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Form 990

## Return of Organization Exempt From Income Tax

2012

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

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

Open to Public Inspection

## A For the 2012 calendar year, or tax year beginning 01-01-2012, 2012, and ending 12-31-2012

B Check if applicable	C Name of organization DHARMA OCEAN FOUNDATION		D Employer identification number 20-2417344
<input type="checkbox"/> Address change	Doing Business As		
<input type="checkbox"/> Name change			
<input type="checkbox"/> Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (877) 342-7629
<input type="checkbox"/> Terminated			
<input type="checkbox"/> Amended return	City or town, state or country, and ZIP + 4		
<input type="checkbox"/> Application pending	BOULDER, CO 80302		G Gross receipts \$ 1,234,620

F Name and address of principal officer  
ROBERT MITCHELL  
825 15TH STREET  
BOULDER, CO 80302H(a) Is this a group return for affiliates?  Yes  NoH(b) Are all affiliates included?  Yes  No  
If "No," attach a list (see instructions)

H(c) Group exemption number ►

I Tax-exempt status  501(c)(3)  501(c) ( ) (insert no)  4947(a)(1) or  527

J Website: ► http://www.dharmaocean.org/

K Form of organization  Corporation  Trust  Association  Other ► L Year of formation 2005 M State of legal domicile CO

## Part I Summary

1 Briefly describe the organization's mission or most significant activities EDUCATION	
2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets	
3 Number of voting members of the governing body (Part VI, line 1a) . . . . .	3 11
4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	4 9
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . . .	5 10
6 Total number of volunteers (estimate if necessary) . . . . .	6 165
7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	7a 0
b Net unrelated business taxable income from Form 990-T, line 34 . . . . .	7b

8 Contributions and grants (Part VIII, line 1h) . . . . .	Prior Year 1,715,502	Current Year 770,357
9 Program service revenue (Part VIII, line 2g) . . . . .	556,348	416,771
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	-213	-1,461
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	33,243	46,606
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	2,304,880	1,232,273

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . .	525	0
14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . .	376,266	379,925
16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . .		0
b Total fundraising expenses (Part IX, column (D), line 25) ► 12,936		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . .	769,615	784,691
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) . . . . .	1,146,406	1,164,616
19 Revenue less expenses Subtract line 18 from line 12 . . . . .	1,158,474	67,657

20 Total assets (Part X, line 16) . . . . .	Beginning of Current Year 5,935,650	End of Year 6,072,021
21 Total liabilities (Part X, line 26) . . . . .	161,029	226,480
22 Net assets or fund balances Subtract line 21 from line 20 . . . . .	5,774,621	5,845,541

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	***** Signature of officer ROBERT MITCHELL Treasurer Type or print name and title	2013-11-26 Date
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Paid Preparer Use Only	Print/Type preparer's name David J Brewster	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00011387
	Firm's name ► David Brewster & Assoc Inc			Firm's EIN ►	
	Firm's address ► 4890 Riverbend Road Boulder, CO 80301			Phone no (303) 449-5320	

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . .  Yes  No

### **Part III Statement of Program Service Accomplishments**

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

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**1** Briefly describe the organization's mission

## EDUCATION

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule C.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code ) (Expenses \$ 983,916 including grants of \$ ) (Revenue \$ )  
1 ONGOING PERFORMANCE OF EDUCATIONAL PROGRAMS WHICH SERVE TO PROVIDE INSTRUCTION IN MEDITATION PRACTICES AND DHARMA TEACHINGS AS PRESENTED BY CHOGYAM TRUNGPA RINPOCHE, AS WELL AS MEDITATING WITH THE BODY PRACTICES AND TEACHINGS AS PRESENTED BY REGINALDA RAY 2 HOSTED VARIOUS PROGRAMS AND EVENTS AT RETREAT CENTER FOR THE PURPOSE OF PROVIDING ONGOING OPPORTUNITIES TO TEACH AND PRACTICE THE ABOVE MENTIONED

**4b** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$

**4c** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$

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**4d** Other program services (Describe in Schedule O)

**4e Total program service expenses**  983,916

**Part IV Checklist of Required Schedules**

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?

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

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? If "Yes," complete Schedule C, Part II

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

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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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

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

11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

- a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
- 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
- c 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
- 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
- e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
- f 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 XI

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

- 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 and XII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

- b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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

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

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

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)

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

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

- b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		No
6		No
7		No
8		No
9		No
10		No
11a	Yes	
11b		No
11c		No
11d		No
11e	Yes	
11f		No
12a		No
12b		No
13		No
14a		No
14b		No
15		No
16		No
17		No
18		No
19		No
20a		No
20b		

**Part IV Checklist of Required Schedules (continued)**

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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		No
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		No
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		No
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)	28a		No
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c		No
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	29		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	34		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	35a		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b		No
b	If "Yes" to line 35a, 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	36		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	37		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	38		Yes
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	<b>Note.</b> All Form 990 filers are required to complete Schedule O			

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	<b>1a</b>	47	
<b>1b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	<b>1b</b>	0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>		No
<b>2a</b> 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	<b>2a</b>	10	
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	Yes	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		No
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>3b</b>		No
<b>4a</b> 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)?	<b>4a</b>		No
<b>b</b> 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			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		No
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		No
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>		No
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>	<b>7a</b>		No
<b>a</b> 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?	<b>7b</b>		
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7c</b>		No
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7d</b>	0	
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7e</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7f</b>		
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7g</b>		No
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7h</b>		No
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>8</b>		No
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>9a</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>	<b>9b</b>		
<b>a</b> Did the organization make any taxable distributions under section 4966?			
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?			
<b>10 Section 501(c)(7) organizations.</b> Enter	<b>10a</b>		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10b</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
<b>11 Section 501(c)(12) organizations.</b> Enter	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		No
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>	<b>13a</b>		No
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	<b>13b</b>		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>		

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

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

### Section A. Governing Body and Management

			Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b>	11		
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>b</b> Enter the number of voting members included in line 1a, above, who are independent	<b>1b</b>	9		
<b>2</b> 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?	<b>2</b>		No	
<b>3</b> 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?	<b>3</b>		No	
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>		No	
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>		No	
<b>6</b> Did the organization have members or stockholders?	<b>6</b>		No	
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>7a</b>		No	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>		No	
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	<b>8a</b>	Yes		
<b>a</b> The governing body?	<b>8b</b>	Yes		
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>9</b>		No	
<b>9</b> 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.)

		Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>	Yes	
<b>b</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?	<b>10b</b>		No
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>		No
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990			
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	Yes	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	Yes	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b>	Yes	
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>		No
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>		No
<b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	<b>15a</b>	Yes	
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15b</b>		No
<b>b</b> Other officers or key employees of the organization			
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>		No
<b>b</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 organization's exempt status with respect to such arrangements?	<b>16b</b>		

### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 

Own website  Another's website  Upon request  Other (explain in Schedule O)
- 19 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
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization  
ANGIE ANDERSON 2525 ARAPAHOE AVE E4-828 BOULDER, CO (303) 955-2574

**Part VII Compensation of Officers, Directors, Trustees, 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, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099- MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key Employee	Highest Employee	Former			
(1) PETER CARLTON	5 00	X						0	0	0
BOARD MEMBER	0 00									
(2) MICHAEL MISCHKE-REEDS	5 00	X						0	0	0
BOARD CHAIR	0 00									
(3) GAIA MIKA	3 00	X						0	0	0
Board Member	0 00									
(4) SEAN McNAMARA	5 00	X						4,843	0	0
BOARD MEMBER	0 00									
(5) CALLISTA BROWN	6 00	X						0	0	0
BOARD MEMBER	0 00									
(6) KATHY NICHOLSON	5 00	X	X					0	0	0
Treasurer	0 00									
(7) KARYN YOUNG	5 00	X						1,100	0	0
BOARD MEMBER	0 00									
(8) S JEREMY LOWRY	3 00	X						0	0	0
BOARD MEMBER	0 00									
(9) MONIQUE REES	2 00	X						0	0	0
BOARD MEMBER	0 00									
(10) CAROLINE PFOHL	5 00	X						0	0	0
BOARD CHAIR	0 00									
(11) NANDA ZIPP	60 00	X	X					91,491	0	5,711
President	0 00									
(12) TAMI SIMON	3 00	X						983	0	0
Board Member	0 00									
(13) DAVID IOZZI	5 00	X	X					2,558	0	0
Secretary	0 00									
(14) ROBERT MITCHELL	5 00	X	X					0	0	0
Treasurer	0 00									
(15) REGINALD A RAY	60 00	X						106,653	0	2,258
Director	0 00									

