

Return of Organization Exempt From Income Tax

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

2007

Open to Public Inspection

Department of the Treasury Internal Revenue Service(77)

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

Form 990 header section including: A For the 2007 calendar year, or tax year beginning, 2007, and ending; B Check if applicable; C Please use IRS label or print or type; D Employer Identification Number; E Telephone number; F Accounting method; G Web site; H and I are not applicable to section 527 organizations; J Organization type; K Check here; L Gross receipts.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with 12 columns for revenue and expenses, and 12 rows for totals. Includes sub-rows for contributions, program service revenue, membership dues, interest, dividends, gross rents, net rental income, other investment income, gross amount from sales of assets, special events, gross sales of inventory, other revenue, and total revenue. Includes a 'RECEIVED' stamp from 'GOLDEN UT' dated 'AUG 18 2008'.

SCANNED SEP 15 2008

61710

**Part II Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach sch) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b>			
<b>22b</b> Other grants and allocations (att sch) See Stmt 3 (cash \$ 40,000. non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b>	40,000.	40,000.	
<b>23</b> Specific assistance to individuals (attach schedule)	<b>23</b>			
<b>24</b> Benefits paid to or for members (attach schedule)	<b>24</b>			
<b>25a</b> Compensation of current officers, directors, key employees, etc listed in Part V-A	<b>25a</b>	110,000.	90,200.	11,000.
<b>b</b> Compensation of former officers, directors, key employees, etc listed in Part V B	<b>25b</b>	0.	0.	0.
<b>c</b> Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	<b>25c</b>	0.	0.	0.
<b>26</b> Salaries and wages of employees not included on lines 25a, b, and c	<b>26</b>	358,456.	332,476.	22,696.
<b>27</b> Pension plan contributions not included on lines 25a, b, and c	<b>27</b>			
<b>28</b> Employee benefits not included on lines 25a - 27	<b>28</b>			
<b>29</b> Payroll taxes	<b>29</b>	13,876.	11,215.	1,737.
<b>30</b> Professional fundraising fees	<b>30</b>	28,711.	1,255.	27,456.
<b>31</b> Accounting fees	<b>31</b>	6,505.	4,908.	1,597.
<b>32</b> Legal fees	<b>32</b>	33,777.	25,539.	8,238.
<b>33</b> Supplies	<b>33</b>	33,391.	26,543.	6,848.
<b>34</b> Telephone	<b>34</b>	11,484.	10,185.	1,299.
<b>35</b> Postage and shipping	<b>35</b>	2,740.	2,241.	458.
<b>36</b> Occupancy	<b>36</b>	20,959.	18,250.	2,709.
<b>37</b> Equipment rental and maintenance	<b>37</b>			
<b>38</b> Printing and publications	<b>38</b>	12,043.	11,524.	519.
<b>39</b> Travel	<b>39</b>	38,832.	34,279.	4,553.
<b>40</b> Conferences, conventions, and meetings	<b>40</b>			
<b>41</b> Interest	<b>41</b>			
<b>42</b> Depreciation, depletion, etc (attach schedule)	<b>42</b>	18,665.	14,783.	3,582.
<b>43</b> Other expenses not covered above (itemize)				
<b>a</b> See Statement 4	<b>43a</b>	396,978.	349,906.	42,466.
<b>b</b> -----	<b>43b</b>			
<b>c</b> -----	<b>43c</b>			
<b>d</b> -----	<b>43d</b>			
<b>e</b> -----	<b>43e</b>			
<b>f</b> -----	<b>43f</b>			
<b>g</b> -----	<b>43g</b>			
<b>44</b> Total functional expenses Add lines 22a through 43g (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	<b>44</b>	1,126,417.	973,304.	107,702.

**Joint Costs.** Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ See Statement 5 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others.)
<p>a EDUCATIONAL PRESENTATIONS: OUR STAFF AND FELLOWS GAVE MORE THAN 100 PUBLIC PRESENTATIONS OF THEIR ONGOING RESEARCH. WE PUBLISHED 12 NEWSLETTERS.</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	156,271.
<p>b RELOCALIZATION NETWORK: OUR NETWORK OF LOCAL GROUPS SUPPORTING OUR WORK GREW FROM 138 TO 182 GROUPS IN 2007. WE CONTINUED TO IMPROVE THE SITE FOR EASE OF GROUP MEMBER USE.</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	270,015.
<p>c POST CARBON CITIES: PUBLISHED THE BOOK "POST CARBON CITIES: PLANNING FOR ENERGY CLIMATE UNCERTAINTY". LAUNCHED WEBSITE WHICH HAS NEWS AND RESOURCES FOR LOCAL GOVERNMENTAL OFFICIALS ON ENERGY AND CLIMATE ISSUES. PUBLISHED 6 NEWSLETTERS.</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	195,249.
<p>d ENERGY FARMS NETWORK: INITIATED ENERGY GARDEN AT HQ IN SEBASTOPOL. HAD 10 EDUCATIONAL TOURS. PRODUCED 40 "HOW-TO" BLOGS ON THE WEBSITE.</p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	198,385.
<p>e Other program services See Statement 6 (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/></p>	153,384.
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶</p>	973,304.

BAA

Form 990 (2007)

