

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## Form **990**

SCANNED

2015

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Internal Revenue Service 01/01 2014, and ending 20 14 For the 2014 calendar year, or tax year beginning D Employer identification number C Name of organization MetaFoundation Check if applicable 65-1208462 Doing business as Post Carbon Institute Address change Room/suite E Telephone number Number and street (or P O box if mail is not delivered to street address) Name change 707-823-8700 613 4th Street Suite 208 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated G Gross receipts \$ 814,722 Amended return Santa Rosa, CA, 95494 H(a) Is this a group return for subordinates? Yes No F Name and address of principal officer Metafoundation Application pending H(b) Are all subordinates included? Tyes Tho 613 4th Street Suite 2018, Santa Rosa, CA 95404 If "No," attach a list (see instructions) ) ◀ (insert no ) ☐ 4947(a)(1) or 501(c) ( Tax-exempt status Website: ▶ www.postcarbon.org H(c) Group exemption number ▶ L Year of formation M State of legal domicile Form of organization Corporation Trust Association OR Part I Summary Briefly describe the organization's mission or most significant activities: Post Carbon Institute provides individuals, communities, businesses, and governments with the resources needed to understand and respond to the interrelated Activities & Governance economic, energy, and environmental crises that define the 21st century Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 3 3 Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) 4 6 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 9 Total number of volunteers (estimate if necessary) CEIVED 6 3 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 0 **Current Year** Contributions and grants (Part VIII, line h) 858,484 765,545 8 Revenue Program service revenue (Part VIII, line 2g) 9 10 1,291 1,138 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 108,434 48,039 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 968,209 814,722 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 45,000 15,000 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 625,824 607,012 15 Professional fundraising fees (Part IX, column (A), line 11e) 16a () W 1 4 ... Total fundraising expenses (Part IX, column (D), line 25) ▶ b Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 283,156 273,804 17 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 953.980 895,816 18 Revenue less expenses. Subtract line 18 from line 12 -81,094 19 14.229 End of Year **Beginning of Current Year** Total assets (Part X, line 16) 692,265 608,297 20 21 Total liabilities (Part X, line 26) . 28,587 25,713 22 Net assets or fund balances. Subtract line 21 from line 20 663,678 582,584 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 officer) is based on all information of which preparer has any knowledge true, correct, and complete Declaration of preparer (other than Sign Signature of office Date Here Philip Jensen, CFO Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check I If Paid self-employed **Preparer** Firm's EIN ▶ Firm's name **Use Only** Phone no Firm's address ▶ May the IRS discuss this return with the preparer shown above? (see instructions) Yes No Form **990** (2014) For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y

	D (2014) Page 2
Part I	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
·	Post Carbon Institute provides individuals, communities, businesses, and governments with the resources needed to understand and respond to the interrelated economic, energy, and environmental crises that define the 21st century. We envision a world of resilient communities and re-localized economies that thrive within ecological bounds.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	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 \$ 158,402 including grants of \$ 0 ) (Revenue \$ 0 )
70	Energy Reality Campaign Working with environmental and energy groups, advocates, and thought leaders from across the
	spectrum, the Energy Reality Campaign creates a systemic understanding of the interrelationships between energy, the economy, and the natural world. PCI is collaborating with allies to engage environmental and political leaders - and through them, their constituencies. We offer activists the tools to build energy literacy. A particular focus for this program in 2014 was the Public Energy Art Kit (P.E.A.K.), a large-format printed compendium of 14 posters about the challenge of tackling climate change, energy inequality, and fossil fuel dependency. 35,000 copies of P.E.A.K. were printed and distributed through 175 partner organizations and "energy reality ambassadors" across the United States, while many thousands more were shared electronically via social media.
4b	(Code: ) (Expenses \$ 188,912 including grants of \$ 15,000 ) (Revenue \$ 0 )  Busting the Shale Hype. PCI continues to expose the true potential of the so-called "shale revolution" through analysis, writing,
	and public speaking. In 2014, we published Drilling Deeper: A Reality Check on U.S. Government Forecasts for a Lasting Tight Oil & Shale Gas Boom, the most comprehensive analysis of shale gas and tight oil production ever published. We also conducted
	public speaking in Sacramento, New York City, and online, along with creative media, investigative articles, and social media communication. Our work was covered in over 40 national and regional media outlets and the report has been viewed/downloaded more than 100,000 times to date.
4c	(Code: ) (Expenses \$ 103,691 including grants of \$ 0 ) (Revenue \$ 0 )
	Community Resilience Initiative. Post Carbon Institute brings the best local resilience-building ideas and models to thousands of communities tackling complex environmental, economic, energy, and social challenges. Recognizing that communities are the key to effective change, PCI offers a robust resource platform, resilience.org; publications like our Community Resilience Guides; and
	multimedia that bring the best ideas and models for re-localizing economies and building a sustainable future. In 2014, resilience.
	org received over 1.5 million unique visitors and 5 million page views. We published over 2,000 original and re-posted articles on
	the site, including the "Weaving the Community Resilience and New Economy Movement" report and interview series.
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 1
_	(Expenses \$ 278,855 including grants of \$ 0 ) (Revenue \$ 0 )

729,860

4e Total program service expenses ▶

Part I	V Checklist of Required Schedules			
1	_		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	<b>√</b>	-
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	/	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		
		_3_		<u>✓</u>
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	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<b>√</b>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<b>✓</b>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	_	<b>✓</b>
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	9		<b>√</b>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<b>✓</b>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	, ,	4.4	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	<b>✓</b>	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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.	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	1
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	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
		For	m <b>99</b> 0	(2014)

rart	Checklist of Required Schedules (continued)		<del></del>	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
<b>4</b> 1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, 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		<b>\</b>
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 25a	24a		<b>✓</b>
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		<b>✓</b>
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		<b>✓</b>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		<b>&gt;</b>
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		<b>~</b>
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):	#j	ت ک والگذر	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√ √
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>√</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			_
	Part VI	37	<u> </u>	<b>✓</b>
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	38	1	
		Г	~ aan	10044