**Part VII: Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>					
	<b>b</b> Membership dues . . . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . . . .	<b>1c</b>	550				
	<b>d</b> Related organizations . . . . .	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	769,807				
	<b>g</b> Noncash contributions included in lines 1a-1f \$						
	<b>h</b> <b>Total.</b> Add lines 1a-1f . . . . .		770,357				
<b>Program Service Revenue</b>	<b>2a</b> PROGRAM SERVICES	Business Code					
			611600	416,771	416,771		
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g</b> <b>Total.</b> Add lines 2a-2f . . . . .		416,771				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		11	11			
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .		0				
	<b>5</b> Royalties . . . . .		0				
	<b>6a</b> Gross rents	(i) Real	(ii) Personal				
	<b>b</b> Less rental expenses						
	<b>c</b> Rental income or (loss)						
	<b>d</b> Net rental income or (loss) . . . . .			0			
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
<b>b</b> Less cost or other basis and sales expenses			875				
<b>c</b> Gain or (loss)			2,347				
<b>d</b> Net gain or (loss) . . . . .			-1,472	-1,472	-1,472		
<b>8a</b> Gross income from fundraising events (not including \$ 550 of contributions reported on line 1c) See Part IV, line 18 . . . . .	a	8,798					
<b>b</b> Less direct expenses . . . . .	b						
<b>c</b> Net income or (loss) from fundraising events . . . . .			8,798				
<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	a						
<b>b</b> Less direct expenses . . . . .	b						
<b>c</b> Net income or (loss) from gaming activities . . . . .			0				
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	a	37,808					
<b>b</b> Less cost of goods sold . . . . .	b						
<b>c</b> Net income or (loss) from sales of inventory . . . . .			37,808	37,808	37,808		
Miscellaneous Revenue	Business Code						
<b>11a</b>							
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue . . . . .							
<b>e</b> <b>Total.</b> Add lines 11a-11d . . . . .		0					
<b>12</b> <b>Total revenue.</b> See Instructions . . . . .		1,232,273	453,118				

**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)

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	91,375	45,687	36,550	9,138
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7 Other salaries and wages	232,226	214,348	17,878	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	6,075	45	6,030	
9 Other employee benefits . . . . .	22,313	3,151	19,162	
10 Payroll taxes . . . . .	27,936	22,255	4,998	683
11 Fees for services (non-employees)				
a Management . . . . .	0			
b Legal . . . . .	10,779	9,766	1,013	
c Accounting . . . . .	36,706	2,271	34,435	
d Lobbying . . . . .	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees . . . . .	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . .	0			
12 Advertising and promotion . . . . .	27,188	22,794	4,394	
13 Office expenses . . . . .	7,411	6,212	1,199	
14 Information technology . . . . .	0			
15 Royalties . . . . .	0			
16 Occupancy . . . . .	118,555	105,055	13,500	
17 Travel . . . . .	14,598	10,223	4,201	174
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19 Conferences, conventions, and meetings . . . . .	0			
20 Interest . . . . .	0			
21 Payments to affiliates . . . . .	0			
22 Depreciation, depletion, and amortization . . . . .	185,404	185,049	355	
23 Insurance . . . . .	8,260	4,565	3,695	
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 TELECOMMUNICATIONS/INTERNET	21,282	18,458	2,824	
b BANK CHARGES	26,644	25,719	766	159
c FOOD	56,290	56,221	69	
d OTHER PERSONNEL EXPENSES	204,871	194,840	9,781	250
e All other expenses	66,703	57,257	6,914	2,532
<b>25 Total functional expenses.</b> Add lines 1 through 24e	1,164,616	983,916	167,764	12,936
<b>26 Joint costs.</b> 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)				

**Part X Balance Sheet**Check if Schedule O contains a response to any question in this Part X 

		<b>(A)</b> Beginning of year	<b>(B)</b> End of year	
Assets	1 Cash—non-interest-bearing	87,290	<b>1</b> 146,216	
	2 Savings and temporary cash investments	21,102	<b>2</b> 26,561	
	3 Pledges and grants receivable, net	3	205,000	
	4 Accounts receivable, net	-3,263	<b>4</b> 486	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	5	0	
	6 Loans and other 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) Complete Part II of Schedule L	6	0	
	7 Notes and loans receivable, net	7	0	
	8 Inventories for sale or use	4,044	<b>8</b> 19,658	
	9 Prepaid expenses and deferred charges	4,478	<b>9</b> 13,013	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	<b>10a</b>	6,213,527	
	b Less accumulated depreciation	<b>10b</b>	580,150	5,795,648 <b>10c</b> 5,633,377
	11 Investments—publicly traded securities	11	0	
	12 Investments—other securities See Part IV, line 11	12	0	
	13 Investments—program-related See Part IV, line 11	13	0	
	14 Intangible assets	14	0	
	15 Other assets See Part IV, line 11	26,351	<b>15</b> 27,710	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	5,935,650	<b>16</b> 6,072,021		
Liabilities	17 Accounts payable and accrued expenses	17	26,823	
	18 Grants payable	18		
	19 Deferred revenue	19		
	20 Tax-exempt bond liabilities	20		
	21 Escrow or custodial account liability Complete Part IV of Schedule D	21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	158,000	<b>22</b>	
	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	3,029	<b>25</b> 199,657	
	<b>26 Total liabilities.</b> Add lines 17 through 25	161,029	<b>26</b> 226,480	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets	5,774,621	<b>27</b> 5,845,541	
	28 Temporarily restricted net assets	28		
	29 Permanently restricted net assets	29		
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds	30		
	31 Paid-in or capital surplus, or land, building or equipment fund	31		
	32 Retained earnings, endowment, accumulated income, or other funds	32		
	33 Total net assets or fund balances	5,774,621	<b>33</b> 5,845,541	
	<b>34 Total liabilities and net assets/fund balances</b>	5,935,650	<b>34</b> 6,072,021	

**Part XI 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	1,232,273
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,164,616
3	Revenue less expenses Subtract line 2 from line 1	3	67,657
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,774,621
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,263
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,845,541

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII 

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a Yes	
2b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b No	
2c 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c No	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a No	
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b No	

**SCHEDULE A**  
(Form 990 or 990EZ)**Public Charity Status and Public Support****2012****Open to Public  
Inspection**

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.

Department of the Treasury  
Internal Revenue Service  
Name of the organization  
DHARMA OCEAN FOUNDATION

Employer identification number

20-2417344

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

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

2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E )

3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.

4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state \_\_\_\_\_

5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II )

6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.