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
ASSETS	<b>45</b> Cash – non-interest-bearing	124,134.	<b>45</b>	414,832.
	<b>46</b> Savings and temporary cash investments		<b>46</b>	
	<b>47a</b> Accounts receivable			
	<b>b</b> Less allowance for doubtful accounts	805.	<b>47c</b>	
	<b>48a</b> Pledges receivable			
	<b>b</b> Less allowance for doubtful accounts	510,425.	<b>48c</b>	
	<b>49</b> Grants receivable		<b>49</b>	
	<b>50a</b> Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		<b>50a</b>	
	<b>b</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		<b>50b</b>	
	<b>51a</b> Other notes and loans receivable (attach schedule)			
	<b>b</b> Less allowance for doubtful accounts		<b>51c</b>	
	<b>52</b> Inventories for sale or use	44,339.	<b>52</b>	
	<b>53</b> Prepaid expenses and deferred charges		<b>53</b>	2,035.
	<b>54a</b> Investments – publicly-traded securities		<b>54a</b>	
	<b>b</b> Investments – other securities (attach sch)		<b>54b</b>	
<b>55a</b> Investments – land, buildings, & equipment basis				
<b>b</b> Less: accumulated depreciation (attach schedule)		<b>55c</b>		
<b>56</b> Investments – other (attach schedule)		<b>56</b>		
<b>57a</b> Land, buildings, and equipment basis	130,197.			
<b>b</b> Less accumulated depreciation (attach schedule) <b>Statement 7</b>	33,561.	60,082.	<b>57c</b>	
<b>58</b> Other assets, including program-related investments (describe ► <u>See Statement 8</u> )		<b>58</b>	40,012.	
<b>59 Total assets</b> (must equal line 74) Add lines 45 through 58	739,785.	<b>59</b>	553,515.	
LIABILITIES	<b>60</b> Accounts payable and accrued expenses	31,532.	<b>60</b>	62,714.
	<b>61</b> Grants payable		<b>61</b>	
	<b>62</b> Deferred revenue	36,444.	<b>62</b>	15,000.
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule)	2,457.	<b>63</b>	2,555.
	<b>64a</b> Tax-exempt bond liabilities (attach schedule)		<b>64a</b>	
	<b>b</b> Mortgages and other notes payable (attach schedule)		<b>64b</b>	
	<b>65</b> Other liabilities (describe ► _____)		<b>65</b>	
<b>66 Total liabilities.</b> Add lines 60 through 65	70,433.	<b>66</b>	80,269.	
NET ASSETS OR FUND BALANCES	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	<b>67</b> Unrestricted	632,908.	<b>67</b>	458,246.
	<b>68</b> Temporarily restricted	36,444.	<b>68</b>	15,000.
	<b>69</b> Permanently restricted		<b>69</b>	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 70 through 74			
	<b>70</b> Capital stock, trust principal, or current funds		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds		<b>72</b>	
	<b>73 Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	669,352.	<b>73</b>	473,246.
	<b>74 Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	739,785.	<b>74</b>	553,515.

**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return** (See the instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements		<b>a</b>	930,311.
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12:			
	1 Net unrealized gains on investments	<b>b1</b>		
	2 Donated services and use of facilities	<b>b2</b>		
	3 Recoveries of prior year grants	<b>b3</b>		
	4 Other (specify) _____	<b>b4</b>		
	Add lines <b>b1</b> through <b>b4</b>		<b>b</b>	
<b>c</b>	Subtract line <b>b</b> from line <b>a</b>		<b>c</b>	930,311.
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b> :			
	1 Investment expenses not included on Part I, line 6b	<b>d1</b>		
	2 Other (specify) _____	<b>d2</b>		
	Add lines <b>d1</b> and <b>d2</b>		<b>d</b>	
<b>e</b>	<b>Total revenue</b> (Part I, line 12) Add lines <b>c</b> and <b>d</b>		<b>e</b>	930,311.

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements		<b>a</b>	1,126,417.
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17:			
	1 Donated services and use of facilities	<b>b1</b>		
	2 Prior year adjustments reported on Part I, line 20	<b>b2</b>		
	3 Losses reported on Part I, line 20	<b>b3</b>		
	4 Other (specify) _____	<b>b4</b>		
	Add lines <b>b1</b> through <b>b4</b>		<b>b</b>	
<b>c</b>	Subtract line <b>b</b> from line <b>a</b>		<b>c</b>	1,126,417.
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :			
	1 Investment expenses not included on Part I, line 6b	<b>d1</b>		
	2 Other (specify) _____	<b>d2</b>		
	Add lines <b>d1</b> and <b>d2</b>		<b>d</b>	
<b>e</b>	<b>Total expenses</b> (Part I, line 17) Add lines <b>c</b> and <b>d</b>		<b>e</b>	1,126,417.

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) (See the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
C. RICH DARLEY 327 MURPHY AVE. SEBASTOPOL, CA 95472	Executive Direc 50.00	50,000.	0.	0.
J. DARLEY 327 MURPHY AVE. SEBASTOPOL, CA 95472	President 50.00	60,000.	0.	0.
RANDALL WALLACE 54850 HIGHWAY 1 BIG SUR, CA 93920	Director 1.00	0.	0.	0.
DEBBIE COOK 6692 SHETLAND CIRCLE HUNTINGTON BEACH, CA 92648	Director 1.00	0.	0.	0.
PHILIP JENSEN 3711 LA DONNA AVE PALO ALTO, CA 94306	Director 1.00	0.	0.	0.
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**Part VI Other Information (continued)**

		Yes	No
<b>82 a</b>	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
<b>82 b</b>	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		N/A
<b>83 a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
<b>83 b</b>	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?		N/A
<b>84 a</b>	Did the organization solicit any contributions or gifts that were not tax deductible?		X
<b>84 b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
<b>85 a</b>	<b>501(c)(4), (5), or (6)</b> Were substantially all dues nondeductible by members?		N/A
<b>85 b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		N/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
<b>85 c</b>	Dues, assessments, and similar amounts from members		N/A
<b>85 d</b>	Section 162(e) lobbying and political expenditures		N/A
<b>85 e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		N/A
<b>85 f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e)		N/A
<b>85 g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A
<b>85 h</b>	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		N/A
<b>86 a</b>	<b>501(c)(7) organizations</b> Enter a Initiation fees and capital contributions included on line 12		N/A
<b>86 b</b>	Gross receipts, included on line 12, for public use of club facilities		N/A
<b>87 a</b>	<b>501(c)(12) organizations</b> Enter a Gross income from members or shareholders		N/A
<b>87 b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		N/A
<b>88 a</b>	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX		X
<b>88 b</b>	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI		X
<b>89 a</b>	<b>501(c)(3) organizations</b> Enter Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4958 <u>0.</u>		
<b>89 b</b>	<b>501(c)(3) and 501(c)(4) organizations</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction		X
<b>89 c</b>	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>		
<b>89 d</b>	Enter Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>		
<b>89 e</b>	<b>All organizations</b> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
<b>89 f</b>	<b>All organizations</b> Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
<b>89 g</b>	<b>For supporting organizations and sponsoring organizations maintaining donor advised funds</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
<b>90 a</b>	List the states with which a copy of this return is filed <u>OR CA</u>		
<b>90 b</b>	Number of employees employed in the pay period that includes March 12, 2007 (See instructions)		0
<b>91 a</b>	The books are in care of <u>C. RICH DARLEY</u> Telephone number <u>707-823-8700</u> Located at <u>6971 SEBASTOPOL AVE SEBASTOPOL CA</u> ZIP + 4 <u>95472</u>		
<b>91 b</b>	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country	X	