Form **990** (2014)

Part				
<u> </u>	Check if Schedule O contains a response or note to any line in this Part V			. 📙
4.	Fatautha ausahan manadad in Bau O of Faura 1000 Fatau O of ant analysable		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	3  '		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4 ~	7	
С	reportable gaming (gambling) with backup withholding rules for reportable payments to veridors and		-	<u> </u>
ο-		1c	<b>√</b>	1 70
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 2		
_		9 12		- -8:8
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		12.1	····
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<b>✓</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	_	<b></b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		1	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1		
	account)?	4a		<b>1</b>
b	If "Yes," enter the name of the foreign country: ▶	,		ier h
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	\ \ \ .		10.20
	(FBAR).	·	_	ليساك
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<b>-</b>	<b>√</b>
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	1_	<b>/</b>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			١.
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	15		16:30
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	11.3		4 - 1
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	*#8		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	·	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7</b> g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		أغث ا	الحالا
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		3.	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	<u> </u>	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	)	
10	Section 501(c)(7) organizations. Enter:	967 C		113
а	Initiation fees and capital contributions included on Part VIII, line 12	_ *:1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:	- 37		
а	Gross income from members or shareholders	_\_\\.\\.\\.		
b	Gross income from other sources (Do not net amounts due or paid to other sources		~ ·	*   🗱
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	а	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			Har
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	2	4 5	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13	а	
	Note. See the instructions for additional information the organization must report on Schedule O.	4	1 381	. 13:3
b	Enter the amount of reserves the organization is required to maintain by the states in which		44	35
	the organization is licensed to issue qualified health plans			4
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14	а	<b>√</b>
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14	ь	

Part	Governance, Management, and Disclosure For each "Yes' response to line 8a, 8b, or 10b below, describe the circumstance Check if Schedule O contains a response or note to any line	es, processes, or change:	s in Schedule O. S	See ins	tructi	ions.
Secti	tion A. Governing Body and Management					
					Yes	No
1a	If there are material differences in voting rights among members of if the governing body delegated broad authority to an executive committee, explain in Schedule O.	the governing body, or committee or similar	1a 7			***
ь 2	Enter the number of voting members included in line 1a, above, who Did any officer, director, trustee, or key employee have a family rel any other officer, director, trustee, or key employee?		relationship with	***** *****	1	
3	Did the organization delegate control over management duties custo supervision of officers, directors, or trustees, or key employees to a man			3		1
4	Did the organization make any significant changes to its governing docume	ents since the prior Form 9	90 was filed?	4		✓
5	Did the organization become aware during the year of a significant d	iversion of the organization	on's assets?.	5_		✓
6	Did the organization have members or stockholders?			6	,	✓
7a	one or more members of the governing body?			7a		1
b	stockholders, or persons other than the governing body?			7b	to the control of	✓
8	Did the organization contemporaneously document the meetings he the year by the following:	eld or written actions un	dertaken during	菲		
a				8a	<b>√</b>	
р				8b	<b>V</b>	
9	the organization's mailing address? If "Yes," provide the names and	addresses in Schedule C	)	9	ada l	<b>✓</b>
Secti	ction B. Policies (This Section B requests information about poli	cies not required by th	e irrierriai never	iue Ci	Yes	No
10a	a Did the organization have local chapters, branches, or affiliates? .			10a		1
b				10b		
11a	a Has the organization provided a complete copy of this Form 990 to all member	rs of its governing body befo	re filing the form?	11a	<b>√</b>	
b	b Describe in Schedule O the process, if any, used by the organization	to review this Form 990.		* # #	**	**
12a		" go to line 13		12a	<b>✓</b>	
b				12b	✓	<u> </u>
С	describe in Schedule O how this was done		policy? If "Yes,"	12c	✓	
13				13	<b>√</b>	<u> </u>
14 15	——————————————————————————————————————	rsons include a review	and approval by	14		<b>3</b>
а	T			15a		11.00
a b				15b	1	1
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see a Did the organization invest in, contribute assets to, or participate	instructions). ın a joint venture or sım	ılar arrangement			33
b	with a taxable entity during the year?	requiring the organizatio tax law, and take steps	n to evaluate its to safeguard the	16a 16b		Í
Sect	ction C. Disclosure			1.50	·	
17		iled ▶ CA	<del></del>	•		
18	Section 6104 requires an organization to make its Forms 1023 (or 1 available for public inspection. Indicate how you made these available	024 if applicable), 990, a	and 990-T (Sectio	n 501	(c)(3)s	only
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how) the organization material statements available to the public during the tax year.	Other (explain in So ade its governing docume		terest	polic	y, and
20		possesses the organizati	on's books and re	ecords	:▶	
	Asher Miller, (707)823-8700	ŭ				

-orm	990	(2014)	