7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II )

8  A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )

9  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III )

10  An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.

11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h

e  a  Type I  b  Type II  c  Type III - Functionally integrated  d  Type III - Non-functionally integrated

f  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

g  If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

h  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

i  Provide the following information about the supported organization(s)

	<b>Yes</b>	<b>No</b>
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?	(vi) Is the organization in col (i) organized in the U S ?	(vii) Amount of monetary support
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>11 Total support</b> (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (see instructions)					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	
15 Public support percentage for 2011 Schedule A, Part II, line 14	<b>15</b>	
<b>16a 33 1/3% support test—2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		►
<b>b 33 1/3% support test—2011.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		►
<b>17a 10%-facts-and-circumstances test—2012.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		►
<b>b 10%-facts-and-circumstances test—2011.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		►
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		►

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

(Complete only if you 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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,392,405	448,038	1,005,640	1,717,239	800,713	5,364,035
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	738,006	585,885	333,295	596,173	463,927	2,717,286
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
<b>6 Total.</b> Add lines 1 through 5	<b>2,130,411</b>	<b>1,033,923</b>	<b>1,338,935</b>	<b>2,313,412</b>	<b>1,264,640</b>	<b>8,081,321</b>
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						0
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6 )						<b>8,081,321</b>

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>9</b> Amounts from line 6	<b>2,130,411</b>	<b>1,033,923</b>	<b>1,338,935</b>	<b>2,313,412</b>	<b>1,264,640</b>	<b>8,081,321</b>
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		244	68	10	11	333
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
<b>c</b> Add lines 10a and 10b		244	68	10	11	333
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						0
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12 )	<b>2,130,411</b>	<b>1,034,167</b>	<b>1,339,003</b>	<b>2,313,422</b>	<b>1,264,651</b>	<b>8,081,654</b>

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ►**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	100 000 %
16 Public support percentage from 2011 Schedule A, Part III, line 15	<b>16</b>	100 000 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	0 %
18 Investment income percentage from 2011 Schedule A, Part III, line 17	<b>18</b>	
<b>19a 33 1/3% support tests—2012.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization ►✓		
<b>b 33 1/3% support tests—2011.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization ►		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►		

**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).

**Facts And Circumstances Test**

**Explanation**

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**SCHEDULE D**

(Form 990)

OMB No 1545-0047

**2012****Open to Public Inspection****Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
 ► Attach to Form 990. ► See separate instructions.

Department of the Treasury  
Internal Revenue Service**Name of the organization**  
DHARMA OCEAN FOUNDATION**Employer identification number**

20-2417344

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education)  Preservation of an historically important land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year  
 ► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  
 ► \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ► \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

b Assets included in Form 990, Part X ► \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

<b>a</b> <input type="checkbox"/> Public exhibition	<b>d</b> <input type="checkbox"/> Loan or exchange programs
<b>b</b> <input type="checkbox"/> Scholarly research	<b>e</b> <input type="checkbox"/> Other
<b>c</b> <input type="checkbox"/> Preservation for future generations	

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	<b>Amount</b>
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses . . . . .					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment

b Permanent endowment

c Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations . . . . .

(ii) related organizations . . . . .

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

	<b>Yes</b>	<b>No</b>
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

4 Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .		898,253			898,253
<b>b</b> Buildings . . . . .		4,991,990	411,547		4,580,443
<b>c</b> Leasehold improvements . . . . .		47,761	12,583		35,178
<b>d</b> Equipment . . . . .		38,160	25,055		13,105
<b>e</b> Other . . . . .		237,363	130,965		106,398
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . .					5,633,377

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)		

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
Federal income taxes	
SALES TAX PAYABLE	992
Rounding	1
PROGRAM DEPOSITS	164,378
PROGRAM CREDIT	25,127
PAYROLL LIABILITIES	2,110
CREDIT CARD PAYABLE	7,049
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	199,657

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIII) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	
3	Subtract line 2e from line 1 . . . . .	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIII) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . .	5	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements . . . . .	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIII) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	
3	Subtract line 2e from line 1 . . . . .	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIII) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . .	5	

**Part XIII Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Identifier	Return Reference	Explanation

**SCHEDULE O**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
► Attach to Form 990 or 990-EZ.

**2012****Open to Public  
Inspection**Name of the organization  
DHARMA OCEAN FOUNDATION**Employer identification number**

20-2417344

Identifier	Return Reference	Explanation
	FORM 990, PART VI LINE 10b and LINE 19	LINE 10b A member of Dharma Ocean Foundations's Board of Directors is designated as the liaison to the local chapters and is in frequent contact with them, as is the President, regarding their activities, which are currently minimal LINE 19 The Organization makes its governing document, conflict of interest policy and financial statement available to the public upon request
Form 990, Part XII, Line 1	Form 990, Part XII, Line 1 Change of Accounting Method	SWITCHED FROM CASH TO ACCRUAL METHOD OF ACCOUNTING FOR BOOKS AND TAX REPORTING FORM 3115 BEING FILED WITH RETURN
Form 990, Part XI, Line 9	Other Changes In Net Assets Or Fund Balances - Other Increases	NET INCREASE IN AR = \$3263
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	UPON REQUEST
Form 990, Part VI, Line 15a	Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	THE PRESIDENT'S SALARY WAS DETERMINED BY REFERENCE TO MARKET RESEARCH AND SALARY DATA FOR COMPARABLE POSITIONS AT COMPARABLE ORGANIZATIONS AS WELL AS INPUT FROM VARIOUS BOARD MEMBERS FAMILIAR WITH SIMILAR NOT-FOR-PROFIT COMPENSATION STRUCTURES
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Dharma Ocean Foundation's Board of Directors meets several times annually, discussing at each meeting any issues that may have arisen in relation to conflict of interest and determining what, if any, actions are necessary to resolve said issues The Board of Directors also discusses and reviews regularly the Foundation's articles and policies, which are then officially approved by the Board in a formal vote
Form 990, Part VI, Line 11b	Form 990, Part VI, Line 11b Form 990 Review Process	The Treasurer reviews it and presents highlights to the board regarding the financial activity of the foundation over the course of the previous year
		Client Note 1 - FORM 3115 SCHEDULE A, PART I (CHANGE IN OVERALL METHOD) LINE 3 "ATTACH A STATEMENT SPECIFYING THE ACCOUNTING METHOD USED WHEN PREPARING THE BALANCE SHEET" TAXPAYER USED THE CASH METHOD OF ACCOUNTING WHEN PREPARING THE 2011 BALANCE SHEET THEREFORE THE ACCOUNTS PAYABLE AS OF 12/31/2011 WERE NOT REPORTED ON THE BALANCE SHEET THE ACCOUNTS PAYABLE EXPENSES FOR 12/31/11 WERE NOT DEDUCTED ON THE P&L

Form 3115

(Rev December 2009)  
Department of the Treasury  
Internal Revenue Service

## Application for Change in Accounting Method

OMB No 1545-0152

Name of filer (name of parent corporation if a consolidated group) (see instructions)  DHARMA OCEAN FOUNDATION	Identification number (see instructions)  20-2417344
Number, street, and room or suite no If a P O box, see the instructions  2525 ARAPAHOE AVE E4-828	Principal business activity code number (see instructions)  611000
City or town, state, and ZIP code  BOULDER, CO 80302	Tax year of change begins (MM/DD/YYYY) 01-01-2012  Tax year of change ends (MM/DD/YYYY) 12-31-2012
Name of applicant(s) (if different than filer) and identification number(s) (see instructions)  DHARMA OCEAN FOUNDATION	Name of contact person (see instructions)  DAVID BREWSTER
	ID No 20-2417344 Contact person's telephone number (303) 449-5320

If the applicant is a member of a consolidated group, check this box

If Form 2848, Power of Attorney and Declaration of Representative, is attached (see instructions for when Form 2848 is required), check this box

## Check the box to indicate the applicant.

Individual  Cooperative (Sec 1381)  
 Corporation  Partnership  
 Controlled foreign corporation  S corporation  
 (Sec 957)  Insurance co (Sec 816(a))  
 10/50 corporation (Sec 904(d)(2)(E))  Insurance co (Sec 831)  
 Qualified personal service  Other (specify)  \_\_\_\_\_  
 Exempt organization Enter Code section  501c(3)

## Check the appropriate box to indicate the type of accounting method change being requested. (see instructions)

Depreciation or Amortization  
 Financial Products and/or Financial Activities of Financial Institutions  
 Other (specify)  \_\_\_\_\_

**Caution:** To be eligible for approval of the requested change in method of accounting, the taxpayer must provide all information that is relevant to the taxpayer or to the taxpayer's requested change in method of accounting. This includes all information requested on this Form 3115 (including its instructions), as well as any other information that is not specifically requested.