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts**

**Part VI Other Information** (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91 c X

If 'Yes,' enter the name of the foreign country

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here N/A

and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a ROYALTY INCOME					10,000.
b SPEAKER'S FEES					1,000.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities			1	6,323.	
97 Net rental income or (loss) from real estate.					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					-9,338.
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					8,571.
103 Other revenue. a					
b MISCELLANEOUS			1	4,845.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				11,168.	10,233.
105 Total (add line 104, columns (B), (D), and (E))					21,401.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	See Statement 10

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions)

**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

**106** Did the reporting organization **make** any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity

Yes	No
	X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
<b>Totals</b>				

**107** Did the reporting organization **receive** any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity

Yes	No
	X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
<b>Totals</b>				

**108** Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	X

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

**Please Sign Here**

▶ C. Rich Darley Signature of officer      Date 08/15/2008

▶ C. RICH DARLEY, Executive Director Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature ▶ <u>GREGORY A. BLOCK, CPA</u>	Date <u>8/13/08</u>	Check if self-employed ▶ <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See General Instruction X) <u>N/A</u>
Firm's name (or yours if self-employed) ▶ <u>BLOCK, GAUNCE AND ASSOCIATES</u>		EIN ▶ <u>N/A</u>	
address, and ZIP + 4 ▶ <u>225 W. Plaza Street, Suite 105 Solana Beach, CA 92075</u>		Phone no ▶ <u>(858) 755-8667</u>	

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

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under  
Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.**

OMB No 1545-0047

**2007**

Name of the organization <b>METAFOUNDATION</b>	Employer identification number 65-1208462
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**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				
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-----				
Total number of other employees paid over \$50,000 ▶		0		

**Part II – A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
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Total number of others receiving over \$50,000 for professional services ▶		0

**Part II – B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
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-----		
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-----		
Total number of other contractors receiving over \$50,000 for other services ▶		0

**Part III** Statements About Activities (See instructions.)

	Yes	No
<p><b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>N/A</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>		X
<p><b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)</p> <p><b>a</b> Sale, exchange, or leasing of property?</p>		X
<p><b>b</b> Lending of money or other extension of credit?</p>		X
<p><b>c</b> Furnishing of goods, services, or facilities?</p>		X
<p><b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p> <p style="text-align: center;">See Form 990, Part V</p>	X	
<p><b>e</b> Transfer of any part of its income or assets?</p>		X
<p><b>3a</b> Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments)</p>	X	
<p><b>3b</b> Did the organization have a section 403(b) annuity plan for its employees?</p>		X
<p><b>3c</b> Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement</p>		X
<p><b>3d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>		X
<p><b>4a</b> Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines 4f and 4g</p>		X
<p><b>4b</b> Did the organization make any taxable distributions under section 4966?</p>		N/A
<p><b>4c</b> Did the organization make a distribution to a donor, donor advisor, or related person?</p>		N/A
<p><b>d</b> Enter the total number of donor advised funds owned at the end of the tax year ▶</p>		N/A
<p><b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶</p>		N/A
<p><b>f</b> Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶</p>		0
<p><b>g</b> Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶</p>		0.

Stmt 11

**Part IV Reason for Non-Private Foundation Status** (See instructions.)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box )

- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6  A school. Section 170(b)(1)(A)(ii) (Also complete Part V )
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶ -----
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A )
- 11 a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 11 b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 12  An organization that normally receives **(1) more than 33-1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc, functions – subject to certain exceptions, and **(2) no more than 33-1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A )
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization ▶  
 Type I     Type II     Type III-Functionally Integrated     Type III-Other

**Provide the following information about the supported organizations.** (See instructions )

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b>					0.

- 14  An organization organized and operated to test for public safety. Section 509(a)(4) (See instructions )

**BAA**

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting.*

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	228,246.	24,290.	1,500.		254,036.
<b>16</b> Membership fees received	120.				120.
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	89,413.	46,958.	31,668.	95.	168,134.
<b>18</b> Gross income from interest, dividends, amts rec'd from payments on securities loans (sec 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec 511 taxes) from businesses acquired by the organization after June 30, 1975	299.	5.			304.
<b>19</b> Net income from unrelated business activities not included in line 18					0.
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0.
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0.
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0.
<b>23</b> Total of lines 15 through 22	318,078.	71,253.	33,168.	95.	422,594.
<b>24</b> Line 23 minus line 17	228,665.	24,295.	1,500.		254,460.
<b>25</b> Enter 1% of line 23	3,181.	713.	332.	1.	
<b>26 Organizations described on lines 10 or 11:</b> a Enter 2% of amount in column (e), line 24					<b>26a</b> 5,089.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					<b>26b</b>
c Total support for section 509(a)(1) test. Enter line 24, column (e)					<b>26c</b> 254,460.
d Add Amounts from column (e) for lines 18 _____ 304. 19 _____					<b>26d</b> 304.
22 _____ 26b _____					<b>26e</b> 254,156.
e Public support (line 26c minus line 26d total)					<b>26e</b> 254,156.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 99.88 %
<b>27 Organizations described on line 12:</b> N/A					
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year					
(2006) _____ (2005) _____ (2004) _____ (2003) _____					
b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					
(2006) _____ (2005) _____ (2004) _____ (2003) _____					
c Add Amounts from column (e) for lines: 15 _____ 16 _____					<b>27c</b>
17 _____ 20 _____ 21 _____					<b>27d</b>
d Add Line 27a total _____ and line 27b total _____					<b>27e</b>
e Public support (line 27c total minus line 27d total)					<b>27e</b>
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					<b>27f</b>
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> %