Page 7

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee,"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ited any currer	nt officer, director	r, or trustee.
		(C)								
(A)	(B)	(44.5	-4 -4		ition			(D)	(E)	(F)
Name and Title	Average					than one south		Reportable	Reportable	Estimated
	hours per	er office				or/trust		compensation	compensation from	amount of
	week (list any hours for	유표	Inst	Officer	ξ	흵	Former	from the	related organizations	other compensation
	related organizations	Individual trustee or director	Institutional trustee	cer	Key employee	hest	曹	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	below dotted	of a	onal		рb	8 6		(44-271099-14113C)	Ϊ	organization and related
	line)	uste	1 2		/ee	per			1	organizations
		, a	stee			Highest compensated employee				
						<u></u>			<del> </del>	
Debbie Cook	1									
President	0	1		✓				o	[ o	0
PhilipJensen	1									
Chief Financial Officer	0	1		✓				o	0	0
Richard Heinberg	40									<del></del>
Secretary	0	✓		✓		✓		77,982	0	0
Jenny Kassen	11	ļ								
Director	0	<b>✓</b>		1				0	0	0
Jason Bradford	11			ŀ						
Director	0	<b>✓</b>	L_	<u> </u>			<u> </u>	0	0	0
Nate Hagens	1									
Director	0	<b>✓</b>			<u> </u>		ļ	0	0	0
Chuck Collins	11									
Director	0	<b>✓</b>					<u> </u>	0	0	0
Asher Miller	40									
Executive Director	0			✓	-		_	75,000	0	0
	<b></b>									
							┢	-		
							1			
			_	-			├-			<del></del>
	<b>+</b>									
				<del>                                     </del>	-		-		-	
	<del> </del>									
				-	-		$\vdash$			
	<b>†</b>			İ						
<del></del>			$\vdash$	├	$\vdash$			<del> </del>	-	<del> </del>
	<b>†</b>								-	
	1		1	Ц.,					L	

•	(A) Name and title	(B) Average hours per week (list any	box,	unles	Pos eck s pe d a d	rson	than on the than of the than of the than of the than of the the than of the	n an tee)	(D)  Reportable compensation from	(E) Reportable compensation related		Estir amo	F) nated unt of her	
	·	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MI		compe from organ and r	ensation in the lization elated zations	
						-								
													•	
		 					<u> </u>							
1b c	Sub-total			•	•			<b>&gt;</b>	152,982		0	-		0
d 2	Total (add lines 1b and 1c)		d to th					e) w	ho received m		0,00	0 of		0
3	Did the organization list any former of	ficer, direc	tor, c					emp	oloyee, or high	nest comper	sate	d 😱	Yes	No
4	employee on line 1a? If "Yes," complete of any individual listed on line 1a, is the organization and related organizations	sum of re	porta	ble d	con	npe	nsatio							
5	individual									 zation or indi	 vidua	1-300-5300000		<u>√</u>
Section	n B. Independent Contractors	rii res, c	Junpi	ere	301	ieut	ne J		such person	· · · ·	•	5		<u> </u>
1	Complete this table for your five highest compensation from the organization. Repyear.	•											n's ta	X
	(A) Name and business add	Iress							(B) Description of s	services		(C) Compens	ation	
2	Total number of independent contractor received more than \$100,000 of compensations.							th	nose listed ab	ove) who		14.5		* 1

Form **990** (2014)

Part	AIM	Statement of Reve Check if Schedule O		enonce or note to	n any line in this	: Part VIII		
, *	*	Check is schedule O	contains a res	sponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Grants	1a b c	Federated campaigns Membership dues Fundraising events	1b	_	* '	\$ .	* \$ . \$	
Contributions, Gifts, Grants and Other Similar Amounts	d e f	Related organizations Government grants (confidence of the contributions, grants)	1d	0				
Contribut and Othe	g h	and similar amounts not incl Noncash contributions includ <b>Total.</b> Add lines 1a–16	uded above 1f ed in lines 1a-1f \$	765,545 0	765,545			
Program Service Revenue	2a b c d			Business Code	\$ - · · · · · · · · · · · · · · · · · ·	- # 4. × \$ 1 1	e y mayye — z i da	4 6 4 4 4 10 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Program	e f g	All other program serv			0	0	0	0
	3	Investment income ( and other similar amo Income from investment	(including divi unts)	dends, interest,	1,138	1,138	0	0
	5	Royalties	(i) Real		0	0	0	0
	6a b c	Gross rents  Less: rental expenses  Rental income or (loss)  Net rental income or (		0 0				
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis	(i) Securities	(II) Other				
	c d	and sales expenses . Gain or (loss) Net gain or (loss) .		0 0				
levenue	8a	Gross income from fu events (not including \$ of contributions reporte	0	į				
Other Re		See Part IV, line 18 . Less: direct expenses		a b				
	9a	•	ımıng activities.	а				
	о с 10а	Less: direct expenses Net income or (loss) f Gross sales of in returns and allowance	rom gaming ad ventory, less		, , , , , ,			
	ь с	Less: cost of goods s Net income or (loss) f	rom sales of in	ventory . ▶  Business Code		5445	3 , 35	
	11a b c	Publishing Activity Appearance & other s		511190 900099	26,986 21,053	26,986	0	0
	d e 12	All other revenue .  Total. Add lines 11a- Total revenue. See ii			48,039 814,722	* * *	\$ * 3 * 3 * 7 * 7 * 7	

Part IX Statement of Functional Expenses

Section	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	All other organization	ns must complete co	olumn (A).
	Check if Schedule O contains a respon	se or note to any lii	ne in this Part IX .		🗸
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	15,000	15,000		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0	At.	
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	152,982	138,679	£ 050	7.445
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	152,982	138,679	6,858	7,445
7	Other salaries and wages	358,370	261,591	60,672	36,107
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	201,391	0,672	30,107
9	Other employee benefits	52,537	41,154	6,937	4,446
10	Payroll taxes	43,123	33,612	5,772	3,739
11 a	Fees for services (non-employees):  Management	0	0	0	0
ь	Legal	0	0	0	0
С	Accounting	8,500	0	8,500	0
d	Lobbying	0			0
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	184,656	180,148	2,719	1,789
12	Advertising and promotion	0	0		0
13	Office expenses	28,432	18,219	8,422	1,791
14	Information technology	0	0	0	0
15	Royalties	0	0		0
16	Occupancy	23,961	18,763		
17 18	Travel	19,720	15,548	1,753	2,419
19	Conferences, conventions, and meetings .	2,796	2,654	83	59
20	Interest	0	0	0	
21	Payments to affiliates	0	0	0	<del></del>
22	Depreciation, depletion, and amortization .	2,440	1,910	322	208
23	Insurance	3,299	2,582	436	281
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 b c d	(A) amount, list line 24e expenses on Schedule O.)	``, ' ', '			
e	All other expenses				-
25	Total functional expenses. Add lines 1 through 24e	895,816	729,860	105,630	60,326
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   If following SOP 98-2 (ASC 958-720)  If the organization is the organization of the organization is the organization of the organization is the organization of the organizat				