The taxpayer must attach all applicable supplemental statements requested throughout this form.

Part I Information For Automatic Change Request	Yes	No
1 Enter the applicable designated automatic accounting method change number for the requested automatic change Enter only one designated automatic accounting method change number, except as provided for in guidance published by the IRS. If the requested change has no designated automatic accounting method change number, check "Other," and provide both a description of the change and citation of the IRS guidance providing the automatic change. See instructions  ►(a) Change No <u>122</u> (b) Other <input type="checkbox"/> Description <input type="checkbox"/>		
2 Do any of the scope limitations described in section 4 02 of Rev Proc 2008-52 cause automatic consent to be unavailable for the applicant's requested change? If "Yes," attach an explanation <input type="checkbox"/> . . . . .		X
<b>Note:</b> Complete Part II below and then Part IV, and also Schedules A through E of this form (if applicable).		
Part II Information For All Requests	Yes	No
3 Did or will the applicant cease to engage in the trade or business to which the requested change relates, or terminate its existence, in the tax year of change (see instructions)? If "Yes," the applicant is not eligible to make the change under automatic change request procedures <input type="checkbox"/> . . . . .		X
4a Does the applicant (or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) have any Federal income tax return(s) under examination (see instructions)? If "No," go to line 5 <input type="checkbox"/> . . . . .		X
b Is the method of accounting the applicant is requesting to change an issue (with respect to either the applicant or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) either (i) under consideration or (ii) placed in suspense (see instructions)? <input type="checkbox"/> . . . . .		X

## Signature (see instructions)

Under penalties of perjury, I declare that I have examined this application, including accompanying schedules and statements, and to the best of my knowledge and belief, the application contains all the relevant facts relating to the application, and it is true, correct, and complete. Declaration of preparer (other than applicant) is based on all information of which preparer has any knowledge

**Filer**  
\*\*\*\*\* 2013-11-26

**Preparer (other than filer/applicant)**  
P00011387

Signature and date  
DHARMA OCEAN FOUNDATION

Signature of individual preparing the application and date

Name and title (print or type)

Name of individual preparing the application (print or type)

Name of firm preparing the application

Part II Information For All Requests (continued)		Yes	No
4c	Is the method of accounting the applicant is requesting to change an issue pending (with respect to either the applicant or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) for any tax year under examination (see instructions)?	X	
d	Is the request to change the method of accounting being filed under the procedures requiring that the operating division director consent to the filing of the request (see instructions)? If "Yes," attach the consent statement from the director	X	
e	Is the request to change the method of accounting being filed under the 90-day or 120-day window period? If "Yes," check the box for the applicable window period and attach the required statement (see instructions)	X	
	□ 90 day      □ 120 day Date examination ended ► _____		
f	If you answered "Yes" to line 4a, enter the name and telephone number of the examining agent and the tax year(s) under examination Name ► _____ Telephone number ► _____ Tax year(s) ► _____		
g	Has a copy of this Form 3115 been provided to the examining agent identified on line 4f?	X	
5a	Does the applicant (or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) have any Federal income tax return(s) before Appeals and/or a Federal court? If "Yes," enter the name of the (check the box) □ Appeals officer and/or □ counsel for the government, telephone number, and the tax year(s) before Appeals and/or a Federal court Name ► _____ Telephone number ► _____ Tax year(s) ► _____	X	
b	Has a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government identified on line 5a?	X	
c	Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a member for the tax year(s) the applicant was a member) (see instructions)? If "Yes," attach an explanation	X	
6	If the applicant answered "Yes" to line 4a and/or 5a with respect to any present or former consolidated group, attach a statement that provides each parent corporation's (a) name, (b) identification number, (c) address, and (d) tax year(s) during which the applicant was a member that is under examination, before an Appeals office, and/or before a Federal court		
7	If, for federal income tax purposes, the applicant is either an entity (including a limited liability company) treated as a partnership or an S corporation, is it requesting a change from a method of accounting that is an issue under consideration in an examination, before Appeals, or before a Federal court, with respect to a Federal income tax return of a partner, member, or shareholder of that entity? If "Yes," the applicant is <b>not</b> eligible to make the change	X	
8a	Does the applicable revenue procedure (advance consent or automatic consent) state that the applicant does not receive audit protection for the requested change (see instructions)? b If "Yes," attach an explanation	X	
9a	Has the applicant, its predecessor, or a related party requested or made (under either an automatic change procedure or a procedure requiring advance consent) a change in method of accounting within the past 5 years (including the year of the requested change)? b If "Yes," for each trade or business, attach a description of each requested change in method of accounting (including the tax year of change) and state whether the applicant received consent c If any application was withdrawn, not perfected, or denied, or if a Consent Agreement granting a change was not signed and returned to the IRS, or the change was not made or not made in the requested year of change, attach an explanation	X	
10a	Does the applicant, its predecessor, or a related party currently have pending any request (including any concurrently filed request) for a private letter ruling, change in method of accounting, or technical advice? b If "Yes," for each request attach a statement providing the name(s) of the taxpayer, identification number(s), the type of request (private letter ruling, change in method of accounting, or technical advice), and the specific issue(s) in the request(s)	X	
11	Is the applicant requesting to change its <b>overall</b> method of accounting? If "Yes," check the appropriate boxes below to indicate the applicant's present and proposed methods of accounting. Also, complete Schedule A on page 4 of this form	X	
Present method:	□ Cash <input checked="" type="checkbox"/> Accrual      □ Hybrid (attach description)		
Proposed method:	□ Cash <input checked="" type="checkbox"/> Accrual      □ Hybrid (attach description)		

**Part II Information For All Requests (continued)****Yes** **No**

12	If the applicant is either (i) not changing its overall method of accounting, or (ii) is changing its overall method of accounting and also changing to a special method of accounting for one or more items, attach a detailed and complete description for each of the following					
a	The item(s) being changed					
b	The applicant's present method for the item(s) being changed					
c	The applicant's proposed method for the item(s) being changed					
d	The applicant's present overall method of accounting (cash, accrual, or hybrid)					
13	Attach a detailed and complete description of the applicant's trade(s) or business(es), and the principal business activity code for each. If the applicant has more than one trade or business as defined in Regulations section 1.446-1(d), describe whether each trade or business is accounted for separately, the goods and services provided by each trade or business and any other types of activities engaged in that generate gross income, the overall method of accounting for each trade or business, and which trade or business is requesting to change its accounting method as part of this application or a separate application					
14	Will the proposed method of accounting be used for the applicant's books and records and financial statements? For insurance companies, see the instructions If "No," attach an explanation	X				
15a	Has the applicant engaged, or will it engage, in a transaction to which section 381(a) applies (e.g., a reorganization, merger, or liquidation) during the proposed tax year of change determined without regard to any potential closing of the year under section 381(b)(1)?	X				
b	If "Yes," for the items of income and expense that are the subject of this application, attach a statement identifying the methods of accounting used by the parties to the section 381(a) transaction immediately before the date of distribution or transfer and the method(s) that would be required by section 381(c)(4) or (c)(5) absent consent to the change(s) requested in this application					
16	Does the applicant request a conference with the IRS National Office if the IRS proposes an adverse response?	X				
17	If the applicant is changing to either the overall cash method, an overall accrual method, or is changing its method of accounting for any property subject to section 263A, any long-term contract subject to section 460, or inventories subject to section 474, enter the applicant's gross receipts for the 3 tax years preceding the tax year of change					
	1st preceding year ended mo yr	2nd preceding year ended mo yr	3rd preceding year ended mo yr			
	\$ 2,311,675	12 2011	\$ 1,347,538	12 2010	\$ 1,034,168	12 2009