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

**Part V Private School Questionnaire** (See instructions.)  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		N/A	
		Yes	No
<b>29</b>	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
<b>30</b>	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
<b>31</b>	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement ) ----- ----- -----		
<b>32</b>	Does the organization maintain the following		
<b>a</b>	Records indicating the racial composition of the student body, faculty, and administrative staff?		
<b>b</b>	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
<b>c</b>	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
<b>d</b>	Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement ) ----- -----		
<b>33</b>	Does the organization discriminate by race in any way with respect to		
<b>a</b>	Students' rights or privileges?		
<b>b</b>	Admissions policies?		
<b>c</b>	Employment of faculty or administrative staff?		
<b>d</b>	Scholarships or other financial assistance?		
<b>e</b>	Educational policies?		
<b>f</b>	Use of facilities?		
<b>g</b>	Athletic programs?		
<b>h</b>	Other extracurricular activities?  If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement ) ----- -----		
<b>34a</b>	Does the organization receive any financial aid or assistance from a governmental agency?		
<b>b</b>	Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement		
<b>35</b>	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If 'No,' attach an explanation		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See instructions )  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check  **a** if the organization belongs to an affiliated group Check  **b** if you checked 'a' and 'limited control' provisions apply

<b>Limits on Lobbying Expenditures</b>		<b>(a)</b> Affiliated group totals	<b>(b)</b> To be completed for all electing organizations
(The term 'expenditures' means amounts paid or incurred )			
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>		
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>		
<b>38</b> Total lobbying expenditures (add lines 36 and 37)	<b>38</b>		
<b>39</b> Other exempt purpose expenditures	<b>39</b>		
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>		
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table –			
<b>If the amount on line 40 is –</b>	<b>The lobbying nontaxable amount is –</b>		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	<b>41</b>	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>		
<b>43</b> Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>		
<b>44</b> Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>		
<b>Caution:</b> If there is an amount on either line 43 or line 44, you must file Form 4720			

**4 -Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
 See the instructions for lines 45 through 50 )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4 -Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots non-taxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities** (For reporting only by organizations that did not complete Part VI-A) (See instructions )

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

Yes	No	Amount

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (add lines **c** through **h**.)

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities



Client 10

METAFOUNDATION

65-1208462

8/13/08

12 23PM

**Statement 1**  
**Form 990, Part I, Line 8**  
**Net Gain (Loss) from Noninventory Sales**

Other Assets

Description:	COMPUTER		
Date Acquired:	9/30/2003		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		1,441.	
Basis Method:	Cost		
Depreciation:		1,009.	
			Gain (Loss) -432.

Description:	MAC TOWER		
Date Acquired:	9/30/2003		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		1,802.	
Basis Method:	Cost		
Depreciation:		1,261.	
			Gain (Loss) -541.

Description:	LAPTOP		
Date Acquired:	4/16/2004		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		2,507.	
Basis Method:	Cost		
Depreciation:		1,253.	
			Gain (Loss) -1,254.

Description:	FAX MACHINE		
Date Acquired:	7/28/2004		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		602.	
Basis Method:	Cost		
Depreciation:		301.	
			Gain (Loss) -301.

Description:	MONITOR		
Date Acquired:	1/01/2005		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		400.	
Basis Method:	Cost		
Depreciation:		120.	
			Gain (Loss) -280.

Description:	PRINTER		
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Client 10

METAFOUNDATION

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**Statement 1 (continued)**  
**Form 990, Part I, Line 8**  
**Net Gain (Loss) from Noninventory Sales**

Date Acquired:	1/01/2005		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		125.	
Basis Method:	Cost		
Depreciation:		38.	
			Gain (Loss) -87.
Description:	COMPUTER TOWER		
Date Acquired:	1/01/2005		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		540.	
Basis Method:	Cost		
Depreciation:		162.	
			Gain (Loss) -378.
Description:	LAPTOP S (3)		
Date Acquired:	1/07/2005		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		2,980.	
Basis Method:	Cost		
Depreciation:		894.	
			Gain (Loss) -2,086.
Description:	COMPUTER		
Date Acquired:	10/09/2005		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		984.	
Basis Method:	Cost		
Depreciation:		295.	
			Gain (Loss) -689.
Description:	SOFTWARE		
Date Acquired:	9/30/2003		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		361.	
Basis Method:	Cost		
Depreciation:		252.	
			Gain (Loss) -109.
Description:	QUICKBOOKS SOFTWARE		
Date Acquired:	7/12/2004		
How Acquired:	Purchase		
Date Sold:	1/01/2007		

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**Statement 1 (continued)**  
**Form 990, Part I, Line 8**  
**Net Gain (Loss) from Noninventory Sales**

To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		759.	
Basis Method:	Cost		
Depreciation:		380.	
			Gain (Loss) -379.

Description:	FINAL CUT STUDIO SOFTWARE		
Date Acquired:	7/05/2005		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		809.	
Basis Method:	Cost		
Depreciation:		243.	
			Gain (Loss) -566.

Description:	MAZIMIZER SOFTWARE		
Date Acquired:	2/02/2006		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		193.	
Basis Method:	Cost		
Depreciation:		19.	
			Gain (Loss) -174.

Description:	TECH SOUP SOFTWARE		
Date Acquired:	9/30/2006		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		140.	
Basis Method:	Cost		
Depreciation:		14.	
			Gain (Loss) -126.

Description:	DIGITAL CAMERA		
Date Acquired:	9/30/2003		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		577.	
Basis Method:	Cost		
Depreciation:		346.	
			Gain (Loss) -231.

Description:	STEREO		
Date Acquired:	9/30/2003		
How Acquired:	Purchase		
Date Sold:	1/01/2007		
To Whom Sold:			
Gross Sales Price:		0.	
Cost or Other Basis:		252.	

Client 10

METAFOUNDATION

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12.23PM

**Statement 1 (continued)**  
**Form 990, Part I, Line 8**  
**Net Gain (Loss) from Noninventory Sales**

Basis Method:	Cost			
Depreciation:		151.		
			Gain (Loss)	-101.

Description:	DIGITAL CAMERA			
Date Acquired:	4/23/2004			
How Acquired:	Purchase			
Date Sold:	1/01/2007			
To Whom Sold:				
Gross Sales Price:		0.		
Cost or Other Basis:		347.		
Basis Method:	Cost			
Depreciation:		139.		
			Gain (Loss)	-208.

