VIII, column (A), line 12)		1,12	25,626
2	Total expenses (must equal Part IX, column (A), line 25)		99	7,495
3	Revenue less expenses Subtract line 2 from line 1		12	28,131
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		97	6,417
5	Other changes in net assets or fund balances (explain in Schedule O)			
`6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))		1,10	4,548
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII	<u></u>	<u></u>	. 🗸
			Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other			i
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	\$		
•	Con			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? Schedule (∔	1
b	Were the organization's financial statements audited by an independent accountant?	2b	 	1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	}	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	×× -	,,	435
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			,
ŭ	issued on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		 	*
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		 	1
	the Single Audit Act and OMB Circular A-133?	3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	00	+	_
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		For	m 990	(2011)

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.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
The Biomimicry Institute

Employer (dentification number 86-1153859

Pa	rt Reason	for Public Cha	arity Status (All orga	anızatior	ns must o	complet	e this pa	art.) See	instruction	ons.		
The	organization is not	t a private found	ation because it is: (Fe	or lines 1	through ²	11, checl	conly on	e box.)				
1			ches, or association o			ed in se	ction 170)(b)(1)(A)((i).			
2	_		170(b)(1)(A)(ii). (Atta		•							
3			ospital service organiz									
4		earch organizati ne, city, and sta	on operated in conjur	action wit	n a nospi	tai descr	ibed in s	ection 17	'0(b)(1)(A)	(iii). Ente	r the	
5	•	- ·	the benefit of a colle	ege or un	iversity o	wned or	operated	d by a go	overnmen	tal unit d	escrib	ed in
		o)(1)(A)(iv). (Com										
6 7			rnment or governmen receives a substanti						nit ar fra	n 4ha		la l
,)(A)(vi). (Complete Pa		ira anbbi	ort Hom	a govern	illelital u	THE OF ITO	n me ger	nerai p	JUDIIC
8			in section 170(b)(1)(A	-	mplete Pa	art II.)						
9	☐ An organizati	on that normally	receives. (1) more th	an 331/39	% of its si	upport fr	om conti	ributions,	members	ship fees	and	aross
	receipts from	activities relate	d to its exempt func	tions—su	bject to	certain e	xception	s, and (2) no more	e than 30	31/3%	of its
			ent income and unre						on 511 ta	x) from	busine	esses
10		-	after June 30, 1975. S d operated exclusively				-	-	(4)			
11			nd operated exclusively							or to on	rn. ou	ıt tha
•••	purposes of o	one or more pul	olicly supported orga	nizations	describe	d in sect	tion 509(a)(1) or s	ection 50	or to ca 9(a)(2). S	ee se	ction
			describes the type of									00
	a 🗌 Type I				III-Funct					Type II		
е	☐ By checking t	his box, I certify	that the organization	is not co	ntrolled o	directly o	r ındırect	ly by one	or more	dısqualifi	ed pei	rsons
	other than for or section 509		ers and other than on	e or mor	e publicly	support	ed organ	iizations i	described	in section	on 509	(a)(1)
f			a written determinati	on from	the IDS	that it is	a Typo	I Type	II or Tur	سيمالا مي		
•			· · · · · · · ·				a Type	i, type	ii, oi iyp	e in sup	porun	ig □
g	Since August	17, 2006, has t	he organization acce	pted any	gift or co	ontributio	n from a	any of the	9			
	following pers	ons?	-					•				
			indirectly controls, eit					describe	d ın (ıı) ar	nd	Yes	No
			ody of the supported	_						11g(i)		
		•	on described in (i) abo							11g(ii)		
h		-	a person described in ion about the support							11g(iii)		
	Name of supported	(ii) EIN	(III) Type of organization	T	organization	(v) Did	ou notify	(vii)	le the	(mi) A		
1.7	organization	(, 2	(described on lines 1-9	in col (i) li	sted in your	the orga	nization in	organiza	ls the tion in col	(vii) Amount of support		
			above or IRC section (see instructions))	governing document?		col (i) of your support?		(i) organized in the US?				
			, , , , ,	Yes	No	Yes	No	Yes	No			
(A)				İ								
				 				 				
(B)												
(C)												
(D)				-						 .		
(D)												
(E)												
		, *	,			۶.			3"			
Total		I		1	1	*	ı	1	1 1			

18

Schedule A (Form 990 or 990-EZ) 2011 Page 2 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Gifts, grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . 442,042 847,815 889,814 756,991 1.076,110 4,012,772 revenues levied for organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 442,042 847.815 889,814 756.991 1,076,110 4,012,772 5 The portion of total contributions by , Ý (other than each person governmental unit publicly or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 2,774,247 Public support. Subtract line 5 from line 4. 1,238,525 Section B. Total Support (a) 2007 (b) 2008 Calendar year (or fiscal year beginning in) ▶ (c) 2009(d) 2010 (e) 2011 (f) Total Amounts from line 4 442,042 847,815 889,814 756,991 7 1,076,110 4,012,772 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 6,061 4,689 884 10,279 23,199 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). 1,430 1,430 Total support. Add lines 7 through 10 11 4,037,401 Gross receipts from related activities, etc. (see instructions) 12 12 515,199 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 14 30 68 **%** Public support percentage from 2010 Schedule A, Part II, line 14 15 % N/A 16a 331/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test-2010. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2011. 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 \mathbb{K} 10%-facts-and-circumstances test-2010. 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

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support	4,140, 1,10 10	010 110100 001	ott, picaco c	ompioto i dit	/	
	idar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees	(4) 2001	(2) 2303	(0) 2000	(4) 2010	(0) 20	(1) 10141
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise	<u> </u>	-				
	sold or services performed, or facilities		}				
	furnished in any activity that is related to the	1					
3	organization's tax-exempt purpose Gross receipts from activities that are not an						
3	unrelated trade or business under section 513						
_			 		 		
4	Tax revenues levied for the	1	1				
	organization's benefit and either paid				1		
_	to or expended on its behalf .				ļ — — —		
5	The value of services or facilities	1	ļ	ļ			
	furnished by a governmental unit to the]	ĺ			
_	organization without charge	<u> </u>					
6	Total. Add lines 1 through 5			<u> </u>			<u> </u>
7a	Amounts included on lines 1, 2, and 3	}	1				
	received from disqualified persons .						<u></u>
b	Amounts included on lines 2 and 3	ļ					
	received from other than disqualified						
	persons that exceed the greater of \$5,000	j	1]		
	or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b	016 8 100 1 0 0 00000	and the Control of the	an encount to Allegan and	Terres States - Transport - Income	# # # # # # # # # # # # # # # # # # #	
8	Public support (Subtract line 7c from	# / T.		4 4			å.
	line 6.)	36 "	1.		1	3 .2.	8
	on B. Total Support		1	T			
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,	İ					1
	payments received on securities loans, rents, royalties and income from similar sources.						
	•						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						
	· ·						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether	1					
	or not the business is regularly carried on						
12	Other income Do not include gain or	1					
	loss from the sale of capital assets						
40	(Explain in Part IV.)				ļ	 .	
13	Total support. (Add lines 9, 10c, 11, and 12.)						1
4.4	•			المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية	6.645 4		
14	First five years. If the Form 990 is for the organization, check this box and stop he				-		
Cooti	on C. Computation of Public Suppor			· · · · ·	<u> </u>	· · · ·	· · · · · ·
				2 column (fl)		45	
15 16	Public support percentage for 2011 (line 8		-			15	<u>%</u>
16 Section	Public support percentage from 2010 Schon D. Computation of Investment Inc.			<u> </u>	· · · · ·	16	%
17	Investment income percentage for 2011 (_	v line 13 colum	mn (fl)	17	
18	Investment income percentage for 2011 (-		18	<u>%</u>
19a	33 ¹ / ₃ % support tests—2011. If the organi						% and line
130	17 is not more than 331/3%, check this box						
b	33 ¹ / ₃ % support tests—2010. If the organiz		_			•	
U	line 18 is not more than 331/3%, check this i						
20	Private foundation of the organization di						