**Part III Information For Advance Consent Request****Yes** **No**

18	Is the applicant's requested change described in any revenue procedure, revenue ruling, notice, regulation, or other published guidance as an automatic change request? If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures	X	
19	Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists		
20	Attach a copy of all documents related to the proposed change (see instructions)		
21	Attach a statement of the applicant's reasons for the proposed change		
22	If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation		
23a	Enter the amount of <b>user fee</b> attached to this application (see instructions) ► \$ _____		
b	If the applicant qualifies for a reduced user fee, attach the required information or certification (see instructions)		

**Part IV Section 481(a) Adjustment****Yes** **No**

24	Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment?	X	
25	Enter the section 481(a) adjustment. Indicate whether the adjustment is an increase (+) or a decrease (-) in income ► \$ _____ --30,906. Attach a summary of the computation and an explanation of the methodology used to determine the section 481(a) adjustment. If it is based on more than one component, show the computation for each component. If more than one applicant is applying for the method change on the same application, attach a list of the name, identification number, principal business activity code (see instructions), and the amount of the section 481(a) adjustment attributable to each applicant		

**Part IV Section 481(a) Adjustment**

	Yes	No
26 If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take the entire amount of the adjustment into account in the year of change?		X
27 Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a consolidated group, a controlled group, or other related parties?		X
If "Yes," attach an explanation		

**Schedule A-Change in Overall Method of Accounting (If Schedule A applies, Part I below must be completed )****Part I Change in Overall Method (see instructions)**

1 Enter the following amounts as of the close of the tax year preceding the year of change. If none, state "None." Also, attach a statement providing a breakdown of the amounts entered on lines 1a through 1g

a Income accrued but not received (such as accounts receivable) . . . . .

b Income received or reported before it was earned (such as advanced payments) Attach  a description of the income and the legal basis for the proposed method . . . . .

c Expenses accrued but not paid (such as accounts payable) . . . . .

d Prepaid expenses previously deducted . . . . .

e Supplies on hand previously deducted and/or not previously reported. . . . .

f Inventory on hand previously deducted and/or not previously reported Complete Schedule D, Part II.

g Other amounts (specify) Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment ► . . . . .

h Net section 481(a) adjustment (Combine lines 1a-1g) Indicate whether the adjustment is an increase (+) or decrease (-) in income Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25 . . . . .

Amount	
\$	NONE
	3,263
	27,643
	NONE
	NONE
	NONE
	NONE
\$	30,906

2 Is the applicant also requesting the recurring item exception under section 461(h)(3)? . . . . .  Yes  No

3 Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, as of the close of the tax year preceding the year of change. Also attach a statement specifying the accounting method used when preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines 1a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach a statement explaining the differences

**Part II Change to the Cash Method For Advance Consent Request (see instructions)**

Applicants requesting a change to the cash method must attach the following information

1 A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business

2 An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations

## **Schedule B—Change to the Deferral Method for Advance Payments (see instructions)**

---

- 1** If the applicant is requesting to change to the Deferral Method for advance payments described in section 5 02 of Rev Proc 2004-34, 2004-1 C B 991, attach the following information
  - a** A statement explaining how the advance payments meet the definition in section 4 01 of Rev Proc 2004-34
  - b** If the applicant is filing under the automatic change procedures of Rev Proc 2008-52, the information required by section 8 02(3)(a)-(c) of Rev Proc 2004-34
  - c** If the applicant is filing under the advance consent provisions of Rev Proc 97-27, the information required by section 8 03(2)(a)-(f) of Rev Proc 2004-34
- 2** If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1 451-5, attach the following
  - a** A statement explaining how the advance payments meet the definition in Regulations section 1 451-5(a)(1)
  - b** A statement explaining what portions of the advance payments, if any, are attributable to services, whether such services are integral to the provisions of goods or items, and whether any portions of the advance payments that are attributable to non-integral services are less than five percent of the total contract prices. See Regulations sections 1 451-5(a)(2)(i) and (3)
  - c** A statement explaining that the advance payments will be included in income no later than when included in gross receipts for purposes of the applicant's financial reports. See Regulations section 1 451-5(b)(1)(ii)
  - d** A statement explaining whether the inventoriable goods exception of Regulations section 1 451-5(c) applies and if so, when substantial advance payments will be received under the contracts, and how the exception will limit the deferral of income

**Schedule C-Changes Within the LIFO Inventory Method (see instructions)****Part I General LIFO Information**

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all **Forms 970, Application To Use LIFO Inventory Method**, filed to adopt or expand the use of the LIFO method

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items
  - a Valuing inventory (e.g., unit method or dollar-value method)
  - b Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc.)
  - c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.)
  - d Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method)
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable
- 4 If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable
- 5 Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method
- 6 If changing to the IPIC method, attach a completed Form 970

**Part II Change in Pooling Inventories**

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use
  - a A description of the types of products produced by the applicant. If possible, attach a brochure
  - b A description of the types of processes and raw materials used to produce the products in each proposed pool
  - c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces
  - d A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared
  - e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool
  - f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool
  - g A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing
- 3 If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1.472-8(b)(3)
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1.472-8(c)

**Schedule D-Change in the Treatment of Long-Term Contracts Under Section 460, Inventories, or Other Section 263A Assets (see instructions)**

**Part I Change in Reporting Income From Long-Term Contracts (Also complete Part III on pages 7 and 8 )**

1 To the extent not already provided, attach a description of the applicant's present and proposed methods for reporting income and expenses from long-term contracts. Also, attach a representative actual contract (without any deletion) for the requested change. If the applicant is a construction contractor, attach a detailed description of its construction activities

2a Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see instructions)? . . . .  Yes  No

b If "Yes," do all the contracts qualify for the exception under section 460(e) (see instructions)? . . . .  Yes  No  
If line 2b is "No," attach an explanation

c If line 2b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-to-cost under Regulations section 1 460-4(b)? . . . .  Yes  No

d If line 2c is "No," is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1 460-4(c)(2)? . . . .  Yes  No  
If line 2d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor  
If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use

3a Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)? . . . .  Yes  No

b If "Yes," explain the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts

c Attach a description of the applicant's manufacturing activities, including any required installation of manufactured goods

4 To determine a contract's completion factor using the percentage-of-completion method

a Will the applicant use the cost-to-cost method in Regulations section 1 460-4(b)? . . . .  Yes  No

b If line 4a is If "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1 460-5(c))? . . . .  Yes  No

5 Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts

**Part II Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III on pages 7 and 8 )**

1 Attach a description of the inventory goods being changed

2 Attach a description of the inventory goods (if any) NOT being changed

3a Is the applicant subject to section 263A? If "No," go to line 4a . . . .  Yes  No

b Is the applicant's present inventory valuation method in compliance with section 263A (see instructions)?  
If "No," attach a detailed explanation . . . .  Yes  No

**4a Check the appropriate boxes below**

Identification methods

Specific identification . . . . .

FIFO . . . . .

LIFO . . . . .

Other (attach explanation) . . . . .

Valuation methods

Cost . . . . .

Cost or market, whichever is lower . . . . .

Retail cost . . . . .

Retail, lower of cost or market . . . . .

Other (attach explanation) . . . . .