Description:	FRIDGE			
Date Acquired:	3/23/2006			
How Acquired:	Purchase			
Date Sold:	1/01/2007			
To Whom Sold:				
Gross Sales Price:		0.		
Cost or Other Basis:		215.		
Basis Method:	Cost			
Depreciation:		21.		
			Gain (Loss)	-194.

Description:	TABLES & DESKS (2)			
Date Acquired:	3/23/2006			
How Acquired:	Purchase			
Date Sold:	1/01/2007			
To Whom Sold:				
Gross Sales Price:		0.		
Cost or Other Basis:		108.		
Basis Method:	Cost			
Depreciation:		11.		
			Gain (Loss)	-97.

Description:	AUDIO RECORDER			
Date Acquired:	10/01/2000			
How Acquired:	Purchase			
Date Sold:	1/01/2007			
To Whom Sold:				
Gross Sales Price:		0.		
Cost or Other Basis:		400.		
Basis Method:	Cost			
Depreciation:		160.		
			Gain (Loss)	-240.

Description:	DESK & CHAIRS (3)			
Date Acquired:	4/20/2006			
How Acquired:	Purchase			
Date Sold:	1/01/2007			
To Whom Sold:				
Gross Sales Price:		0.		
Cost or Other Basis:		284.		
Basis Method:	Cost			
Depreciation:		28.		

Client 10

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**Statement 1 (continued)**  
**Form 990, Part I, Line 8**  
**Net Gain (Loss) from Noninventory Sales**

Gain (Loss) -256.

Description: CHAIRS & TABLES  
 Date Acquired: 5/31/2006  
 How Acquired: Purchase  
 Date Sold: 1/01/2007  
 To Whom Sold:  
 Gross Sales Price: 0.  
 Cost or Other Basis: 262.  
 Basis Method: Cost  
 Depreciation: 26.

Gain (Loss) -236.

Description: TELEPHONE HEADSETS  
 Date Acquired: 7/13/2006  
 How Acquired: Purchase  
 Date Sold: 1/01/2007  
 To Whom Sold:  
 Gross Sales Price: 0.  
 Cost or Other Basis: 317.  
 Basis Method: Cost  
 Depreciation: 32.

Gain (Loss) -285.

Description: TELEPHONE HEADSETS  
 Date Acquired: 12/27/2006  
 How Acquired: Purchase  
 Date Sold: 1/01/2007  
 To Whom Sold:  
 Gross Sales Price: 0.  
 Cost or Other Basis: 98.  
 Basis Method: Cost  
 Depreciation: 10.

Gain (Loss) -88.

Total Gain (Loss) Other Assets \$ -9,338.Total Net Gain (Loss) From Noninventory Sales \$ -9,338.

**Statement 2**  
**Form 990, Part I, Line 10**  
**Gross Profit (Loss) From Sales Of Inventory**

\$ 17,878.

Gross Sales	\$ 17,878.
Less Returns & Allowances	0.
Net Sales	\$ 17,878.
Less Cost Of Goods Sold	9,307.
Gross Profit From Sales Of Inventory	\$ <u>8,571.</u>

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**Statement 3**  
**Form 990, Part II, Line 22b**  
**Other Grants and Allocations**

Cash Grants and Allocations

Amount Given: \$ 40,000.

Total Grants and Allocations \$ 40,000.

**Statement 4**  
**Form 990, Part II, Line 43**  
**Other Expenses**

	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
AUTO - PARKING	9,761.	8,692.	1,069.	
AUTO EXPENSES - FUEL	1,028.	930.	98.	
AUTO REPAIR	444.	444.		
BANK CHARGES	1,045.	820.	225.	
COMPUTER ROOM SUPPLIES	6,801.	5,924.	877.	
CONSULTING	13,077.	11,770.	1,307.	
CONTINUING EDUCATION	1,218.	1,011.	207.	
CONTRIBUTIONS	152.	127.	25.	
DUES & SUBSCRIPTIONS	1,156.	939.	217.	
INSURANCE	6,609.	4,986.	1,623.	
INTERNET	4,123.	3,412.	711.	
INVENTORY OBSOLESCENCE	39,850.	30,068.	9,782.	
LIBRARY BOOKS	208.	164.	44.	
LICENSE & PERMITS	110.	82.	28.	
LOSS ON CURRENCY EXCHANGE	6,612.	4,988.	1,624.	
MEALS & ENTERTAINMENT	7,415.	6,628.	554.	233.
OUTSIDE SERVICES	141,225.	114,328.	22,524.	4,373.
PAYROLL PROCESSING EXPENSES	3,650.	2,874.	776.	
PRODUCTION EXPENSES	2,967.	2,967.		
PROFESSIONAL DEVELOPMENT	400.	400.		
PROJECT EXPENSES	132,994.	132,994.		
RESEARCH	1,073.	1,034.	39.	
SERVER & BANDWIDTH	13,305.	12,912.	393.	
STORAGE	319.	240.	79.	
TAXES	337.	254.	83.	
UTILITIES	1,099.	918.	181.	
Total	\$ 396,978.	\$ 349,906.	\$ 42,466.	\$ 4,606.

**Statement 5**  
**Form 990, Part III**  
**Organization's Primary Exempt Purpose**

TO START, DEVELOP, AND OFFER ORGANIZATIONAL ASSISTANCE AND FINANCIAL SUPPORT TO EDUCATIONAL AND CHARITABLE PROGRAMS, PROJECTS AND ORGANIZATIONS THAT HELP HUMANITY LEARN TO LIVE WITHIN THE LIMITS OF THE BIOSPHERE.

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**Statement 6**  
**Form 990, Part III, Line e**  
**Statement of Program Service Accomplishments**

Description	Grants and Allocations	Program Service Expenses
OIL DEPLETION PROTOCOL: PRESENTED THE IDEA TO CITIES AS A KEY ACTION IN THE POST CARBON CITIES BOOK. Includes Foreign Grants: No		48,449.
GLOBAL PUBLIC MEDIA: 300,000 VISITS TO OUR WEBSITE TO HEAR AND SEE 160 AUDIO AND VIDEO INTERVIEWS. HAVE 5 NEW PARTNERS AND ARCHIVED THEIR MEDIA WORK ON ENERGY DECLINE AND RELOCALIZATION. Includes Foreign Grants: No		104,935.
Total	\$ 0.	\$ 153,384.