Schedule A (Form 990 or 990-EZ) 2011

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Part II Line	10 - Other Income
2011 - \$0	
2010 - \$1,4	130 Use of Company Mailing List
2009 - \$0	
2008 - \$0	
2007 - \$0	
Part II Sect	ion C, Line 17 a - 10% facts - and - circumstances test - 2011
The Biomin	nicry Institute (the "Institute") is an organization that qualifies under Section 170 (b)(1)(a)(vi) as a public charity by virtue of
satisfying a	ten percent facts and circumstances test, based on the following
1 10% - of	- support limitation. The Institute's public support is well in excess of the 10% minimum requirement. For 2011, the percentage
ıs 30 68%	
2 Attractio	n of public support. The Regulations provide that
An organiza	ation must be so organized and operated as to attract new and additional public or governmental support on a continuous basis
An organiza	ntion will be considered to meet this requirement if it maintains a continuous and bona fide program for solicitation of funds from
the general	public, community, or membership group involved, or if it carries on activities designed to attract support from governmental
units or other	er organizations described in section 170 (b)(1)(a)(i) through (vi) In determining whether an organization maintains a continuous
and bona fic	de program for solicitation of funds from the general public or community, consideration will be given to whether the scope of its
fundraising	activities is reasonable in light of its charitable activities
The Institute	e conducts regular fundraising events and solicitations. During 2011 alone, for example, the Institute held several fundraising
and educati	onal events including two fundraising events in New York City and San Francisco, and educational workshops in Ohio,
California, N	lew Zealand and Mexico. We also held an educational webinar with 75 participants from 11 countries and provided an on-line
education p	latform used by over 2,000 educators. Institute staff gave dozens of educational talks to audiences across the country. The
Institute als	o solicited funds on its website, by email and regular mail contacting over 11,000 existing and potential donors. The Institute
has submitt	ed grant proposals, as well, to over 20 foundations, and has received during the five year reporting period, grants from 15
foundations	In 2011, the Institute contracted with a fundraising consultant to help develop a more robust and diverse fundraising plan for
year-end 20	11 and 2012 As the Regulation cited above provides, "the scope of its fundraising activities are reasonable in light of its
charitable a	ctivities "

Schedule A, Pg 5 Page 4

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Part II Section	on C, Line 17 a - 10 % facts - and - circumstances test - 2011 (continued)
3. Percentac	ge of financial support. The Regulations provide that "the higher the percentage of support above the 10% requirement of subdivision (i) of this
subparagrap	oh from public or governmental sources, the lesser will be the burden of establishing the publicly supported nature of the organization through
other factors	s described in this subparagraph ."
Public suppo	ort of 30 68% is well in excess of the 10% floor. The Institute expects this number to continue to increase over the next several years.
4. Sources o	f support The Regulations provide that "the fact that an organization meets the requirement of subdivision (i) of this subparagraph through
support fron	n governmental units or directly or indirectly from a representative number of persons, rather than receiving almost all of its support from the
members of	a single family, will be taken into consideration in determining whether an organization is publicly supported "
The Institute	does not rely on, nor is it controlled by, any family or company, like a typical private foundation. The Institute has more than 259 donors and
grantors	
5 Represent	tative governing body The Regulations provide that "the fact that an organization has a governing body which represents the broad interests of the
public, rathe	r than the personal or private interests of a limited number of donors (or persons standing in a relationship to such donors which is described in
section 4946	(a)(1)(C) through (G)) will be taken into account in determining whether an organization is publicly supported."
The Institute	's Board of Directors consists of nine individuals, unrelated to one another, from various professions, who share a common interest in the educational
programs of	the organization These are all volunteer directors who greatly value the work of the Institute.
6. Availabilit	y of public facilities or services, public participation in programs and policies The Regulations provide that.
(a) The fact tl	hat an organization is of the type which generally provides facilities or services directly for the benefit of the general public on a continuing basis
(such as a mu	useum or library which holds open its building and facilities to the public, a symphony orchestra which gives public performances, a conservation
organization	which provides educational services to the public through the distribution of educational materials, or an old age home which provides domiciliary
or nursing se	rvices for members of the general public) will be considered evidence that such organization is "publicly supported "
(b) The fact t	hat an organization is an educational or research institution which regularly publishes scholarly studies that are widely used by colleges and
universities c	or by members of the general public will also be considered evidence that such organization is "publicly supported"
(c) Similarly, 1	the following factors will also be considered evidence that an organization is "publicly supported"
(1)	The participation in, or sponsorship of, the programs of the organization by members of the public having special knowledge or expertise,
	public officials, or civic or community leaders,
(2)	The maintenance of a definitive program by an organization to accomplish its charitable work in the community, such as slum clearance or
	developing employment opportunities, and

Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Part II Section C, Line 17 a - 10 % facts - and - circumstances test - 2011 (Continued)
(3) The receipt of a significant part of its funds from a public charity or governmental agency to which it is in some way held accountable as a condition of
that grant, contract, or contribution
The Institute's primary mission is making the public aware of, and educating the public about, biomimicry The current activities of the Institute, which are open
to the public, include the following
1. Website
2 Digital library of nature's solutions www AskNature org
3. Lectures and workshops
4 Educator trainings
5 Education webinars ,
6 Exhibits
7 Students design challenges
8. Monthly on-line newsletter
9. Biomimicry film called "Second Nature"
Based on the foregoing, the Institute satisfies the facts and circumstances test and qualifies as a public charity.
• Its public support percentage is well in excess of the 10% requirement.
• It is a relatively small organization that receives support from a diverse group of unrelated donors, both individuals and foundations
• It is not controlled by any family, company, or group of families or companies, and it has a broadly public board of directors
• Its public programs are available to anyone, on its website and via conferences and publications

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Biomimicry Institute

Employer identification number 86-1153859

Pai	General Informatio Form 990, Part IV, line		ies Outside	the United States. Com	plete if the organization ans	swered "Yes" to
1	For grantmakers. Does the assistance, the grantees' el grants or assistance?	igibility for th				
2	For grantmakers. Describ assistance outside the Unit		the organizati	on's procedures for moni	toring the use of its grant	-
3	Activities per Region. (The fo	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	nal space is needed) (e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	North America			Program Services	Biomimicry Workshop	1,000
(2)	Sub-Saharan Africa		1	Program Services	Biomimicry Workshops &	10,000
(3)					Education	
(4)						-
(5)						
(6) (7)						-
(8)			· · · · · · · · · · · · · · · · · · ·			
(9)						
(10)						
(11)						<u>. </u>
(12)			· _ ·			
(13)			_			
(14)						
(15) (16)						
(17)						
3a b	Sub-total			* * *	۵	11,000
С	Totals (add lines 3a and 3b)			, , >	, <u> </u>	11,000