Pa	art X	Balance Sheet					
•		Check if Schedule O contains a response or	note	to any line in this Pa	ırt X		🗆
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			150,698	1	151,644
1	2	Savings and temporary cash investments			515,273	2	326,952
	3	Pledges and grants receivable, net			0	3	35,000
	4	Accounts receivable, net			7,591		75,381
		Loans and other receivables from current and trustees, key employees, and highest co Complete Part II of Schedule L		5			
		Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), an sponsoring organizations of section 501(c)(9) volun organizations (see instructions). Complete Part II of Sche	ons (a d con tary	s defined under section tributing employers and employees' beneficiary	0		
Assets	_				0	<del>                                     </del>	0
SSI	7	Notes and loans receivable, net			0	1	0
•	8	Inventories for sale or use			0	<del>-</del>	0
	9 10a	Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	 10a	36,621	13,142	7	16,199
	b	Less: accumulated depreciation	10b	35,300	3,761	10c	1,321
Į	11	Investments—publicly traded securities			0	11	0
	12	Investments-other securities. See Part IV, line 1	11 .		0	12	0
	13	Investments-program-related. See Part IV, line	11 .		0	13	0
	14	Intangible assets			0	14	0
	15	Other assets. See Part IV, line 11			1,800	15	1,800
	16	Total assets. Add lines 1 through 15 (must equa	al line	34)	692,265	16	608,297
	17	Accounts payable and accrued expenses			28,587	_	25,713
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
Liabilities	22	Loans and other payables to current and for trustees, key employees, highest compen disqualified persons. Complete Part II of Schedu	sated			22	
Lia	23	Secured mortgages and notes payable to unrela		nird parties		23	
	24	Unsecured notes and loans payable to unrelated		•		24	
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines of Schedule D	payal	oles to related third		25	
	26	Total liabilities. Add lines 17 through 25 .			28,587		25,713
_ sec		Organizations that follow SFAS 117 (ASC 958) complete lines 27 through 29, and lines 33 and	, che	eck here ► 🕢 and			
au	27	Unrestricted net assets			663,678		413,584
Bal	28	Temporarily restricted net assets				28	169,000
פַ	29	Permanently restricted net assets			0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 95 complete lines 30 through 34.				] <sub>id</sub> , ',	
şţ	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or ed				31	
ţ	32	Retained earnings, endowment, accumulated inc				32	
Š	33	Total net assets or fund balances			663,678	1	582,584
	34	Total liabilities and net assets/fund balances .			692,265	34	608,297
							Form <b>990</b> (2014)

_	4	^
Page		~

Part	XI Reconciliation of Net Assets			
•	Check if Schedule O contains a response or note to any line in this Part XI			🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1		814,722
2	Total expenses (must equal Part IX, column (A), line 25)	2		895,816
3	Revenue less expenses. Subtract line 2 from line 1	3		-81,094
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		663,678
5	Net unrealized gains (losses) on investments	5		0
6	Donated services and use of facilities	6		0
7	Investment expenses	7		0
8	Prior period adjustments	8		0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10		582,584
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<del></del>		Yes No
1	Accounting method used to prepare the Form 990:  Cash  Accrual  Other		3° ¥ 4	Yes No
'	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in	~ , 5:	
	Schedule O.	piani in	34	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	
	If "Yes," check a box below to indicate whether the financial statements for the year were com			
	reviewed on a separate basis, consolidated basis, or both:	•		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		3.4	36 J 5 3
b	Were the organization's financial statements audited by an independent accountant?		2b	<b>√</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	مؤر بعن	استان در ،
	separate basis, consolidated basis, or both:			
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		<b>3</b> · .	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or			
	of the audit, review, or compilation of its financial statements and selection of an independent according		2c	✓
	If the organization changed either its oversight process or selection process during the tax year, ex	cplain in		
	Schedule O.			* 1/1 (P) (W)
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	torth in		
	the Single Audit Act and OMB Circular A-133?		3a	<b></b>   ✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergouired audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3ь	
	required addit of addits, explain why in ochequie o and describe any steps taken to undergo such a	iuuiio.		000 (00 : 1)
			Form	<b>990</b> (2014)

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

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

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

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer identification number MetaFoundation Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I 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.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% 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). 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . Provide the following information about the supported organization(s). (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported organization (described on lines 1-9 sted in your governing support (see other support (see document? above or IRC section instructions) instructions) (see instructions)) Yes Nο (A) (B) (C) (D) (E)