**b Enter the value at the end of the tax year preceding the year of change . . . . .**

5 If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the following information (see instructions)

a Copies of Form(s) 970 filed to adopt or expand the use of the method

b **Only for applicants requesting advance consent.** A statement describing whether the applicant is changing to the method required by Regulations section 1 472-6(a) or (b), or whether the applicant is proposing a different method

c **Only for applicants requesting an automatic change.** The statement required by section 22 01(5) of the Appendix of Rev Proc 2008-52 (or its successor)

Inventory Being Changed		Inventory Not Being Changed
Present method	Proposed method	Present method

**Part III Method of Cost Allocation** (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions))

**Section A-Allocation and Capitalization Methods**

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method)
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method)
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S. ratio, or other reasonable allocation method)

**Section B-Direct and Indirect Costs Required To Be Allocated**

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460. Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked

	Present method	Proposed method
1 Direct material		
2 Direct labor		
3 Indirect labor		
4 Officers' compensation (not including selling activities)		
5 Pension and other related costs		
6 Employee benefits		
7 Indirect materials and supplies		
8 Purchasing costs		
9 Handling, processing, assembly, and repackaging costs		
10 Offsite storage and warehousing costs		
11 Depreciation, amortization, and cost recovery allowance for equipment and facilities placed in service and not temporarily idle		
12 Depletion		
13 Rent		
14 Taxes other than state, local, and foreign income taxes		
15 Insurance		
16 Utilities		
17 Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18 Engineering and design costs (not including section 174 research and experimental expenses)		
19 Rework labor, scrap, and spoilage		
20 Tools and equipment		
21 Quality control and inspection		
22 Bidding expenses incurred in the solicitation of contracts awarded to the applicant		
23 Licensing and franchise costs		
24 Capitalizable service costs (including mixed service costs)		
25 Administrative costs (not including any costs of selling or any return on capital)		
26 Research and experimental expenses attributable to long-term contracts		
27 Interest		
28 Other costs (Attach a list of these costs)		

**Part III Method of Cost Allocation (see instructions) (continued)****Section C-Other Costs Not Required To Be Allocated** (Complete Section C only if the applicant is requesting to change its method for these costs )

	Present method	Proposed method
1 Marketing, selling, advertising, and distribution expenses		
2 Research and experimental expenses not included in Section B, line 26		
3 Bidding expenses not included in Section B, line 22		
4 General and administrative costs not included in Section B		
5 Income taxes		
6 Cost of strikes		
7 Warranty and product liability costs		
8 Section 179 costs		
9 On-site storage		
10 Depreciation, amortization, and cost recovery allowance not included in Section B, line 11		
11 Other costs (Attach a list of these costs )		

**Schedule E-Change in Depreciation or Amortization (see instructions)**

Applicants requesting approval to change their method of accounting for depreciation or amortization complete this section

Applicants **must** provide this information for each item or class of property for which a change is requested

**Note:** See the *List of Automatic Accounting Method Changes* in the instructions for information regarding automatic changes under sections 56, 167, 168, 197, 1400I, 1400L, or former section 168. **do not** file Form 3115 with respect to certain late elections and election revocations (see instructions).

1 Is depreciation for the property determined under Regulations section 1 167(a)-11 (CLADR)? . . . .  Yes  No  
If "Yes," the only changes permitted are under Regulations section 1 167(a)-11(c)(1)(iii)

2 Is any of the depreciation or amortization required to be capitalized under any Code section (e g , section 263A)? . . . . .  Yes  No  
If "Yes," enter the applicable section ► \_\_\_\_\_

3 Has a depreciation, amortization, or expense election been made for the property (e g , the election under sections 168(f)(1), 179, or 179C)? . . . . .  Yes  No  
If "Yes," state the election made ► \_\_\_\_\_

4a To the extent not already provided, attach a statement describing the property being changed. Include in the description the type of property, the year the property was placed in service, and the property's use in the applicant's trade or business or income-producing activity

b If the property is residential rental property, did the applicant live in the property before renting it? . . . .  Yes  No

c Is the property public utility property? . . . . .  Yes  No

5 To the extent not already provided in the applicant's description of its present method, attach a statement explaining how the property is treated under the applicant's present method (e g , depreciable property, inventory property, supplies under Regulations section 1 162-3, nondepreciable section 263(a) property, property deductible as a current expense, etc )

6 If the property is not currently treated as depreciable or amortizable property, attach a statement of the facts supporting the proposed change to depreciate or amortize the property

7 If the property is currently treated and/or will be treated as depreciable or amortizable property, provide the following information for both the present (if applicable) and proposed methods

a The Code section under which the property is or will be depreciated or amortized (e g , section 168(g))

b The applicable asset class from Rev Proc 87-56, 1987-2 C B 674, for each asset depreciated under section 168 (MACRS) or under section 1400L, the applicable asset class from Rev Proc 83-35, 1983-1 C B 745, for each asset depreciated under former section 168 (ACRS), an explanation why no asset class is identified for each asset for which an asset class has not been identified by the applicant

c The facts to support the asset class for the proposed method

d The depreciation or amortization method of the property, including the applicable Code section (e g , 200% declining balance method under section 168(b)(1))

e The useful life, recovery period, or amortization period of the property

f The applicable convention of the property

g A statement of whether or not the additional first-year special depreciation allowance (for example, as provided by section 168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property. If not, also provide an explanation as to why no special depreciation allowance was or will be claimed

## TY 2012 Change in Overall Method breakdown statement

**Name:** DHARMA OCEAN FOUNDATION

**EIN:** 20-2417344

**Software ID:** 12000229

**Software Version:** 2012v2.0

### Income accrued but not received

Description	Amount
-------------	--------

### Expenses accrued but not paid

Description	Amount
-------------	--------

ACCOUNTS PAYABLE	-27,643
------------------	---------

### Prepaid expenses previously deducted

Description	Amount
-------------	--------

### Supplies on hand previously deducted

Description	Amount
-------------	--------

### Inventory on hand previously deducted

Description	Amount
-------------	--------

## TY 2012 Computation of section 481(a) adjustment statement

**Name:** DHARMA OCEAN FOUNDATION

**EIN:** 20-2417344

**Software ID:** 12000229

**Software Version:** 2012v2.0

**Computation:** UNDER THE PRIOR METHOD OF ACCOUNTING ALL TRANSACTIONS WERE BEING RECORDED ON A CASH BASIS. ALL INCOME WAS BEING REPORTED WHEN RECEIVED AND ALL EXPENSES ARE REPORTED WHEN PAID. WITH THE PROPOSED METHOD OF ACCOUNTING CHANGE TO ACCRUAL BASIS ALL INCOME IS RECOGNIZED WHEN EARNED. ALL EXPENSES ARE DEDUCTED WHEN THE ECONOMIC EVENTS HAVE OCCURRED TO SECURE A LIABILITY. THE 481(A) ADJUSTMENT IS COMPUTED BASED ON THE FOLLOWING: 12/31/11 BALANCE OF ACCOUNTS PAYABLE THAT WAS NOT RECORDED ON THE PRIOR YEAR BOOKS - \$27,643 (NEGATIVE ADJUSTMENT) 12/31/11 NEGATIVE ACCOUNTS RECEIVABLE BALANCE - \$3,263 (NEGATIVE BALANCE) TOTAL CHANGE = \$30,906

**TY 2012 Income received or reported before it was earned statement****Name:** DHARMA OCEAN FOUNDATION**EIN:** 20-2417344**Software ID:** 12000229**Software Version:** 2012v2.0

Description	Legal Basis for the Proposed Method
ACCOUNTS RECEIVABLE	

## TY 2012 Trade or Business Statement

**Name:** DHARMA OCEAN FOUNDATION

**EIN:** 20-2417344

**Software ID:** 12000229

**Software Version:** 2012v2.0

**Description:** EDUCATIONAL PROGRAMS WHICH SERVE TO PROVIDE  
INSTRUCTION IN MEDITATION PRACTICES AND DHARMA  
TEACHINGS AS PRESENTED BY CHOGYAM TRUNGPA RINPOCHE, AS  
WELL AS MEDITATING WITH THE BODY PRACTICES AND  
TEACHINGS AS PRESENTED BY REGINALD A. RAY. THIS IS A 501c  
(3) TAX EXEMPT ORGANIZATION. ACTIVITY CODE 611000.