Schedule F (Form 990) 2011

Page 2 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 Part II can be duplicated if additional space is needed. Part II

1 (a) Na	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(E		*							
· ②	,	*							
· (2)	,	*							
(4)		\$1.							
(2)		t,							
(9)		7000							
<u>(3</u>		`							
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, , , ,		`			,				
(15)	. /	*							
(16)	•	v							

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

Enter total number of other organizations or entities က

Schedule F (Form 990) 2011

The Biomimicry Institute

Schedule F (Form 990) 2011

· Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance 1 (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 Part III (10) (1 (12) (13) 14 (16) Ξ 8 ල <u>4</u> (2) 9 E 8 6 (15) (17) (18)

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011 Page 4 Part IV **Foreign Forms** ٠ 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes." the organization may be required to file Form 926. Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926). ✓ No Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) . . . ✓ No ☐ Yes Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) ✓ No ☐ Yes Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) √ No Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) ☐ Yes ✓ No Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) ☐ Yes ✓ No

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

Page 5

Part V	Supplemental Information
•	Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)
Part I Line	3, Column (f) - Accrual Accounting Method
Part I Line	3, Line 1 - Biomimicry Education Workshop offered in Veracruz, Mexico Revenues \$5,472 Expenses \$661
Part I Line	3, Line 2 - Biomimicry Workshops & Education Services in South Africa Expenses to Independent Contractor \$10,000
	· · · · · · · · · · · · · · · · · · ·

SCHEDULE J (Form 990)

Compensation Information

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

➤ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Biomimicry Institute

Employer identification number 86-1153859

Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef) Discretionary spending account 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 1b 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? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III. 2. ☐ Written employment contract ✓ Compensation committee ☐ Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? . . Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4h Participate in, or receive payment from, an equity-based compensation arrangement? 4c 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. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. 5a Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. 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 The organization? 6a Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 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 Regulations section 53.4958-4(a)(3)? If "Yes." describe If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2011

Page 2 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

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

Note. The sum of columns (B)(i)-(iii) for	or eact	h listed individual mu	ust equal the total amo	ount of Form 990, Pa	rt VII, Section A, line 1	a, applicable colum	n (D) and (E) amounts	s for that individual.
(B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retrement and		(B) Breakdown c	of W-2 and/or 1099-MIS	3C compensation	(C) Betweenent and		, , , , , , , , ,	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	(U) Nontaxable benefits	(E) Total of columns (B)(I)–(D)	(F) Compensation reported as deferred in prior Form 990
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	8		i					
5	(E)					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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Schedule J (Form 990) 2011

Schedule J (Form 990) 2011

· Page 3

The state of the s	Schedule J (Form 990) 2011
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SCHEDULE L (Form '990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Qepartment of the Treasury Internal Revenue Service Name of the organization

Open To Public Inspection

						, c. 100					
The Biomimicry Institute							86-	11538	59		
Part I Excess Benefit Transactions Complete if the organization a	s (section inswered	1 501(c)(i I "Yes" c	3) and section 501(c)(on Form 990, Part IV,	4) organızatı line 25a or 2	ons only) 5b, or Fo	rm 99	0-EZ,	Part	V, line	40b	
1 (a) Name of disqualified persor	1			(b) Description	of transact	ion				(c) Cor	rected?
	'			(b) Description	- Cr transact					Yes	No
(1)		_									<u> </u>
(2)											
(3)						-		_			<u> </u>
(4)											
(5)			- 		···					<u> </u>	
(6) 2 Enter the amount of tax imposed	on the	raaniza	tion managers or dis	audified pe	roope du	ring t	ho vo			L. <u></u>	
							-				
3 Enter the amount of tax, if any, on I								► \$ ► \$			
3 Effective amount of tax, if any, or i	1116 Z, ab	Ove, rem	induised by the organ	ization .	•		!	Ų	·—		
Part II Loans to and/or From Intere	sted Per	rsons.							_		
Complete if the organization a			n Form 990, Part IV,	ine 26, or Fo	orm 990-l	EZ, Pa	ırt V, I	ine 38	3a.		
(a) Name of interested names and purpose	(h) Loon	to or from	(c) Original	(d) Polon	an dua	(2) 12 .	default?	ff An	proved		
(a) Name of interested person and purpose		anization?	principal amount	(d) Balan	ce due	(e) III (Jelaull /	by bo	oard or		ritten ment?
								comm	nittee?		
	То	From				Yes	No	Yes	No	Yes	No
(1)											
(2)											
(3)											
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(10) T-1-1	i		> \$	<u>. </u>		X23850X33		M ER AND	Table 1	107387 000	1555 T. 15-16
Total							SAY	1,200			***
Complete if the organization a				ine 27.							
	· · / · · · · · · · · · · · · · · · · ·		between interested person		(-)						
(a) Name of interested person	ירו (ט)	eiationsinp	organization	rand the	(C) /	Amount	and typ	pe of as	ssistan	ce	
(1)			· · ·						_		
(2)											
(3)				1		_	-				
(4)			··· · · · · · · · · · · · · · · · · ·								
(5)											
(6)											
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(8)			,								
(9)			-								
(10)											

Part IV Business Transactions Involving Interested Persons.

Complete if the organization an	swered "Yes" on Forn	n 990. Part IV. I	line 28a, 28b, or 28c.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	(e) Sharing of organization's revenues?	
					Yes	No	
(1)	The Biomimicry Group, Inc (BGI)	Co-Owned by 2 Officers	2,423	BGI pd TBI for Sale of Assets		1	
(2)	The Biomimicry Group, Inc (BGI)	Co-Owned by 2 Officers	3,002	BGI pd TBI for Reimb. Expenses		1	
(3)	The Biomimicry Group, Inc. (BGI)	Co-Owned by 2 Officers	10,198	BGI pd TBI for Lease of Assets		1	
(4)					T		
(5)	The Biomimicry Group, Inc. (BGI)	Co-Owned by 2 Officers	17,663	TBI pd BGI for Reimb. Expenses		1	
(6)	The Biomimicry Group, Inc. (BGI)	Co-Owned by 2 Officers	484,945	TBI pd BGI for Professional Serv.		1	
(7)	The Biomimicry Group, Inc. (BGI)	Co-Owned by 2 Officers		TBI pd BGI for Facilities & Equip.		1	
(8)						 -	
(9)					T		
(10)		,			†		