Total

,	(Complete only if you checked the Part III. If the organization fails to	ne box on line o aualify unde	e 5, 7, or 8 of er the tests lis	Part I or if the sted below, pl	e organizatıor ease comple	n failed to qua te Part III.)	llify under
Section	on A. Public Support						-
	dar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	930,068	895,451	867,147	858,484	765,545	4,316,695
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	o	0
4	Total. Add lines 1 through 3	930,068	895,451	867,147	858,484	765,545	4,316,695
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)	<u> </u>	**************************************	- 828 3 89 -	/ 1 1 1		219,664
6	Public support. Subtract line 5 from line 4.	## G :3 * >	15.4.4(3).8	**************************************	*		4,097,031
	on B. Total Support  dar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
7	Amounts from line 4	930,068	895,451	<del>                                     </del>	858.484	765,545	4,316,695
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar				2.5.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	sources	2,557	1,342	1,498	1,291	1,138	7,826
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	o	0	0.	0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
11 12	<b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc.	(see instruction	l	2 2 3 3 3	~ * * * * * * * * * * * * * * * * * * *	12	4,324,521 451,779
13	First five years. If the Form 990 is for the	he organizatior	n's first, secon			ear as a sectio	n 501(c)(3)
C4:	organization, check this box and stop he on C. Computation of Public Suppo			<del></del>		· · · · ·	· · · 🗀
<u>Secti</u>	Public support percentage for 2014 (line			I 1 column (fl)		14	94.74 %
15 16a	Public support percentage for 2014 (interpublic support percentage from 2013 Sc 331/3% support test—2014. If the organ box and stop here. The organization qua	hedule A, Part zation did not	II, line 14 check the box	on line 13, and	d line 14 is 331	15 /3% or more, cl	94.32 % neck this
b	331/3% support test—2013. If the organic check this box and stop here. The organic	nization did no	ot check a box	x on line 13 or	16a, and line		_
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the "organization	eets the "facts- facts-and-circu	and-circumstaumstaumstances" tes	ances" test, che st. The organiz	eck this box ar ation qualifies	nd <b>stop here.</b> E as a publicly so 	explain in upported
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization in Part VI how the organization in supported organization	tion meets the neets the "fact	e "facts-and-c	ircumstances" tances" test. T	test, check th	nis box and st	op here.
18	Private foundation. If the organization d	id not check a	box on line 13	3, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	if the organization falls to qualify	under the te	Sts listed beit	Jw, please co	implete Fait i	1.)	
	on A. Public Support	1 4			(.0.00:5	(.) 22( : - 1	
_	dar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise		_				<del></del>
2	sold or services performed, or facilities						
	furnished in any activity that is related to the						
_	organization's tax-exempt purpose		<u>.</u>	_			
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the	1					
	organization's benefit and either paid		]				
_	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge	-					<del></del>
6	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3	<del></del>	<del> </del>				
7a	received from disqualified persons .						
, I	· · · · ·	1	<del>  </del>				· · · · · · · · · · · · · · · · · · ·
b	Amounts included on lines 2 and 3 received from other than disqualified	1					
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	TILLII.	REFER	LALOS	44148	101111	
	line 6)		14555	44049404	* * 4 * * * * * *	#116	
Secti	on B. Total Support			_			
Calen	dar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses		1				
	acquired after June 30, 1975		ļ				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on			İ			
40	-			<u> </u>			
12	Other income. Do not include gain or loss from the sale of capital assets			]			
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,		_				
.5	and 12.)						
14	First five years. If the Form 990 is for the	he organizatio	n's first, secon	id, third, fourth	n, or fifth tax ve	ear as a section	n 501(c)(3)
	organization, check this box and stop he	-			-		
Secti	on C. Computation of Public Suppo	rt Percentag	je				
15	Public support percentage for 2014 (line		-			15	%
16	Public support percentage from 2013 Sc			<u> </u>	<u> </u>	16	%
	on D. Computation of Investment In					- <del>1</del> 1	<u>.</u>
17	Investment income percentage for 2014	•		-			%_
18	Investment income percentage from 201						<u>%</u>
19a	331/3% support tests—2014. If the organ						
	17 is not more than 331/3%, check this box		-			<del>-</del>	
b	331/3% support tests—2013. If the organi line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization d		_				
20	Fire to uniquition in the organization of	ILL HOLDINGON B	237 OII IIIC 14	, , , , , , , , , , , , , , , , , , , ,	CHOCK THE DUX	and see monde	J., J. 13

#### **Supporting Organizations** Part IV

Section A. All Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

1	Are all of the	organization's	supported	organizations	listed b	y na	ame	ın th	ne o	rganization's	governing

- documents? If "No." describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
*		4, 1
	. `	
1		
29 -	1, 5	1 50
1 %	1	
		لعقضا
2	1	
	× 5√4'#	4 %
3a		***************************************
- 3	, <u>%</u>	\$15 W
* **	a. a	1.2
3	ع د ۴	لئت
3b		
J	-	
20		لحددا
30	er %	3 % 4
<u> </u>	·/ \	~* .1,1
4a		
8 76	· <b>\$8</b> 66	4.4
	1 1 1	<b>7</b> 55
****	2,3,	
4b	<u> </u>	
	3 Gp	
	ZVII	
211	3 " 3	
4c	ļ	
1000	e 🖈 s	>#\\\
17	2 6.30	13.5.8Y
	1. 104	32 Q
	12.00	12732
1.136	10023	X. (* Z
5a		
4,	4.1	886
	<u> </u>	2002
ac		
5c	ļ	
, *	. 3/4	13.21
, * **		
1.		
	1 48	
113		الملك
6_	<u> </u>	
1.13	100	15.3
		Table 1
7	ļ.,	
8		15.7
8		
>145 m		1 m
i .,	1 2 30	
بالأشبية		
9a		
	A **,	
9b		PART TAR
30	. ~ 2	3, 8,50 34
	<u>هُــــَــــــــــــــــــــــــــــــــ</u>	13
9с		L
		[** \$ 4]
2 3	,	
سنشسقس		- à6l
10a		149.5
17.883.5	c 255 %	■ 3/200 h. 3