**Statement 7**  
**Form 990, Part IV, Line 57**  
**Land, Buildings, and Equipment**

Category	Basis	Accum. Deprec.	Book Value
Automobiles / Transportation Equipment	\$ 25,555.	\$ 2,556.	\$ 22,999.
Machinery and Equipment	93,362.	27,662.	65,700.
Miscellaneous	11,280.	3,343.	7,937.
Total	\$ 130,197.	\$ 33,561.	\$ 96,636.

**Statement 8**  
**Form 990, Part IV, Line 58**  
**Other Assets**

DEPOSIT	\$ 317.
DEPOSITS IN TRANSIT	21,634.
DUE FROM POST CARBON, INC.	16,861.
EMPLOYEE ADVANCE	1,200.
Total	\$ 40,012.

**Statement 9**  
**Form 990, Part V-A, Line 75b**  
**Compensation Paid to Related Individuals**

Name and Relationship \_\_\_\_\_  
 C. RICH DARLEY AND J. DARLEY  
 THE EXECUTIVE DIRECTOR AND THE PRESIDENT ARE HUSBAND AND WIFE.

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**Statement 10**  
**Form 990, Part VIII**  
**Relationship of Activities to the Accomplishment of Exempt Purposes**

<u>Line #</u>	<u>Explanation of Activities</u>
93A&B	ALL INCOME GENERATING ACTIVITIES CONTRIBUTE TO THE ORGANIZATION'S MANDATE OF EDUCATING THE PUBLIC ON THE LIMITS OF THE BIOSHPERE AND THE BENEFITS OF RELOCALIZATION. THIS IS DONE THROUGH SPEAKING TO AUDINECES, DISSEMINATING NEWSLETTERS, ORGANIZING LOCAL GROUPS THAT SUPPORT OUR MISSION, MAINTAINING WEB SITES, DEVELOPING EDUCATIONAL RESOURCES, AND CREATING DEMONSTRATION MODELS.
102	ALL INCOME GENERATING ACTIVITIES CONTRIBUTE TO THE ORGANIZATION'S MANDATE OF EDUCATING THE PUBLIC ON THE LIMITS OF THE BIOSPHERE AND THE BENEFITS OF RELOCALIZATION. THIS IS DONE THROUGH SPEAKING TO AUDIENCES, DISSEMINATING NEWSLETTERS, ORGANIZING LOGAL GROUPS THAT SUPPORT OUR MISSION, MAINTAINING WEB SITE, DEVELOPING EDUCATIONAL RESOURCES, AND CREATING DEMONSTRATION MODELS.

**Statement 11**  
**Schedule A, Part III, Line 3a**  
**Qualifications of Recipients Receiving Grants or Loans**

TO QUALIFY FOR A METAFUNDATION FELLOWSHIP, THE PROSPECTIVE RECIPIENT MUST BE A RECOGNIZED EXPERT IN THE FIELD OF ENERGY-RESOURCE DEGRADATION OR RELOCALIZATION, AS EVIDENCED BY PUBLICATIONS, PUBLIC LECTURES AND APPERANCES. CANDIDATES ARE SELECTED ANNUALLY BY THE PRESIDENT AND EXECUTIVE DIRECTOR, AND ACCEPTANCE OF A FELLOWSHIP INCLUDES AN AGREEMENT TO CONTRIBUTE TO THE WORK OF METAFUNDATION. THE BOARD-APPROVED CONFLICT-OF-INTEREST POLICY IS FOLLOWED WHENEVER FELLOWSHIPS ARE GIVEN.

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct.	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis Reductio.	Depr Basis	Prior Depr.	Method	Life	Rate	Current Depr.
Form 990/990-PF																
Auto / Transport Equipment																
1	TOYOTA PRIUS	3/03/07		25,555							25,555		S/L	HY	5 .10000	2,556
Total Auto / Transport Equipment																
Machinery and Equipment																
13	HARD DRIVES (15)	9/30/03		1,081							1,081		S/L	HY	5 .20000	216
14	LAPTOP	4/16/04		2,771							2,771	1,385	S/L	HY	5 .20000	554
15	PRINTER	8/13/04		121							121	60	S/L	HY	5 .20000	24
16	MONITOR	9/01/04		413							413	206	S/L	HY	5 .20000	83
17	LAPTOP	1/01/05		1,000							1,000	300	S/L	HY	5 .20000	200
18	LAPTOP	1/01/05		1,000							1,000	300	S/L	HY	5 .20000	200
19	PRINTER	1/01/05		125							125	38	S/L	HY	5 .20000	25
20	SERVER	1/01/05		2,502							2,502	751	S/L	HY	5 .20000	500
21	LAPTOP	4/01/05		1,915							1,915	574	S/L	HY	5 .20000	383
22	AUDIO MIXER	4/08/05		232							232	70	S/L	HY	5 .20000	46
23	HARD DRIVES (4)	5/16/05		959							959	288	S/L	HY	5 .20000	192
24	SERVER	6/01/05		1,200							1,200	360	S/L	HY	5 .20000	240
25	SERVER	6/01/05		1,200							1,200	360	S/L	HY	5 .20000	240
26	SERVER	10/21/05		1,772							1,772	531	S/L	HY	5 .20000	354
27	LAPTOP	1/31/06		1,698							1,698	170	S/L	HY	5 .20000	340
28	LAPTOP	2/28/06		1,880							1,880	188	S/L	HY	5 .20000	376
29	LAPTOP	2/28/06		1,081							1,081	108	S/L	HY	5 .20000	216
30	SERVERS (2)	3/02/06		1,842							1,842	184	S/L	HY	5 .20000	368
31	LAPTOPS (3)	4/04/06		2,636							2,636	264	S/L	HY	5 .20000	527