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions). Part IV. Line 1 - 7, Column (b) - Regarding The Biomimicry Group, Inc (BGI) and The Biomimicry Institute (TBI) Relationship: The Biomimicry Group's mission is to be a global leading source for creativity and leadership training in biomimicry. The Biomimicry Group ______ is a Delaware C Corporation with majority ownership by Janine Benyus (TBI Board President). In addition for the first 9 months of the year Bryony Schwan (TBI Executive Director) owned 14.4% in the company until selling her non-vested shares on October 1, 2011. As of October 1, 2011 she owned 5.8%. On October 1, 2011 she also resigned from the Biomimicry Group's Board of Directors. As the two entities' missions are greatly aligned, in 2010 The Biomimicry Group and The Biomimicry Institute entered into a Services Agreement to better meet The Biomimicry Institute's educational objectives, further its exempt activities, and fulfill its broader mission to naturalize biomimicry in the culture by promoting the transfer of ideas, designs, and strategies from biology to sustainable human systems desian. The Biomimicry Group provides Programmatic and Administrative Services to The Biomimicry Institute pursuant to the Services Agreement signed October 1, 2010. Included in the Administrative Services BGI provides to TBI are facilities and equipment use and all overhead costs; such as liability insurance, telephone and internet, general office supplies, and shared software and internet subscriptions. In addition, BGI _____ signed a Master Licensing Agreement with TBI. This agreement allows BGI to license intellectual property, such as educational materials developed by TBI, from TBI at fair market value. Part IV. Line 1 - Sale of Assets Transactions **Biomimicry Group purchased Educational music CDs from TBI** Biomimicry Group purchased assets from TBI at book value which was used to determine fair market value. Part IV. Line 2 - BGI reimbursed TBI for expenses Reimbursement payments made to TBI for miscellaneous BGI related expenses

Schedule L	(Form 990 or 990-EZ) 2011				F	age 2
Part IV	Business Transactions Invo Complete if the organization a	Iving Interested Persons.) Part IV. line 28a 3	28b. or 28c		
<u></u>	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
					Yes	No
(1) N/A						
(2)						<u> </u>
(3)						
<u>(4)</u>				-		
(5) (6)						
(7)						
(8)						
(9)						
(10)		2	1 - 2 - 2 - 7	D: 0		
Part V	Supplemental Information (Complete this part to provide	Continued from S additional information for res	chedule L, sponses to questior	Pg 2 is on Schedule L (see instruction	ns).	
Part IV Lii	ne 3 - Lease of Assets					
Payments	made to TBI from BGI for the lease of TBI	's educational materials to BGI acc	ording to the Master Lic	ense Agreement schedule		
Part IV Lii	ne 5 - TBI reimbursed BGI for expenses					
Reimburse	ement payments made to BGI for miscell	aneous TBI related expenses such a	as direct TBI travel expe	nses		
			······			
Part IV Lii	ne 6 - TBI paid BGI for Professional Service	es				
Payments	made to BGI for BGI providing Programn	natic and Administrative Services t				
Part IV Lir	ne 7 - TBI paid BGI for Leasing Facilities					
	made to BGI for BGI providing facilities, 6	equipment and other overhead to	TRI according to the Ser	ovices Agreement		•
				^		
				·		
				·		
			·			

SCHEDULE O (Form'990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

The Biomimicry Institute	86-1153859					
Form 990, Part I Line 6 - Number of Volunteers						
In 2011, 20 volunteers donated their time to The Biomimicry Institute working on various projects for AskNature and Educational Programs						
They worked a total of 490 hours combined						
Form 990, Part III Line 1, 4a, 4b, 4c, 4d (Continued) - Please See Program Service Accomplishments S	chedule O, Pages 4 to 11					
·						
Form 990, Part VI Section A, Line 2 - Business or Family Relationship of Officers, Directors, Etc						
Janine Benyus and Bryony Schwan are co-owners at the Biomimicry Group, Inc. The Biomimicry Group, Inc. is a Delaware. C corporation						
where Janine Benyus (Biomimicry Institute's Board President) owns a majority of shares and Bryony Schwan (Biomimicry						
Institute's Executive Director) is a minority shareholder. Therefore, The Biomimicry Group and The Biomimicry Institute are related entities						
and more information about their relationship is provided on Schedule L						
Form 990, Part VI Section B, Line 11b - Form 990 Review Process						
The 990 is reviewed by the Executive Director, the Institute's Attorney, and provided to the full board for review before filing						
A formal policy did not exist in 2011, but has been drafted and approved prior to the 2011 990 filing						
Form 990, Part VI Section B, Line 12a-c · Written Conflict of Interest Policy						
We have a written conflict of interest policy for all directors, officers and trustees requiring annual disc	closure of any conflicts of interest.					
Farm 000 Port W. Soction B. Line 12. Whitetle Player Policy						
Form 990, Part VI Section B, Line 13 - Whistle Blower Policy						
A formal policy did not exist in 2011, but has been drafted and approved for 2012 prior to the 2011 990	filing					
Form 200 Part VI. Spoton B. Line 14. Decument Detection & Destruction Reliev						
Form 990, Part VI Section B, Line 14 - Document Retention & Destruction Policy						
A formal policy did not exist in 2011, but has been drafted and approved for 2012 prior to the 2011 990	niing					

Employer identification number

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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The Biomimicry Institute 86-1153859 Form 990, Part VI Section B, Line 15 a - Compensation Review & Approval Process for CEO, Exec. Dir or top Mngmt A committee of the Board of Directors reviewed and recommended the compensation for the Executive Director 'The committee used data from the 2010 GuideStar Nonprofit Compensation Report. In addition, the board committee comprised their own data from like-minded organizations and positions Form 990, Part VI Section B, Line 15 b - Compensation Review & Approval Process for Officers & Key Employees During the annual budget process, the Executive Director reviews the compensation for each staff member leased from BGI who is expected to work on any TBI projects in the coming budget cycle. That review incorporates the Executive Director's judgment of the skills, education, and experience needed to accomplish TBI projects. The Executive Director also compares the salary rates with third party pay scale data The result of this review is included as part of the budget and narrative provided to the board of directors for approval Form 990, Part VI Section C, Line 19 - Other Organization Documents Publicly Available Governing documents, policies, and financial statements are made available to the public upon request. The 990 is also available on our website Form 990, Part VII Section A, Line 1 a - Compensation Explanation Janine Benyus - Biomimicry Institute Board President - received from The Biomimicry Group \$146,363 in wages, \$6,000 tax deferred 401k employer contributions, and \$4,838 in employer health insurance benefits Janine Benyus worked 2080 hours for The Biomimicry Group Of those 2080 hours, 481 hours were leased back to The Biomimicry Institute according to The Biomimicry Group-Biomimicry Institute Services Agreements Bryony Schwan - Biomimicry Institute Executive Director - received \$42,885 in wages from The Biomimicry Institute and received \$1,287 in tax deferred Simple IRA employer contributions from The Biomimicry Institute. She worked 2000 hours as a salaried employee for The Biomimicry Institute between January and September 2011 Bryony Schwan received \$69,423 in wages from The Biomimicry Group and received \$2,777 in tax deferred 401k employer contributions from The Biomimicry Group. She also received \$4,838 in employer health insurance benefits from The Biomimicry Group.

Employer identification number

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

▶ Attach to Form 990 or 990-EZ.