**Dharma Ocean**  
**Balance Sheet Prev Year**  
As of December 31, 2011

	Dec 31, 11
<b>ASSETS</b>	
<b>Current Assets</b>	
Checking/Savings	
1010 · USBank-Operating Funds	57,538
1012 · USBank-Retreat Center	28,725
1013 · SCCU Money Market Draft 56803	5,148
1014 · SCCU Share 56803	25
1070 · Schwab Savings & Investment	15,929
	<hr/>
Total Checking/Savings	107,364
Accounts Receivable	
1110 · Accounts receivable	-3,263
	<hr/>
Total Accounts Receivable	-3,263
Other Current Assets	
1405 · Prepaid Items	4,478
1121 · Inventory Asset	4,044
1211 · Tax Refunds Receivable	0
1299 · Undeposited Funds	1,027
1460 · Deposits	2,500
1600 · Donated Items	23,850
	<hr/>
Total Other Current Assets	35,898
Total Current Assets	139,999
<b>Fixed Assets</b>	
1610 · Land - operating	
1611 · Land - Retreat Center	65,440
1612 · Land - Hermitage	
16121 · Hermitage Land	583,630
1612 · Land - Hermitage - Other	120,447
	<hr/>
Total 1612 · Land - Hermitage	704,077
1610 · Land - operating - Other	<hr/>
	128,736
Total 1610 · Land - operating	898,253
1615 · Land Improvements	
1616 · BMRC Land Improvements	42,461
	<hr/>
Total 1615 · Land Improvements	42,461
1620 · Buildings	
1621 · Cabin of the Crazy One	
1622 · Cabin - Professional Fees	5,790
1621 · Cabin of the Crazy One - Other	52,422
	<hr/>
Total 1621 · Cabin of the Crazy One	58,212
1625 · Shrine Hall	2,312,498
1630 · DO Home	
1631 · DO Home - Professional Fees	5,871
1630 · DO Home - Other	740,879
	<hr/>
Total 1630 · DO Home	746,751
1635 · Residence Hall	<hr/>
	1,874,529
Total 1620 · Buildings	<hr/>
	4,991,989
1640 · Equipment and Furnishings	
1641 · Audio Equipment	15,668
1642 · Kitchen Equipment	5,416
1643 · Office Furn & Equip	22,525
1644 · DO House Furn & Equip	40,783
1645 · Practice Materials	8,820
1646 · Shrine Hall Furn & Equip	102,927
1647 · Residence Hall Furn & Equip	74,135
	<hr/>
Total 1640 · Equipment and Furnishings	270,275
1720 · Accumulated Depreciation	<hr/>
	-407,326
Total Fixed Assets	<hr/>
<b>TOTAL ASSETS</b>	<b>5,935,651</b>

**Dharma Ocean**  
**Balance Sheet Prev Year**  
As of December 31, 2011

	<u>Dec 31, 11</u>
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
<b>Credit Cards</b>	
2050 · Credit Card US Bank VISA	1,975
<b>Total Credit Cards</b>	<u>1,975</u>
<b>Other Current Liabilities</b>	
2100 · Payroll Liabilities	
2106 · SUTA	431
2110 · Retirement Contribution	0
2100 · Payroll Liabilities - Other	<u>0</u>
<b>Total 2100 · Payroll Liabilities</b>	<u>431</u>
2140 · Accrued sales taxes	623
2570 · Short-term liabilities - other	<u>150,000</u>
<b>Total Other Current Liabilities</b>	<u>151,054</u>
<b>Total Current Liabilities</b>	<u>153,030</u>
<b>Long Term Liabilities</b>	
2770 · Long-term liabilities	
2772 · Reggie and Lee Ray	8,000
<b>Total 2770 · Long-term liabilities</b>	<u>8,000</u>
<b>Total Long Term Liabilities</b>	<u>8,000</u>
<b>Total Liabilities</b>	<u>161,030</u>
<b>Equity</b>	
3010 · Unrestrict (retained earnings)	4,614,410
<b>Net Income</b>	<u>1,160,211</u>
<b>Total Equity</b>	<u>5,774,621</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><b>5,935,651</b></u>

**Dharma Ocean**  
**Profit & Loss Prev Year**  
January through December 2011

	<u>Jan - Dec 11</u>
<b>Ordinary Income/Expense</b>	
<b>Income</b>	
4 · Contributed support	
4010 · General Donations	
4011 · Donations (Monthly)	118,635
4012 · Donations (One Time)	14,321
4013 · Donations in Kind	3,490
4014 · Donated Facilities	<u>5,000</u>
Total 4010 · General Donations	141,445
4020 · Restricted Donations	
4021 · Scholarship Donations	14,532
4022 · Teacher's Gifts	
40221 · Gifts to Reggie	9,181
40222 · Gifts To Others	<u>4,500</u>
Total 4022 · Teacher's Gifts	13,681
4026 · Retreat Center Donations	<u>1,297,581</u>
Total 4020 · Restricted Donations	1,325,793
4230 · Foundation/trust grants	<u>250,000</u>
Total 4 · Contributed support	1,717,239
5 · Earned revenues	
5110 · Audio Media Revenue	
51101 · Audio Media Sales	31,363
51104 · Audio Media Shipping Income	263
51105 · Royalty Income	<u>255</u>
Total 5110 · Audio Media Revenue	31,881
5130 · Interest-savings/short-term inv	10
5140 · Miscellaneous revenue	844
5180 · Program Service Fees	
51811 · Program Tuition/Fees	323,978
51812 · Meal Fees	193,993
5182 · Lodging Fees	
51821 · Lodging Fee	139,773
51822 · Lodging Discounts	-4,936
5182 · Lodging Fees - Other	0
Total 5182 · Lodging Fees	134,837
5183 · Program Assistance	-49,575
5184 · Discounts & Work Study	-68,000
5185 · Materials Fees	7,936
5187 · Other Program-related Sales	8,246
5188 · Other Fees	<u>4,089</u>
Total 5180 · Program Service Fees	555,504
5330 · Facility Rental Revenue	<u>7,934</u>
Total 5 · Earned revenues	596,173
Total Income	2,313,411
Cost of Goods Sold	
5000 · Direct Program Expenses	
5100 · Contract Staff Fees	
5101 · Teaching Fees	11,780
5102 · MI Fees	2,475
5103 · Coordinator Fees	
51031 · Coordinator Fees - Payment	7,949
51032 · Coordinator Fees - Program Cred	0
Total 5103 · Coordinator Fees	7,949
5104 · Other Staff Fees	
51045 · Other program staff	2,635
51041 · Kitchen Staff	
510411 · Kitchen Staff - Payment	22,935
510412 · Kitchen Staff - Program Credit	920
510413 · Kitchen Staff - Work-Study	<u>0</u>
Total 51041 · Kitchen Staff	23,855

**Dharma Ocean**  
**Profit & Loss Prev Year**  
January through December 2011

	<u>Jan - Dec 11</u>
51042 · Program Work-Study - Staff	0
Total 5104 · Other Staff Fees	<u>26,490</u>
 Total 5100 · Contract Staff Fees	48,694
5200 · Supplies & Misc Expenses	
5210 · Practice Materials	0
5215 · Flowers	3,411
5220 · Food & Liquor Supplies	
52200 · Food Supplies	68,617
52201 · Liquor	<u>1,794</u>
Total 5220 · Food & Liquor Supplies	70,411
5230 · Program Supplies & Expense	0
5250 · Kitchen/Bathroom Supplies	0
5240 · Audio/Media Inventory COGS	4,315
5260 · Audio/Media Production&Supplies	1,922
5265 · Audio/Media Freight In	<u>335</u>
Total 5200 · Supplies & Misc Expenses	80,393
5300 · Occupancy Expenses	
5301 · Occupancy - Common Area	
53011 · Occupancy-Common Area Contract	3,175
5301 · Occupancy - Common Area - Other	<u>0</u>
Total 5301 · Occupancy - Common Area	3,175
5305 · Occupancy - Participant Paid	
53051 · Occupancy - contract PP	<u>40,254</u>
Total 5305 · Occupancy - Participant Paid	40,254
5310 · Occupancy - Staff Comp	
5311 · Occupancy - Program Staff Comp	
53111 · Occupancy - contract PSC	<u>26,392</u>
Total 5311 · Occupancy - Program Staff Comp	26,392
5312 · Occupancy - MI Comp	
53121 · Occupancy - contract MI Comp	<u>0</u>
Total 5312 · Occupancy - MI Comp	0
5313 · Occupancy - DOF Staff Comp	
53131 · Occupancy-DOF Staff Contract	<u>0</u>
Total 5313 · Occupancy - DOF Staff Comp	0
Total 5310 · Occupancy - Staff Comp	<u>26,392</u>
Total 5300 · Occupancy Expenses	69,821
5400 Meals Expense	
5420 · Meals - Staff Comp	
5423 · Meals - DOFstaff COmp	0
5424 · Meals - Other Comp	0
5425 · Meals - Kusung Comp	<u>0</u>
Total 5420 · Meals - Staff Comp	0
Total 5400 · Meals Expense	0
5700 · Program Credit Card Fees	0
5900 · Program Travel	0
5000 · Direct Program Expenses - Other	<u>0</u>
Total 5000 · Direct Program Expenses	<u>198,908</u>
Total COGS	<u>198,908</u>
Gross Profit	2,114,503
Expense	
7000 · Grant & contract expense	
7020 · Grants to other organizations	<u>525</u>
Total 7000 · Grant & contract expense	525