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Depr.	Salvage /Basis Reductn.	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
32	COMPUTERS	5/08/06		2,099							2,099	210	S/L HY	5	.20000	420
33	PC NETWORK	6/01/06		244							244	24	S/L HY	5	.20000	49
34	DATABASE SERVER	6/01/06		4,767							4,767	477	S/L HY	5	.20000	953
35	NOTEBOOK	6/01/06		1,622							1,622	162	S/L HY	5	.20000	324
36	PC NETWORK	6/02/06		5							5	1	S/L HY	5	.20000	1
37	LAPTOP	6/08/06		848							848	85	S/L HY	5	.20000	170
38	LAPTOP	6/16/06		1,066							1,066	107	S/L HY	5	.20000	213
39	MAIL SERVER	7/13/06		2,739							2,739	274	S/L HY	5	.20000	548
40	COMPUTER	8/10/06		800							800	80	S/L HY	5	.20000	160
41	HARD DRIVES	8/31/06		330							330	33	S/L HY	5	.20000	66
42	HARD DRIVES	8/31/06		148							148	15	S/L HY	5	.20000	30
43	COMPUTER	9/10/06		1,009							1,009	101	S/L HY	5	.20000	202
44	PRINTER	9/28/06		302							302	30	S/L HY	5	.20000	60
45	HARD DRIVES (3)	9/28/06		404							404	40	S/L HY	5	.20000	81
46	HARD DRIVE	11/08/06		119							119	12	S/L HY	5	.20000	24
47	HARD DRIVES	11/30/06		327							327	33	S/L HY	5	.20000	65
48	HARD DRIVES (2)	12/13/06		342							342	34	S/L HY	5	.20000	68
49	COMPUTERS	12/27/06		380							380	38	S/L HY	5	.20000	76
50	HARD DRIVE	12/31/06		171							171	17	S/L HY	5	.20000	34
51	HARD DRIVE	12/31/06		83							83	8	S/L HY	5	.20000	17
52	LAPTOP	2/19/07		2,796							2,796	2,796	S/L HY	5	.10000	280
53	SCANNER/PRINTER	2/20/07		324							324	324	S/L HY	5	.10000	32
54	COMPUTER	3/26/07		244							244	244	S/L HY	5	.10000	24
55	PRINTER	3/31/07		420							420	420	S/L HY	5	.10000	42
56	COMPUTER	4/19/07		1,658							1,658	1,658	S/L HY	5	.10000	166
57	COMPUTER	5/14/07		280							280	280	S/L HY	5	.10000	28
58	COMPUTER	6/28/07		568							568	568	S/L HY	5	.10000	57

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis Reductio.	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
59	COMPUTER	6/28/07		407							407		S/L	HY	5 10000	41
60	HARD DRIVES (4)	7/17/07		757							757		S/L	HY	5 .10000	76
61	HARD DRIVES (2)	7/31/07		248							248		S/L	HY	5 .10000	25
62	COMPUTER	9/10/07		997							997		S/L	HY	5 10000	100
63	PRINTER	9/28/07		1,960							1,960		S/L	HY	5 .10000	196
64	COMPUTER	11/12/07		738							738		S/L	HY	5 .10000	74
65	COMPUTER	11/13/07		1,174							1,174		S/L	HY	5 10000	117
66	COMPUTER	11/19/07		1,168							1,168		S/L	HY	5 .10000	117
67	LAPTOP	11/27/07		520							520		S/L	HY	5 10000	52
68	COMPUTER	11/29/07		1,480							1,480		S/L	HY	5 .10000	148
69	WEATHER STATION	3/31/06		1,946							1,946	195	S/L	HY	5 20000	389
70	WEATHER STATION	10/03/06		1,152							1,152	82	S/L	HY	7 .14290	165
71	WEATHER STATION	10/03/06		896							896	64	S/L	HY	7 14290	128
72	INVERTER	10/03/06		384							384	28	S/L	HY	7 .14290	55
73	WEATHER STATION	1/03/07		1,225							1,225		S/L	HY	7 07140	87
74	WEATHER STATION	1/04/07		1,225							1,225		S/L	HY	7 07140	87
75	WEATHER STATION	3/08/07		1,358							1,358		S/L	HY	7 07140	97
76	WEATHER STATION	3/08/07		1,325							1,325		S/L	HY	7 07140	95
77	WEATHER STATION	4/20/07		3,242							3,242		S/L	HY	7 .07140	231
78	WEATHER STATION	5/02/07		546							546		S/L	HY	7 07140	39
79	WEATHER STATION	7/30/07		1,950							1,950		S/L	HY	7 07140	139
80	TRACTOR	8/19/07		4,700							4,700		S/L	HY	7 .07140	0
81	LIGHTING	9/30/03		540							540	324	S/L	HY	5 20000	108
82	MICROPHONES	9/30/03		576							576	346	S/L	HY	5 .20000	115
83	MICROPHONES	9/30/03		540							540	324	S/L	HY	5 20000	108
84	MICROPHONES	9/30/03		468							468	281	S/L	HY	5 20000	94
85	VIDEO CAMERA	9/30/03		2,162							2,162	1,297	S/L	HY	5 20000	432