Open to Public

The Biomimicry Institute 86-1153859 Form 990, Part III Line 1 - About biomimicry Efforts to address climate change, consumption, pollution, deforestation, poverty, disease and the myriad other issues that threaten the planet have to date been primarily reactive and wholly insufficient. The strategies we've relied on to provide food, water, energy, shelter, and comfort to a growing population are now seen as compounding rather than solving the problems For example, typical industrial technologies usually involve adding more energy or materials to solve an engineering difficulty, whereas insects, plants, birds, and other animals use elegant design and information to do more with less. Their solutions are built into the structure and organization of their body parts, into their physiology and behavior, and into their ecosystem-level connections. Instructively, they have managed to meet their needs while creating and optimizing, on a planetary level, the conditions conducive to life Biomimicry is a new science that studies nature's best ideas then abstracts the deep design principles, and then imitates these designs and processes to solve human problems. Biomimicry is a turnaround strategy for our species, a way for humans to fit in and flourish on this planet by emulating life's 3 8 billion years of brilliant designs and strategies. Learning from nature has become a revelation in the sustainability and innovation worlds, beginning with the publication of Janine Benyus' seminal book Biomimicry. Innovation Inspired by Nature and the development of the not-for-profit Biomimicry Institute The mission of the Biomimicry Institute is to naturalize biomimicry in the culture by promoting the transfer of ideas, designs, and strategies from biology to sustainable human systems design. Over the past 6 years, we have developed the practice of nature-inspired innovation and introduced it to the world. We've reached hundreds of thousands through TED talks, feature films and documentaries, and media such as Time, Newsweek, Forbes, Fortune, and Wired With an emphasis on education, the Biomimicry Institute has created a network of university affiliates who have established biomimicry courses and are working towards developing biomimicry degree programs at prestigious schools of engineering, architecture, and design in the US, Canada, and Mexico. In 2008, we created AskNature, a "Google of Nature's Solutions" where biomimicry innovators can consult nature to solve problems and connect with other biomimics. We've also cultivated the next generation of biomimics by teaching K-12 teachers, by partnering with zoos, nature centers, museums, and aquariums, and by supporting children's authors and songwriters to create books and an award-winning album The response to our efforts and the popularity of this methodology continues to amaze us. For many people, learning about biomimicry is a transformational event—some become the champions within their organizations, hiring us to train their people, while others decide to open

a biomimicry nonprofit in their own country Thanks to our position as thought leaders (and the primary developers of the meme) people

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number The Biomimicry Institute 86-1153859 Form 990, Part III Line 4 a - Program Service Accomplishments (Continued) UNIVERSITY EDUCATION 2 Biomimicry Education Summit We hosted our 5th Annual Biomimicry Education Summit in June in Cleveland, Ohio The summit was a great success. Conference surveys indicated an overwhelming appreciation of the event "With all of the challenges our global community faces, biomimicry is daily becoming a tool of greater importance - to our natural resources, our businesses and communities This conference is THE most valuable learning venue for professionals and students becoming professionals - to gain the skills and networks needed to apply biomimicry effectively and efficiently -- Margo Farnsworth, adjunct professor at Lipscomb University In conjunction with the Summit, we also collaborated with Biomimicry NEO (NE Ohio) on a regional biomimicry networking event featuring Erin Meezan, VP of Sustainability at Interface Carpets, who spoke about how biomimicry has influenced the company at all levels 3 Train the Trainers Workshop In 2011, we have organized a train-the-trainer workshop for educators in collaboration with Iberoamericana University, our biomimicry affiliate in Mexico City 30 participants including biologists and architects from three additional universities attended "My attendance to the Biomimicry Veracruz Workshop was one of the best decisions I have taken in a long time. The workshop participants, location and direction from teachers created ideal conditions in which to learn, understand and apply methodology in a concise and profound manner Many people have been inspired by nature before, yet Biomimicry will be a design tool, which will allow us to deepen our understanding of the world which surrounds us, enabling our professional practice to become cutting edge, rooted in profound respect of nature " The Biomimicry Institute also sponsored a daylong intensive workshop on biomimicry education in conjunction with the annual Bioneers conference in California. The workshop was held at the California Academy of Sciences in San Francisco. In 2011, we also hosted our first Biomimicry in Higher Education Webinar with 75 participants from eleven countries and provided a venue for biomimicry educators to share their experiences, as well as an opportunity to publish on the topic of biomimicry education. Presentation topics ranged from teaching biology from a functional perspective and creating biomimicry PhD programs, to teaching biomimicry in the context of engineering design and transferring concepts from biology to end-of-life disassembly in industrial design. The Proceedings are available in PDF format

on our website

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
The Biomimicry Institute	86-1153859
Form 990, Part III Line 4a - Program Service Accomplishments (Continued)	
K-12 EDUCATION	
All children have an innate love and fascination for the living world, but unfortunately our educational ins	titutions tend to create conceptual
divisions between nature and science/technology, often leaving children less inspired and creative at the	end of their education than when
they started Biomimicry reconnects nature, science, and technology, and does so in a way that inspires a	and empowers young people to
better meet the challenges of the modern world.	
In the classroom, curriculum around biomimicry supplies excellent material for integrated lea	arning and problem based learning
The solution centered focus provides hope-filled explorations of environmental science's oth	erwise complicated and troubled
conclusions Hilary Staples, Science Department Chair for San Domenico High School	for Gırls
Young people who learn about biomimicry and choose a career in engineering, architecture, chemistry or	any other design field will
proactively seek degree programs that engage in a multidisciplinary approach that combines biology and	design The purpose of our
biomimicry K-12 program is to inspire and engage young people in biomimicry through their teachers before	ore they choose a career path
By helping young people view nature with a new sense of wonder and respect, they are more likely to des	ign innovatively and sustainably
ın their design careers, and care for the environment no matter what kind of profession they ultimately cho	00se
To this end, the Biomimicry Institute has developed K-12 curricula offerings for elementary, middle and hi	gh school grades which are
available to teachers on our website. We have also created the first online course for K-12 teachers and of	fer teachers pedagogical
approaches to teaching biomimicry in the classroom. Our objectives for our K-12 program in 2011 were to	
1 Expand K-12 curricula including creating lab-based lesson plans that meet National Science Education	Standards and AAAS Benchmarks
and illustrate to high school and first-year college students how chemistry that happens in the natural wor	ld can be applied to solving
human challenges, while being low-energy and using benign materials and processes	
2 Increase access to the on-line biomimicry course for K-12 teachers through our education network and	other venues, and pursue its
accreditation beyond the State of New York to other states and abroad	
3 Launch a Biomimicry Youth Challenge (BYC) for K-12 students	
1 K-12 curricula In 2011, we have completed four new lesson plans on sustainable chemistry inspired by	nature, the very first lesson plans
of this kind that we are aware of The lesson plans are centered around an original lab activity illustrating o	our first (of six) learning themes,
namely, how raw industrial materials are acquired by other organisms without causing negative environme	ental harm Specifically, the lab
illustrates how corals manufacture calcium carbonate, a major industrial material used in concrete, and ho	w humans can, by drawing from
coral chemistry, also manufacture this construction material without mining and at ambient temperatures	(conventional concrete

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Employer identification number