10b

	18 A ( 1011) 335 01 335 12) 2014			age J
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		3	( )
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	110		
<b>.</b>	A family member of a person described in (a) above?	11a 11b		
b	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ion B. Type I Supporting Organizations	110		
0001	on or type to appearing organizations	_	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		103	1
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			3,1
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1 3-	ar	
	controlled the organization's activities. If the organization had more than one supported organization,		1. J.,	- 1
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	· .		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	g 200	· ····································	434
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	\$ ***	ž 4	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	,	• }	s ,'ä
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
		3	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control	. ~	. 4.3	
	or management of the supporting organization was vested in the same persons that controlled or managed	1, 5	i iko	
	the supported organization(s).	1	3 3.	
Soct	ion D. All Type III Supporting Organizations	<u> </u>		
Sect	Ion b. All Type III Supporting Organizations	<del></del>	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	[18. b)	163 () ()	140
•	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			. 101
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	100	4 40	W.
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	0 4	r .d .	a ja
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1 4		7 % %
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	#	~ <u>,</u> ,	
	significant voice in the organization's investment policies and in directing the use of the organization's		. ₩,	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	äbe:	10.00	- 4
	supported organizations played in this regard.	3_		L.,
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s):
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (	see ins	tructi	ons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	111	1 23	8 8 7 VI
a	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>		. X	\$ <u>\$</u> £
	those supported organizations and explain how these activities directly furthered their exempt purposes,	Jan.	* .	
	how the organization was responsive to those supported organizations, and how the organization determined		9 4	184 .
	that these activities constituted substantially all of its activities.	2a		<del></del>
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	,	* *	51
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		* 3' ; i.	7
	reasons for the organization's position that its supported organization(s) would have engaged in these		10 Y	155
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	17.57	( 4]	19
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1.73		Ľ.,
	trustees of each of the supported organizations? Provide details in Part VI.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	8 % )	<u> </u>	L 2
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		L

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gan	izations	
<ul> <li>1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must co</li> </ul>			nstructions. All
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4	_	
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
	7	-	
7 Other expenses (see instructions)  8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
8 Adjusted Net Income (Subtract lines 5, 6 and 7 from line 4)	0		(B) Current Year
Section B - Minimum Asset Amount		(A) Prior Year	(optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	3		
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):	1 4		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		-
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	\$ 14 h. 1. * 27 1 th 1	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4	1 4 ··· 1/2 · 1/4	×
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		r	
emergency temporary reduction (see instructions)	6		<u> </u>
7 Check here if the current year is the organization's first as a non-functional	ly-ır	tegrated Type III supporting	g organization (see
instructions)			

Part		3) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)		<u> </u>	
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	sponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Se	ection E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2014	Amount for 2014
_ 1	Distributable amount for 2014 from Section C, line 6	1. 4		
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			· / ,5 / 4435 - 1000 / 1000
3	Excess distributions carryover, if any, to 2014:		* *	V V - 8" VV . 3 . 3
a				ang sangar 🏚 🎉
b			1.4 1.4.61	
С		<u> </u>	12 4 2 2 2	
d		* * * * * * * * * * * * * * * * * * * *	٠ '	
ее	From 2013	· · · · ·		
f	Total of lines 3a through e		.,	
g	Applied to underdistributions of prior years	10 mm 10 mm		
<u>h</u>	Applied to 2014 distributable amount	ra, i sin tie		
<u>i</u> _	Carryover from 2009 not applied (see instructions)	128 2 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	東京に新 神の中 東水 か、 ま!	* 4 ' 3 7 - 2 ' ' - 1 ' 33
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	837 Y 25 X 16 Z 6 26		
4	Distributions for 2014 from Section	Control of the Control		
	D, line 7: \$	18 : 18 m - 12 m 1 m 28 / 18 m 1 m 2 m 1		
a	Applied to underdistributions of prior years		23 A.o. 2.00 2.00000	Marie Contract
<u> </u>	Applied to 2014 distributable amount			% V
<u>C</u>	Remainder. Subtract lines 4a and 4b from 4.			
_	Remaining underdistributions for years prior to 2014, if			
5	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).		. 8 S. 471. 675. 7 S. 876. 756. 3	
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).	4.60 la. (. 540 A)		
7	Excess distributions carryover to 2015. Add lines 3j			3 7 36 36 36 36 36 36 36 36 36 36 36 36 36
	and 4c.	 		
8	Breakdown of line 7:			
<u>a</u>				
<u> </u>				
<u>c</u>		×		
d	Excess from 2013	1 · · · · · · · · · · · · · · · · · · ·		
<u>e</u>	Excess from 2014			* 1 · · · · · · · · · · · · · · · · · ·

	Form 990 or 990-EZ) 2014	Page 8
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b Part III, line 12. Also complete this part for any additional information. (See instructions.)	o; and
<del>-</del> -		
<del>-</del> -		
		·
		·
		:

## SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

**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.
► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** 65-1208462 MetaFoundation Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990. Part IV. line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . 1 Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 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 Conservation Easements. Part II Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure ☐ Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year Total number of conservation easements . . . . . . . . . 2a Total acreage restricted by conservation easements . . . Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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. 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

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, in Part XIII, the text of the footnote to its financial statements that describes these items.

public service, provide the following amounts relating to these items:

Part	Organizations Maintaining Co	llections of Art, Hist	orical Treasures	, or Other Similar A	Assets (continued)
. 3	Using the organization's acquisition, accededition items (check all that apply).	ession, and other recor	ds, check any of th	e following that are a	significant use of its
а	☐ Public exhibition	<b>d</b> [	Loan or exchang	je programs	
b	☐ Scholarly research	<b>e</b> [	Other		
С	☐ Preservation for future generations				
4	Provide a description of the organization's XIII.	s collections and expla	in how they further	the organization's ex	empt purpose in Part
5	Dunng the year, did the organization solid assets to be sold to raise funds rather than				
Part					
	Complete if the organization ans	swered "Yes" to Forn	n 990, Part IV, line	9, or reported an a	mount on Form
	990, Part X, line 21.				
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?				
b	If "Yes," explain the arrangement in Part X	(III and complete the fo	llowing table:		
		·	•		Amount
С	Beginning balance			1c	
d	Additions during the year			1d	
е	Distributions during the year			1e	
f	Ending balance			1f	<u> </u>
2a	Did the organization include an amount or			ustodial account liabil	ity? 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Part X	(III. Check here if the ex	planation has been	provided in Part XIII	<b>.</b>
Par			•		
	Complete if the organization ans	swered "Yes" to Forn	n 990, Part IV, line	10.	
	(a	a) Current year (b) Pro	or year (c) Two year	rs back (d) Three years ba	ack (e) Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and				
•	programs				
f	Administrative expenses				
g	End of year balance				-
2	Provide the estimated percentage of the c	current year end balanc	e (line 1g, column (a	)) held as:	
а	Board designated or quasi-endowment				
b	·	%			
c	Temporarily restricted endowment ▶	%			
	The percentages in lines 2a, 2b, and 2c sh				
3a	Are there endowment funds not in the po		zation that are held	and administered for	the
	organization by:				Yes No
	(i) unrelated organizations				. 3a(i)
	(ii) related organizations				. 3a(ii)
b	If "Yes" to 3a(ii), are the related organization	ons listed as required o	n Schedule R? .		. 3b
4	Describe in Part XIII the intended uses of				
Part	VI Land, Buildings, and Equipme	ent.			· · · · · · · · · · · · · · · · · · ·
	Complete if the organization and		n 990, Part IV, line	11a. 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
	Land	0	0	5.3.3.6.2.7.5.5.5.5	0
b	Buildings	0	0	0	- 0
C	Leasehold improvements	0	0	0	0
ď	Equipment	36,621	0	35,300	1,321
e	Other	0	0	0	0
	Add lines 1a through 1e. (Column (d) must				1,321

(a) Description of security or category (noticular)   (b) Book value   (c) Method of valuation   (cost or end of year market value   (c) Method of valuation   (cost or end of year market value   (c) Method of valuation   (c) Method of valuation   (c) Method of value   (c) Method of valuation   (c) Method of value	Part VII	Investments—Other Securities.  Complete if the organization answered "Yes"	to Form 99	0, Part IV, lin	e 11b. See Form	990, Part X, line 12.
2) Closely-held equity interests		(a) Description of security or category			(c) Met	hod of valuation
(A) (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(1) Financial	derivatives	·			
(6) (7) (8) (8) (9) (9) (9) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	(2) Closely-h	neld equity interests				
(6) (7) (8) (8) (9) (9) (9) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	(3) Other					
Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 15.	(A)					
Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 15.						
Control   Column						
Cold.   Column   b) must equal Form 990, Part X, col.   B) line   12.   E					-	
Gill						
History Column (b) must equal Form 990, Part X, col. (B) line 12) ▶  Part VIII Investments — Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (d) Method of valuation Cost or end-of-year market value (e) Method of valuation Cost or end-of-year market value (e) Method of valuation Cost or end-of-year market value (e) Method of valuation Cost or end-of-year market value (e) Method of value (f) (f) (f) (f) (f) (f) (f) (f) (f) (f)						
Investments — Program Related.						
Investments - Program Related.   Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.    (a)   Description of investment   (b)   Book value   (c)   Method of valuation   Cost or send-of-year market value		000 D 4V! (D) b 401 D				
Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.					1 % % 1 J.M. 1	**************************************
(a) Description of investment	Part VIII		to Form 99	0 Part IV lin	e 11c See Form	990 Part X line 13
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value (c) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g					(c) Met	thod of valuation
(9) (6) (9) (7) (8) (9) (9) (1014) Column (b) must equal Form 990, Part X, col (B) line 13) ▶  Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value (c) (1) (2) (3) (4) (5) (6) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (1) (9) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (6) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (6) (7) (8) (9) (9) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (6) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (6) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (2) (3) (4) (5) (6) (7) (6) (9) (9) (9) (1) (1) (1) (2) (2) (2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (2) (2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (2) (2) (2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (2) (2) (2) (3) (4) (5) (6) (7) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (2) (2) (2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (1) (2) (2) (2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (1) (2) (2) (2) (3) (4) (4) (5) (5) (6) (7) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (1) (1) (2) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (6) (7) (7) (8) (8) (9) (9) (1) (1) (1) (1) (1) (1) (2) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (8) (8) (8) (9) (8) (8) (8) (8) (8) (8) (8) (8) (8) (8	(1)					
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶  Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of hability (b) Book value (1) Federal income taxes (2) (3) (4) (6) (6) (7) (6) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Z. (a) (b) Book value (c) (c) (d) (d) (e) (f) (e) (f) (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	(2)					
(5) (6) (7) (8) (9)  Part IX Other Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (6) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(3)					
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶  Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (7) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(4)					
(7) (8) (9)  Total (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶  Part IX  Other Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description  (b) Book value  (c) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X  Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  (1) Federal income taxes (2) (3) (4) (5) (6) (7) (6) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Z Liability for uncertain tax positions. in Part XIII, provide the text of the footnote to the organization's financial statements that reports the						
(6) (9) (9) (10tal (Column (b) must equal form 990, Part X, col. (B) line 13) ▶  Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description  (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Lability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						
(9)   Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶   Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)   Part X   Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description   (b) Book value   (c)   (d)   (c)   (d)   (d)   (e)   (e						
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13)   Part X					<del>                                     </del>	
Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value (c) (b) Book value (c) (d) (d) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e		(b) must equal Form 990, Part X, col. (B) line 13.)			(5 '4/8/8/ <b>(4/8</b> /5)'	to be a little of the first
Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (c) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Zero Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Zero Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Zero Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Zero Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶					L 2	I.) 35 (886) 882 ° A 7 7 85 ° 5 2
(a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	· cirt w		to Form 99	0, Part IV, lir	ne 11d. See Form	990, Part X, line 15.
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(1)					
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						
(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(4)					
(7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(5)					
(8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(6)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)   2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(7)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						<u> </u>
Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(9)	(h) must squal Form 000, Bort V col (P) line 15	<del></del>			
Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the			<del>/ · · · · ·</del>	· · · ·	· · · · · · · · ·	
1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	Part X	Complete if the organization answered "Yes"	to Form 99	0, Part IV, lii	ne 11e or 11f. See	e Form 990, Part X,
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)   2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	1.		ok value	F& 3/4 / / / / / / / / / / / / / / / / / /		747 <u>940 a bergijan</u>
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)   2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(1) Federal i	ncome taxes				
(4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(2)					
(5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(3)					
(6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						
(7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						รวิวัง ได้โดยสี 41 - ส์ให้ ค.ศ. พัญธิ สีเกล โดว ได้ เสาะเรียส คระบัติ
(8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the			<u>_</u>			
(9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						evirtigae.
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		(1) 15 000 D 11/1 051 D				
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the			41-6-1	1 2 2 2 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3	1 14 5月1 (後後後	Arcon a Name; I as a supplementary
	2. Liability fo	or uncertain tax positions. In Part XIII, provide the text of t	ine tootnote to	tne organizati	on's financial statem	ents that reports the