**Dharma Ocean**  
**Profit & Loss Prev Year**  
January through December 2011

	<u>Jan - Dec 11</u>
7200 · Salaries & related expenses	
7210 · Officer Salaries	185,000
7215 · Payroll-Teacher's Gifts	11,587
7220 · Employee Salaries & Wages	126,554
7222 · Paid Time Off	2,100
7230 · Retirement Contributions	6,158
7241 · Workers Compensation	2,896
7242 · Health Insurance	15,699
7250 · Payroll taxes	140
7252 · FICA Tax	19,761
7253 · Medicare Tax	4,691
7256 · SUTA	1,681
7200 · Salaries & related expenses - Other	0
<b>Total 7200 · Salaries &amp; related expenses</b>	<b>376,267</b>
7500 · Other personnel expenses	
7510 · Fundraising - Professional Fees	0
7520 · Accounting & Tax Prep Fees	173
7540 · Contract Labor	141,353
7920 · Other Professional Fees	6,483
7545 · Program Credit	30,300
7570 · Temporary help - contract	2,774
<b>Total 7500 · Other personnel expenses</b>	<b>181,083</b>
8100 · General/Administrative Expenses	
8112 · Office & Operating Supplies	7,794
8115 · Equipment & Furnishings	35,557
8130 · Telecommunications & Internet	16,039
8135 · Web Hosting Fees	6,544
8136 · Software & Licenses	1,810
8140 · Postage, shipping, delivery	2,497
8170 · Printing & copying	3,449
7900 · Audio/Media Expenses	0
8175 · Advertising expenses	22,831
8185 · Royalties on Publications	1,970
8195 · Donated materials & supplies	0
8100 · General/Administrative Expenses - Other	0
<b>Total 8100 · General/Administrative Expenses</b>	<b>98,490</b>
8200 · Occupancy Expenses	
8226 · Operating & Janitorial Supplies	21,682
8210 · Rental Fees	132
8240 · Lease Rent	16,036
8220 · Utilities (DOH, Cabin, Ret Ctr)	
8221 · Utilities - DOH	5,070
8222 · Utilities - Retreat Center	12,887
8223 · Utilities - Admin Office	3,097
8224 · Utilities - Cabin	0
<b>Total 8220 · Utilities (DOH, Cabin, Ret Ctr)</b>	<b>21,054</b>
8225 · Housekeeping & Janitor Contract	8,335
8230 · Property Dues & RE Tax	3,714
8260 · Maintenance & Repairs	
8261 · Maintenance & R - DOH	
82611 · Maintenance & R-DOH Contractor	2,554
8261 · Maintenance & R - DOH - Other	0
<b>Total 8261 · Maintenance &amp; R - DOH</b>	<b>2,554</b>
8262 · Maintenance & R- Retreat Center	
82621 · Maintenance RC-Contractor	8,460
8262 · Maintenance & R- Retreat Center - Other	843
<b>Total 8262 · Maintenance &amp; R- Retreat Center</b>	<b>9,294</b>
8263 · Maintenance & R - Admin Office	
82631 · Maintenance & R-Admin Contract	0
8263 · Maintenance & R - Admin Office - Other	227
<b>Total 8263 · Maintenance &amp; R - Admin Office</b>	<b>227</b>
8264 · Maintenance & R - Cabin	0
<b>Total 8260 · Maintenance &amp; Repairs</b>	<b>12,074</b>

**Dharma Ocean**  
**Profit & Loss Prev Year**  
January through December 2011

	Jan - Dec 11
8450 Deprec & amort - allowable	137,021
8290 Donated Facility, equip & supp	<u>5,017</u>
<b>Total 8200 · Occupancy Expenses</b>	<b>225,066</b>
8300 Events, Meetings & Travel exp	
7555 · Travel, Transport & Lodging	13,028
8320 · Food & Beverage expense	7,707
8355 · Facility & Equipment Rental	667
7550 · Event & Meeting Expenses	8,951
7551 · Recognition & Awards	3,133
7556 · Other Teaching/Staff Expenses	0
7560 · Staff Development	683
7565 · Conference Fees	<u>0</u>
<b>Total 8300 · Events, Meetings &amp; Travel exp</b>	<b>34,170</b>
8500 Misc expenses	
8520 · Business Insurance	5,731
8590 · License, Permit, Copyright Fees	<u>1,262</u>
<b>Total 8500 · Misc expenses</b>	<b>6,993</b>
8600 · Business expenses	
8620 · Sales taxes	568
8640 · Bank Fees	1,860
8645 · Credit Card Fees	27,630
8650 · Taxes - other	1,358
8660 · Fines, penalties, judgements	<u>60</u>
<b>Total 8600 · Business expenses</b>	<b>31,476</b>
<b>Total Expense</b>	<b>954,069</b>
<b>Net Ordinary Income</b>	<b>1,160,434</b>
Other Income/Expense	
Other Income	
9100 · Gain/Loss on Disposal of Assets	<u>-223</u>
<b>Total Other Income</b>	<b>-223</b>
Other Expense	
9700 · New Construction	
9701 · General Requirements	
97011 · General Requirements Contract	0
9701 · General Requirements - Other	<u>0</u>
<b>Total 9701 · General Requirements</b>	<b>0</b>
9702 · Sitework	0
9703 · Concrete	0
9704 · Masonry	
97041 · Masonry Contract	<u>0</u>
<b>Total 9704 · Masonry</b>	<b>0</b>
9706 · Woods & Plastics	0
9707 · Thermal & Moisture Protection	
97071 · Thermal & Moisture Contract	0
9707 · Thermal & Moisture Protection - Other	<u>0</u>
<b>Total 9707 · Thermal &amp; Moisture Protection</b>	<b>0</b>
9708 · Doors & Windows	0
9709 · Finishes	
97091 · Finishes Contract	<u>0</u>
<b>Total 9709 · Finishes</b>	<b>0</b>
9710 · Specialties	0
9715 · Mechanical	
97151 · Mechanical Contract	<u>0</u>
<b>Total 9715 · Mechanical</b>	<b>0</b>
9716 · Electrical	0

**Dharma Ocean**  
**Profit & Loss Prev Year**  
January through December 2011

	<u>Jan - Dec 11</u>
9721 · General Conditions	
97211 · General Conditions Contract	0
9721 · General Conditions - Other	<u>0</u>
Total 9721 · General Conditions	0
9723 · Construction Management Fees	0
9724 · Architect & Consultant Fees	0
9725 · Construction Accounting Fees	0
9726 · Expense Reimbursement	0
9729 · Other Budgeted Expense	0
9730 · Other Non-budgeted Expense	<u>0</u>
Total 9700 · New Construction	<u>0</u>
Total Other Expense	<u>0</u>
Net Other Income	<u>-223</u>
Net Income	<u><b>1,160,211</b></u>