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The Biomimicry Institute 86-1153859 Form 990, Part III Line 4 a - Program Service Accomplishments (Continued) K-12 EDUCATION manufacturing, in contrast, results in open-pit quarries and is responsible for 5-7% of the world's carbon dioxide emissions). The lab procedure demonstrates to students an alternative way to think about doing chemistry sustainably by drawing inspiration from nature The lesson plans are designed for use by middle-school, high-school, and college students. There is even a home school version of the lab, which can be conducted in a kitchen using common ingredients found in pet and grocery stores 2 On-line Biomimicry Course for K-12 Teachers Our online professional development course continues to receive positive reviews Our accreditation now extends beyond the State of New York to Montana and Wyoming. We are currently seeking accreditation in other states including Arizona and Texas 3 Biomimicry Youth Challenge 2011, we launched the Biomimicry Youth Challenge (BYC), to empower both teachers and students to put learning into practice through a project-based, international contest. Contests have several benefits. For one, they give teachers a context through which to engage their students more deeply in learning about biomimicry. Contests motivate students, which often results in students doing their best work. Second, the BYC gives students an opportunity to practice what they've learned and take initiative in designing something inspired by nature. Studies show that project-based learning has far greater impact than more passive educational experiences And third, the BYC gives youth educators a reason to share their experiences, challenges, and successes in biomimicry education with us and we need this critical feedback to improve our curricula. Winners for the challenge included the upper elementary class of the Northampton Montessori in Massachusetts (the class created their own musical from our Ask the Planet music CD), a nine year-old who tested the relative strength of architectural elements found in orb-weaving spider webs against conventional architectural elements, and a high school student who conducted original biological research and discovered a non-toxic chemical found in geraniums that reduces a broader range of agricultural pests than previously realized OTHER EDUCATIONAL ENDEAVORS & ACCOMPLISHMENTS Non-formal Education Our objective is to find ways to introduce biomimicry into the culture as fast and as effectively as possible. As such, our primary focus has been educating teachers so they in turn can teach students in classrooms across the globe. At the same time we recognize the importance of educating other change makers and the general public. Informal education initiatives offer unique methods and opportunities to do this

We find collaborative opportunities where we can leverage the most exposure for the least amount of drain on our limited resources

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization The Biomimicry Institute	Employer identification number 86-1153859
· ·	80-1153859
Form 990, Part III Line 4 a - Program Service Accomplishments (Continued)	······
OTHER EDUCATIONAL ENDEAVORS	
To date we have	
•Produced a children's music CD called Ask the Planet to teach children about biomimicry. The album has	s since won three major awards
the iParenting Media Best Products of 2009 Award, the 2009 Parents' Choice Award, and the 2009 Creative	Child Magazine Preferred Choice
•Installed the world's first biomimicry nature interpretive trail in collaboration with the City of Missoula, Mo	ontana Fish & Game Department
and other partners	
•Helped launch a one-year biomimicry youth design challenge called the Kids Science Challenge (www.kid	dssciencechallenge com)
•Collaborated with the Montana Natural History Center to expose young students every year to biomimicry	y through their visiting naturalist
program	
•Consulted with the Monterey Bay Aquarium to help them establish a program about biomimicry for their	250-person auditorium, called
"Whales to Windmills Inventions Inspired by the Sea"	
•Collaborated with the Marine Science Institute in California to develop a new program that will focus on b	iomimicry
•Provided educational materials about biomimicry to the New York Hall of Science for a major new initiative	e called "Teachers Try Science,"
a new social environment for teachers that incorporates environmental engineering and design lesson pla	ns that help teachers incorporate
the best kinds of approaches to teaching	
•Collaborated with San Diego Zoo to create on several biomimicry programs. The zoo has now incorporate	ed biomimicry into their
programming at multiple levels, from hosting an annual conference and biomimicry-themed tours to works	shops for educators
•Developed content for several public exhibits including the Harvard Graduate School of Design, the Green	n Living Show, the Museum of
Art in Mexico City, and the Center for Sustainable Excellence (ICSE) in Eindhoven, the Netherlands	
Form 990, Part III Line 4 b - Program Service Accomplishments (Continued)	
ASKNATURE (BIOMIMICRY DESIGN PORTAL)	
go deeper into some of the biomimetic products being developed or on the market. These in-depth case st	udies help educators show
students the entire process of doing biomimetic design. We have also added 55 new biomimetic products	to the site and more photos to the
strategy pages Thanks to volunteers, strategy pages with inspiring photos have increased from 57% to 80	% (Finding good photos
at little or no cost is becoming increasingly difficult). AskNature was a finalist for the prestigious INDEX. A	ward 2011 because of its
importance to sustainable design through biomimicry	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

20**11**

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

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Employer identification number

The Biomimicry Institute 86-1153859 Form 990, Part III Line 4 c - Program Service Accomplishments (Continued) Student Design Challenge We also shifted the focus of the design challenge to an issue with a greater social and environmental benefit—climate change. Our 2011 international Student Design Challenge attracted 116 entries from 25 countries with 50 teams actually completing eligible projects The winning team created a self-cooling building (Fast Company A Self-cooling Desert Dwelling Inspired by the Lowly Snail) A team from the Schulich School of Engineering, University of Calgary, received additional funding from Schulich to present their heating system design at a conference in Europe. A team from Lipscomb University, one of our Biomimicry Affiliate schools, received \$5,000 in angel funding to build a prototype of their hydroponic farming system that uses old grain silos. A University of Massachusetts team received \$10,000 in venture funding from the Highland Capital Venture Summer Incubator Space to develop their water collection system Form 990, Part III Line 4 d - Program Service Accomplishments (Continued) OTHER PROGRAMS Regional Biomimicry Networks - The demand and interest in biomimicry continues to grow as people all over the world explore how biomimicry can inform and transform their regional economies and societies to become more resilient and ecologically aligned. The Biomimicry Institute works with leaders in various regions to help develop regional biomimicry networks. This strategy is essential for the discipline of biomimicry to spread and take root in our culture. Our work is to keep these networks in touch with one another, provide them with the very best tools to do their jobs. Biomimicry regional networks are developing in South Africa, Northeast Ohio, The Netherlands, Texas, Oregon, Washington, California, Canada, Mexico and Japan Here is a summary of what three key networks are doing in their regions Biomimicry NEO Biomimicry NEO helped organize our annual Education Summit in Cleveland and has played an important role in supporting the development of biomimcry degree programs at Ohio universities. They have also developed a social media platform for serving current members and attracting new ones http://www.biomimicryneo.org/ Biomimicry South Africa Under the direction of a chemical engineer and graduate of our first two-year certificate program, Biomimicry South Africa (SA) has assisted the Cape Peninsula University of Technology in developing a 5-week biomimicry module for 3rd year design students and organized two biomimicry training workshops in collaboration with the Johannesburg Zoo and the Two Oceans Aquarium

Biomimicry SA has also trained field guides (game rangers) in collaboration with the Field Guides Association of South Africa with the

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization The Biomimicry Institute	Employer identification number 86-1153859
Form 990, Part III Line 4 d - Program Service Accomplishments (Continued)	
OTHER PROGRAMS	
intent that game rangers share biomimicry case studies with tourists. Biomimicry SA also runs numerou	s networking events and has a
newsletter that reaches over 500 subscribers http://biomimicrysa.co.za/	
Biomimicry Netherlands. Biomimicry Netherlands (NL) has formed its own non-profit organization and is	now working to develop a
biomimicry initiative for the Dutch government Biomimicry NL worked with the Biomimicry Institute to d	
visited biomimicry exhibition at Dutch Design week BiomimicryNL created their own website for serving	
new ones throughout Europe http://www.biomimicrynlorg/en/	Janus Reductions and academy
Communications	
In 2011, the Biomimicry Institute continued to produce a monthly e-newsletter and distributed the biomim	nicry film "Second Nature" to
schools, universities and other institutions around the globe. Staff continued to give lectures and worksh	
For example, the Bioneers conference in California, the Net Impact conference, the 8th Annual Business	
Institute's executive director gave a keynote lecture at an innovation conference at the leading university	
In 2011, Janine Benyus, co-founder and President of the Biomimicry Institute's Board of Directors, met w	ith the head of Government
Services Administration (GSA) and several other top administration officials in March to discuss how bio	mimicry may be applied
to sustainability challenges within the federal government. Janine also gave a keynote lecture at Presider	nt Obama's inaugural Green Gov
conference, the Clinton Global Initiatives in New York, the B4E Climate Summit in London, the 15th Annu	al Green Chemistry and
Engineering Conference in Washington, D.C., the Industrial Green Chemistry World Symposium in India,	materiO [sic] in Prague, the District
of Columbia's Department of Environment, the Nobel Laureate Symposium in Stockholm and to various	groups in Japan
·	