12/31/07

## 2007 Federal Book Depreciation Schedule

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct.	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Depr.	Salvage /Basis Reductn.	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.	
86	SOUND MIXER	9/30/03		216							216	130	S/L	HY	5	.20000	43
87	TELEPHONE SPLITTER	9/03/03		504							504	303	S/L	HY	5	.20000	101
88	VIDEO MACHINE	9/30/03		166							166	99	S/L	HY	5	.20000	33
89	TELEPHONE INTERVIEW KIT	6/30/04		744							744	298	S/L	HY	5	.20000	149
90	TELEPHONE INTERVIEW KIT	6/30/05		349							349	116	S/L	HY	5	.20000	70
91	PROJECTOR	12/15/05		756							756	151	S/L	HY	5	.20000	151
92	BOOKCASES (2)	3/23/06		108							108	11	S/L	HY	5	.20000	22
93	OFFICE CHAIRS (2)	3/23/06		116							116	12	S/L	HY	5	.20000	23
94	MICROPHONES	6/01/06		1,376							1,376	138	S/L	HY	5	.20000	275
95	RECORDER	6/01/06		388							388	39	S/L	HY	5	.20000	78
96	MICROPHONES	6/01/06		133							133	13	S/L	HY	5	.20000	27
97	BOOKSHELVES	7/24/06		179							179	18	S/L	HY	5	.20000	36
98	BOOKSHELVES	7/31/06		179							179	18	S/L	HY	5	.20000	36
99	DIGITAL CAMERA	8/07/06		529							529	53	S/L	HY	5	.20000	106
100	MICROPHONES	8/25/06		181							181	18	S/L	HY	5	.20000	36
101	STAND	8/25/06		638							638	64	S/L	HY	5	.20000	128
102	HYBRID RECORDER	8/25/06		822							822	82	S/L	HY	5	.20000	164
103	CAMERA	9/28/06		533							533	53	S/L	HY	5	.20000	107
104	DESKTOP LABELLER	12/31/06		165							165	16	S/L	HY	5	.20000	33
105	POCKET PC	2/23/07		539							539		S/L	HY	5	10000	54
106	POLYCOM PHONES	4/12/07		1,210							1,210		S/L	HY	5	.10000	121
107	AIR CONDITIONER	7/03/07		324							324		S/L	HY	5	.10000	32
108	COMPUTER	9/30/03	1/01/07	1,441							1,441	1,009	S/L	HY	5	20000	0
109	MAC TOWER	9/30/03	1/01/07	1,802							1,802	1,261	S/L	HY	5	.20000	0
110	LAPTOP	4/16/04	1/01/07	2,507							2,507	1,253	S/L	HY	5	20000	0
111	FAX MACHINE	7/28/04	1/01/07	602							602	301	S/L	HY	5	20000	0
112	MONITOR	1/01/05	1/01/07	400							400	120	S/L	HY	5	20000	0

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis Reductio.	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.	
113	PRINTER	1/01/05	1/01/07	125							125	38	S/L	HY	5	20000	0
114	COMPUTER TOWER	1/01/05	1/01/07	540							540	162	S/L	HY	5	20000	0
115	LAPTOP S(3)	1/07/05	1/01/07	2,980							2,980	894	S/L	HY	5	20000	0
116	COMPUTER	10/09/05	1/01/07	984							984	295	S/L	HY	5	20000	0
122	DIGITAL CAMERA	9/30/03	1/01/07	577							577	346	S/L	HY	5	20000	0
123	STEREO	9/30/03	1/01/07	252							252	151	S/L	HY	5	20000	0
124	DIGITAL CAMERA	4/23/04	1/01/07	347							347	139	S/L	HY	5	20000	0
125	FRIDGE	3/23/06	1/01/07	215							215	21	S/L	HY	5	20000	0
126	TABLES & DESKS (2)	3/23/06	1/01/07	108							108	11	S/L	HY	5	20000	0
127	AUDIO RECORDER	10/01/00	1/01/07	400							400	160	S/L	HY	5	20000	0
128	DESK & CHAIRS (3)	4/20/06	1/01/07	284							284	28	S/L	HY	5	20000	0
129	CHAIRS & TABLES	5/31/06	1/01/07	262							262	26	S/L	HY	5	20000	0
130	TELEPHONE HEADSETS	7/13/06	1/01/07	317							317	32	S/L	HY	5	20000	0
131	TELEPHONE HEADSETS	12/27/06	1/01/07	98							98	10	S/L	HY	5	20000	0
				107,603	0	0	0	0	0	0	107,603	19,505					14,414
Total Machinery and Equipment																	
Miscellaneous																	
2	COMPUTER BOOKS	9/30/03		1,802							1,802	1,261	S/L	HY	5	20000	360
3	SOFTWARE	2/28/06		218							218	22	S/L	HY	5	20000	44
4	SOFTWARE	4/28/06		699							699	70	S/L	HY	5	20000	140
5	SOFTWARE	6/02/06		1,195							1,195	120	S/L	HY	5	20000	239
6	ACCOUNTING PROGRAM	7/03/06		247							247	25	S/L	HY	5	20000	49
7	COMPUTER PROGRAM	11/10/06		750							750	75	S/L	HY	5	20000	150
8	COMPUTER PROGRAM	11/23/06		750							750	75	S/L	HY	5	20000	150
9	SOFTWARE	8/02/07		2,769							2,769		S/L	HY	5	10000	277
10	SOFTWARE	9/07/07		1,225							1,225		S/L	HY	5	10000	123

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis Reductn.	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.	
11	SOFTWARE	9/07/07		745							745		S/L	HY	5 10000	75	
12	SOFTWARE	9/07/07		880							880		S/L	HY	5 10000	88	
117	SOFTWARE	9/30/03	1/01/07	361							361	252	S/L	HY	5 20000	0	
118	QUICKBOOKS SOFTWARE	7/12/04	1/01/07	759							759	380	S/L	HY	5 20000	0	
119	FINAL CUT STUDIO SOFTWARE	7/05/05	1/01/07	809							809	243	S/L	HY	5 20000	0	
120	MAZIMIZER SOFTWARE	2/02/06	1/01/07	193							193	19	S/L	HY	5 20000	0	
121	TECH SOUP SOFTWARE	9/30/06	1/01/07	140							140	14	S/L	HY	5 20000	0	
Total Miscellaneous				13,542	0	0	0	0	0	0	13,542	2,556					1,695
Total Depreciation				146,700	0	0	0	0	0	0	146,700	22,061					18,665
Grand Total Depreciation				146,700	0	0	0	0	0	0	146,700	22,061					18,665
Depreciation Assets Sold				16,503	0	0	0	0	0	0	16,503	7,165					0
Depr Remaining Assets				130,197	0	0	0	0	0	0	130,197	14,896					18,665

# Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Part I**  **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only

*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns*

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*

<b>Type or print</b>	Name of Exempt Organization <b>METAFOUNDATION</b>	Employer identification number <b>65-1208462</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite number. If a P.O. box, see instructions <b>6971 SEBASTOPOL AVENUE</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>SEBASTOPOL, CA 95472</b>	

**Check type of return to be filed** (file a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

• The books are in the care of ▶ C. RICH DARLEY

Telephone No ▶ 707-823-8700 FAX No ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6 months for a section 501(c) corporation required to file Form 990-T) extension of time until 8/15, 2008, to file the exempt organization return for the organization named above. The extension is for the organization's return for

- ▶  calendar year 2007 or
- ▶  tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_.

**2** If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	<b>3a</b>	\$	0.
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	<b>3b</b>	\$	0.
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	<b>3c</b>	\$	0.

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

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