Part	Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" to Form 990,			Return.	
1	Total revenue, gains, and other support per audited financial statements		<del>.</del>	1	814,722
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		1	- 1	
а	Net unrealized gains (losses) on investments	2a	o	,	
b	Donated services and use of facilities	2b	0		
С	Recoveries of prior year grants	2c	0	1	
d	Other (Describe in Part XIII.)		0		
e	Add lines 2a through 2d			2e	(
3	Subtract line 2e from line 1		[	3	814,722
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	0		
C	Add lines <b>4a</b> and <b>4b</b>			4c	(
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 12.)		5	814,722
Part				r Return.	
	Complete if the organization answered "Yes" to Form 990,	Part IV, line 12	2a.		
1	Total expenses and losses per audited financial statements			1	895,816
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
С	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	895,816
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	<del> </del>	0		
b	Other (Describe in Part XIII.)	4b	. 0		
C				4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, II XIII Supplemental Information.	ne 18.)		5	895,816
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par				
					·
<del>-</del>					
			••-•-		

# SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

2014

OMB No 1545-0047

Open to Public Inspection

**Employer Identification number** 

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. ▶ Attach to Form 990.

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Schedule I (Form 990) (2014) ° □ (h) Purpose of grant or assistance ✓ Yes 65-1208462 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) Cat No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance For Paperwork Reduction Act Notice, see the Instructions for Form 990. (p) EIN 1 (a) Name and address of organization or government MetaFoundation (1) Sch I, Stmt 1 Part Part II **1**2 N 0 <u>@</u> ₹ Ð 9 E (8) 6 5

Part III

Part III	<b>Grants and Other Assistance to Domestic Individuals.</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	mestic Individua space is needed.	<b>ils.</b> Complete if the i.	e organization answ	ered "Yes" to Form 990, I	art IV, line 22.
	(a) Type of grant or assistance		(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
8						
ო						
4						
5						
9						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the information re	equired in Part I, lir	ne 2, Part III, column	(b), and any other additi	onal information.
Schedule I, Funder.	Schedule I, Part I, Line 2 - PCI monitors grantees throughout the project to insure they carry out the terms of their grant contract. The grantees participate in the final grant reporting to the Funder.	nout the project to ir	sure they carry out the	ne terms of their grant o	ontract. The grantees particit	ate in the final grant reporting to the
						Schedule I (Form 990) (2014)

## **SCHEDULE 0** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization		Employer Identification number
MetaFoundation		65-1208462
Form 990, Part VI, Section B, Line 11b - The entire Board is provided with	a copy of the draft 990 prep	ared by staff prior to it being signed
by the CFO. The 990 is posted on the PCI website.	2.1.2.2.7.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	
5) 410 01 01 110 000 10 10 10 10 10 10 10 10		
Form 990, Part VI, Section B, Line 12c - Both staff and Board members are	required to annually review	y the conflict of interest policy and
attest that they are in compliance.	required to aimidally review	the connect of interest policy and
attest that they are in compilance.		
Form 990, Part VI, Section B, Line 15 - The Board must consider compensation	ation lovels paid by similarly	u situated erganizations of a similar
size and purpose and similar geographic area. They may also consider co	mpensation surveys by a 3r	a party.
Form 200 Port VIII Continue On Line 40. The appropriation puts in Figure 11.		
Form 990, Part VI, Section C, Line 19 - The organization puts its financial s	tatements on its website. G	overning documents, including the
conflict of interest policy, are available in the Santa Rosa office.		
Form 990, Part IX, Line 11g - Expenses included in this line are all contrac		
maintenance, publishing services, author and artist fees, video preparation	n fees, & contract shipping.	·
	·	
	,,	
*****	·	
•••••		
	,	
	,	
	·	

MetaFoundation 65-1208462

Form: 990 Page 2

Line Number Part III Line 4d

## Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Outreach & Engagement Post Carbon Institute is helping to "change the conversation," by delving beneath the surface of the existing debate to inform deeper thinking and provoke new ways of understanding Through outreach (like our Speakers Bureau), communication (like our award-winning videos), and engagement (like the Energy Reality Campaign) we tell a different kind of story, grounded on solid research and backed by findings from PCI publications and those of our Fellows In 2014, we delivered 34 inperson and online presentations, produced creative videos like the spoof-ad "Petrolify", and engaged nearly 2 million unique visitors through our various websites	278,855		0
Total:		278,855	0	0

Schedule I, Part IV, Statement 1

Form Schedule I

Page 1

Line Number Part II

MetaFoundation 65-1208462

## Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	
Name and address	Sustainable Markets Foundation	13-4188834	15,000	
	45 West 36th St 6th Floor			
	New York, NY 10018			
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	The grant is for DeSmogBlog Society of British Columbia (a fiscally			
	sponsored project of Sustainable Markets Foundation) for their			
	participation in shale bubble reporting			