SCHEDULE R (Form 990)

Part

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

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See separa
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to Form
▶ Attach

Open to Public Inspection Employer identification number 201

OMB No 1545-0047

86-1153859 Department of the Treasury Internal Revenue Service
Name of the organization
The Biomimicry Institute Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity		(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(6)						
(4)						
(5)						
(9)						
Part II Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during t	izations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had during the tax year.)	rganization an	swered "Yes" to	Form 990, Parl	IV, line 34 becau	ise it had
		(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
4						Yes No
(1)						
(2)		i				
(6)						
(4)						
(5)						
(9)						
(Δ)						
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No	Cat No 50135Y		Schedule F	Schedule R (Form 990) 2011

The Biomimicry Institute

Schedule R (Form 990) 2011

Schedule R (Form 990) 2011											. Page 2
Part III. Identificat because it	Identification of Related Organizations Taxable as a Partnership (Complete if 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.)	tions Ta	axable as a Part ations treated as	nership ((a partners	Somplete if the	ne organ ne tax ye	ization ansv ar.)	vered "Yes	" to Form 990,	Part IV, line	1
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	ant Share ated, ind d, from er er	Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(i) General or of managing partner?	(k) Percentage ownership
(3)								Yes No		Yes No	
(1)					-						
(2)											
(6)											
(4)											
(5)											
(9)											
(2)											
Part IV Identificat		itions Ta	axable as a Corporganizations trea	poration c	or Trust (Con corporation o	nplete if ir trust d	the organiz	ation answ x year.)	ered "Yes" to F	orm 990, Pe	π !V,
Name, address,	(a) Name, address, and EIN of related organization		(b) Primary activity	Ą	(c) Legal domicile (state or foreign country)	Direct	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) The Biomimicry Group, Inc P O Box 8782, Missoula, MT 59807	up, Inc soula, MT 59807		Professional Biomimicry		DE	N N A	O	C Corp	N/A	N/A	N/A
(2) FEIN 27-1836345			training/consulting srvcs	rvcs							
(6)					11.						
(4) Biomimicry Guild, LLC	C					-					
321 E Broadway, Helena, MT 59601	ena, MT 59601	B	Biomimicry Consulting		MT	N/A	S	S Corp	N/A	N/A	N/A
(5) FEIN 20-2535302											
(9)											
(2)											
		-							Š	Schedule R (Form 990) 2011	n 990) 2011

), Part IV, line 34, 35, 35a, or 36.)
	(Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)
	ganizations (Complete if the orgar
orm 990) 2011	Transactions With Related Org
Schedule R (F.	Part V

Note: Complete line in any entity is listed in Parts II, III, or IV of this schedule. 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?	related organizations listed	in Parts II–IV?	Tes
 a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity b Gift grant, or capital contribution to related organization(s) 			19
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · ·	10 2
d Loans or loan guarantees to or for related organization(s)			1d /
e Loans or loan guarantees by related organization(s)			. Te
f Sale of assets to related organization(s)			X 14 X
g Purchase of assets from related organization(s)			+
			£ ×
i Lease of facilities, equipment, or other assets to related organization(s)			1; X
i Lease of facilities, equipment, or other assets from related organization(s)			×
		•	╁
			>
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			ET.
n Sharing of paid employees with related organization(s)			. In X
			-+
 Demonstrate the part of related organization(s) for expenses Demonsement part by related organization(s) for expenses 			< > C
	· · · · · · · · · · · · · · · · · · ·		÷
q Other transfer of cash or property to related organization(s)			. 1q
.			. 1r X
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.	this line, including covered	relationships and trar	saction thresholds.
(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
The Biomimicry Group, Inc (1)		226,348	Services Agreemt
The Biomimicry Group, Inc (2)		484,945	
(6)			
(t)			
(5)			
(9)			
		Sche	Schedule R (Form 990) 2011

Schedule R (Form 990) 2011

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI

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 assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(4)			6	3	9	1-1				
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	Legal domicile Predominant Are all partners Share of Share of	(e) Are all partners	(n) Share of		(n) Disproportionate	Code V—UBI	U) General or	(k) Percentage
		(state or foreign country)	income (related, unrelated, excluded	section 501(c)(3)	total income	ā	allocations?	amount in box 20 of Schedule K-1	managing partner?	ownership
			from tax under	organizations?				(Form 1065)		
				Yes No			Yes No		Yes No	
(1)										
(2)									_	
(6)										
(4)										
(9)										
(9)	,									
(Δ)										
(8)										
(6)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										<u> </u>
								Sche	dule R (For	Schedule R (Form 990) 2011

Part VII

Page 5

	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
Part IV Line	4 - Regarding the Biomimicry Guild
The Biomimic	cry Guild is a largely inactive registered LLC with majority ownership by Janine Benyus (The Biomimicry Institute Board
President)	
Part V Section	on 2, line 1 to explain line 1」- According to The Biomimicry Group - Biomimicry Institute Services Agreement, The Biomimicry
Group provid	es facilities, equipment, overhead, and other assets to the Institute. These benefits are tied to the leasing of programmatic and
administrativ	e professional services provided to the Institute The Biomimicry Institute pays cost reimbursement for services, which
ıs equal to or	less than FMV, calculated according to the Services Agreement Schedule
Part V Section	on 2, Line 2 to explain Line 11 According to The Biomimicry Group - Biomimicry Institute Services Agreement, The Biomimicry
Group provid	es professional programmatic and administrative services to The Biomimicry Institute
The Biomimic	cry Institute pays cost reimbursement for services, which is equal to or less than FMV, calculated according to the Services
Agreement So	chedule
	·

MAILED 5/14/2012

Form **8868**

(Rev January 2012)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Internal Rev	enue Service						
• If you a	are filing for an Automatic 3-Month Extension,	complete	only Part I and check th	is box			🕨 🛭
• If you a	are filing for an Additional (Not Automatic) 3-Me	onth Exter	nsion, complete only Pa	art II (on page 2 o	f this	form).	
Do not o	complete Part II unless you have already been g	granted an	automatic 3-month exte	nsion on a previo	usly f	iled Form	n 8868 .
a corpor 8868 to Return f	nic filing (e-file). You can electronically file Form ation required to file Form 990-T), or an addition request an extension of time to file any of the for Transfers Associated With Certain Personatons). For more details on the electronic filing of the	al (not auto forms liste l Benefit (omatic) 3-month extensi d in Part I or Part II wit Contracts, which must	on of time. You c h the exception o be sent to the i	an ele of For RS in	ectronica m 8870, n paper	ally file Form Information format (see
	,						
Part I on	ration required to file Form 990-T and requely	sting an a	automatic 6-month exte	ension-check thi			▶ 🗆
	come tax returns.						0,0,, 0, 1,,,,
			En	ter filer's identifyin	ıg nur	nber, see	instructions
Type or	Name of exempt organization or other filer, see in			Employer identi	ficatio	n number	(EIN) or
print	The Biomimicay NSTI Number, street, and room or suite no. If a P O. bo	TUTE,	Inc .	⊠ 86-	113	5385	<i>59</i>
File by the	r P.O. Box 9216			Social security	numbe	er (SSN)	
filing your return See	City, town or post office, state, and ZIP code. For	r a foreign a	ddress, see instructions				
instructions		9807					_
Enter the	Return code for the return that this application i			each return) .		• •	. 01
Applica	rtion	Return	Application				Return
is For		Code	Is For				Code
Form 99	30	01	Form 990-T (corporation	on)			07
Form 99	90-BL	02	Form 1041-A				08
Form 99	90-EZ	01	Form 4720				09
Form 99		04	Form 5227				10
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 99	90-T (trust other than above)	06	Form 8870				12
Telephe If the or If this is for the w a list with	one No. > 406-728-4134 rganization does not have an office or place of bits for a Group Return, enter the organization's fouthole group, check this box > If it is the names and EINs of all members the extension request an automatic 3-month (6 months for a contraction).	Figure Fi	AX No. ► the United States, check up Exemption Number (t of the group, check thi	GEN)	▶ [. If th	
ur fo > 2 If	ntil 8/15 , 20 12, to file the exer rethe organization's return for: Calendar year 20 1 or tax year beginning the tax year entered in line 1 is for less than 12 n	mpt organiz	zation return for the orga	inization named a	bove.		
3a If	Change in accounting period this application is for Form 990-BL, 990-PF, 990)-T 4720 4	or 6069, aptor the tento	this toy less so:		г	
	onrefundable credits. See instructions.)-1, 4 /∠U, (or occa, enter the tental	ive tax, less any	2-	•	\sim
	this application is for Form 990-PF, 990-T, 4	720, or 6	069, enter any refunda	ble credits and	3a		_0_
es	stimated tax payments made. Include any prior y	ear overpa	yment allowed as a cred	lit.	3b	\$	0
c B	alance due. Subtract line 3b from line 3a. Includ	e your pay	ment with this form, if re	quired, by using			

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

EFTPS (Electronic Federal Tax Payment System). See instructions.

3c \$

Form **8868**

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709 .

THE THE							
	are filing for an Automatic 3-Month Extension,						▶ 🗓
	are filing for an Additional (Not Automatic) 3-M complete Part II unless you have already been						n 8868.
Electronal corporation 8868 to Return	nic filing (e-file). You can electronically file Form ration required to file Form 990-T), or an addition request an extension of time to file any of the for Transfers Associated With Certain Personations). For more details on the electronic filing of the	n 8868 if yo nal (not aut forms liste al Benefit (ou need a 3-month autor omatic) 3-month extens d in Part I or Part II wit Contracts, which must	matic extension o ion of time. You o h the exception o be sent to the I	f time an ele of For RS in	e to file (6 ectronica m 8870, n paper	6 months for ally file Form Information format (see
Part I							
A corpo	pration required to file Form 990-T and requestly	esting an a	automatic 6-month exte	ension—check th			▶ 🗀
	corporations (including 1120-C filers), partners	hips, REMIC	Cs, and trusts must use	Form 7004 to req	juest	an exten	ision of time
to file in	come tax returns.		F	المامين المامين المامين			
Type or print	Name of exempt organization or other filer, see	nstructions.	Er	ter filer's identifyir Employer identi			
File by the due date for		imber, street, and room or suite no. If a P O. box, see instructions Social security number (SSN)					
filing your return Sec instruction	your City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
Enter the	e Return code for the return that this application	ıs for (file a	separate application for	reach return) .			
Applica	ation	Return	Application				Return
Is For		Code	Is For	· · · · · · · · · · · · · · · · · · ·			Code
Form 9	·	01	Form 990-T (corporation	on)			07
Form 9		02	Form 1041-A				08
Form 9		01	Form 4720				09
Form 9		04	Form 5227 Form 6069				10
	90-T (sec. 401(a) or 408(a) trust) 90-T (trust other than above)	06	Form 8870				11
TOITIE	50-1 (trust other triair above)	1 00	rom 6670				12
Teleph	one No. ► organization does not have an office or place of b	F.	AX No. ▶ the United States, check	this box		-	> 🗆
If this i	s for a Group Return, enter the organization's for	ur digit Gro	up Exemption Number (GEN)		If th	
for the w	hole group, check this box $\dots lacksquare$ $lacksquare$ $lacksquare$	it is for par	t of the group, check thi	s box	▶ [and at	tach
	h the names and EINs of all members the extens						
u fo	request an automatic 3-month (6 months for a control of the exe or the organization's return for: - - - - - - - - - - - - -					. The ext	ension is
	the tax year beginning the tax year entered in line 1 is for less than 12 i Change in accounting period				urn	, 20	·
n	this application is for Form 990-BL, 990-PF, 99 onrefundable credits. See instructions.		,	•	3a	\$	
е	this application is for Form 990-PF, 990-T, stimated tax payments made. Include any prior y	ear overpa	yment allowed as a cred	lit.	3b		•
	alance due. Subtract line 3b from line 3a. Includ FTPS (Electronic Federal Tax Payment System).			equired, by using	3c		
Caution.	If you are going to make an electronic fund withdrawal	with this For	rm 8868, see Form 8453-Fo	2 and Form 8879-F			netructions

Mailed 8/14/2012

Form 88	368 (Rev 1-2012)					Page 2
• If yo	u are filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Pa	art II and check th	is box	
-	Only complete Part II if you have already been gran					
	u are filing for an Automatic 3-Month Extension,					
Part	I Additional (Not Automatic) 3-Month E	xtension	of Time. Only file the	original (no copi	ies needed).	
			Er	ter filer's identifyin		
Type	or Name of exempt organization or other filer, see in			Employer Identif		
print	Ino Diaminicry Instit				11538	59_
Number, street, and room or suite no. If a P.O. box, see instructions.						
File by the due date for filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
filing your return See City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
instructi		5780	<u>/</u>			
Enter	the Return code for the return that this application			r each return) .		01
Application		Return	Application			Return
Is For		[^] Code	Is For		•	Code
Form	1990	01				
	990-BL	02	Form 1041-A			
	990-EZ	01	Form 4720			09
	1990-PF	04	Form 5227			10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)		06	Form 8870			12
			utomatic 3-month extension on a previously filed Form			
The books are in the care of ▶ Bryony Schwan Telephone No. ▶ 466 - 543 - 4108 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box						
	nonrefundable credits. See instructions.	- ·, ·,		, 1000 c,	8a \$	
b						
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS					8c \$	
	Signature and Verifica	tion mus	t be completed for P	art II only.		
Under knowle	penalties of perjury, I declare that I have examined the	is form, incl I am authon:	luding accompanying schozed to prepare this form	edules and stateme	nts, and to the	best of my
Signatur	et Lik More	Title ▶	Director of A	mance Da	ate > 8/14	2012
					Form 8868	(Rev 1-2012)

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