

# Return of Organization Exempt From Income Tax

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

2013

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ 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](http://www.irs.gov/form990).

<b>A</b> For the 2013 calendar year, or tax year beginning , 2013, and ending ,	
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> <b>BENEFICENT TECHNOLOGY INC. DBA BENETECH®</b> 480 CALIFORNIA AVE #201 PALO ALTO, CA 94306-1609  <b>F</b> Name and address of principal officer: <b>JAMES R FRUCHTERMAN</b> SAME AS C ABOVE  <b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527  <b>J</b> Website: ▶ <b>WWW.BENETECH.ORG</b>  <b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ <b>L</b> Year of formation: <b>2000</b> <b>M</b> State of legal domicile: <b>CA</b>
<b>D</b> Employer Identification Number <b>77-0555413</b> <b>E</b> Telephone number <b>(650) 644-3400</b> <b>G</b> Gross receipts \$ <b>11,929,566.</b> <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶	

**Part I Summary**

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities: <u>BENETECH IS A NONPROFIT TECHNOLOGY COMPANY THAT DEVELOPS SOFTWARE APPLICATIONS TO ADDRESS PRESSING SOCIAL NEEDS. FOUNDED ON THE BELIEF THAT THE BENEFITS OF TECHNOLOGY MUST REACH ALL OF HUMANITY, BENETECH MEASURES SUCCESS IN THE NUMBER OF LIVES CHANGED FOR THE BETTER. SEE SCH 0</u>			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a).....	8	
	4	Number of independent voting members of the governing body (Part VI, line 1b).....	7	
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a).....	91	
	6	Total number of volunteers (estimate if necessary).....	1,600	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12.....	0.	
	7b	Net unrelated business taxable income from Form 990-T, line 34.....	0.	
<b>Revenue</b>	8	Contributions and grants (Part VIII, line 1h).....	2,239,744.	1,071,357.
	9	Program service revenue (Part VIII, line 2g).....	10,326,225.	10,854,004.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d).....	1,746.	543.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).....	6,065.	3,662.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).....	12,573,780.	11,929,566.
<b>Expenses</b>	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3).....	100,992.	475,774.
	14	Benefits paid to or for members (Part IX, column (A), line 4).....		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).....	5,867,047.	6,202,174.
	16a	Professional fundraising fees (Part IX, column (A), line 11e).....		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>18,296.</b>		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).....	5,911,828.	6,186,574.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).....	11,879,867.	12,864,522.
<b>Net Assets or Fund Balances</b>	19	Revenue less expenses. Subtract line 18 from line 12.....	693,913.	-934,956.
	20	Total assets (Part X, line 16).....	3,843,559.	3,029,986.
	21	Total liabilities (Part X, line 26).....	1,336,143.	1,457,526.
	22	Net assets or fund balances. Subtract line 21 from line 20.....	2,507,416.	1,572,460.

**Part II Signature Block**

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

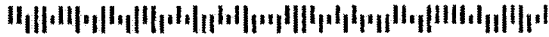
<b>Sign Here</b>	Signature of officer _____		Date _____	
	Type or print name and title. _____			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN <b>P00430745</b>
	Firm's name ▶ <b>SHANNON &amp; SNYDER, CPA'S</b>		Firm's EIN ▶ <b>77-0360232</b>	
	Firm's address ▶ <b>650 N WINCHESTER BLVD., #6</b>		Phone no. <b>(408) 241-8700</b>	
	<b>SAN JOSE, CA 95128-1511</b>			

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



Department of Treasury  
Internal Revenue Service  
Ogden UT 84201

034479.280627.5952.3586 1 AT 0.406 373



BENEFICENT TECHNOLOGY INC  
% JAMES R FRUCHTERMAN  
480 S CALIFORNIA AVE STE 201  
PALO ALTO CA 94306-1609



034479

Notice	CP211A
Tax period	December 31, 2013
Notice date	April 7, 2014
Employer ID number	77-0555413
To contact us	Phone 1-877-829-5500 FAX 801-620-5670

Page 1 of 1

RECEIVED

MAR 27 2014

Important information about your December 31, 2013 Form 990

## We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your  
December 31, 2013 Form 990.

Your new due date is August 15, 2014.

### What you need to do

File your December 31, 2013 Form 990 by August 15, 2014. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit [www.irs.gov/charities](http://www.irs.gov/charities) to learn about approved e-file providers, what types of returns can be filed electronically, and whether you are required to file electronically.

### Additional information

- Visit [www.irs.gov/cp211a](http://www.irs.gov/cp211a).
- For tax forms, instructions, and publications, visit [www.irs.gov](http://www.irs.gov) or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III. ☒ **X****1** Briefly describe the organization's mission:SEE SCHEDULE O**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

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

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

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 8,683,784. including grants of \$ ) (Revenue \$ 9,604,730.)SEE SCHEDULE O**4b** (Code: ) (Expenses \$ 1,803,105. including grants of \$ 440,043.) (Revenue \$ 1,069,773.)SEE SCHEDULE O**4c** (Code: ) (Expenses \$ 325,419. including grants of \$ ) (Revenue \$ 2,520.)

ROUTE 66 LITERACY: ROUTE 66 LITERACY IS A WEB-BASED PROGRAM THAT MAKES IT EASY FOR ANY LITERATE PERSON TO TEACH ADOLESCENT AND ADULT BEGINNING READERS WITH DEVELOPMENTAL DISABILITIES TO READ. THE PROGRAM COMBINES ENGAGING, AGE-APPROPRIATE LESSONS, EXERCISES AND EFFECTIVE FEEDBACK WITH A UNIQUE TEACHER-TUTOR MODEL-ONE THAT REQUIRES NO SPECIAL TRAINING. BY INCORPORATING EXPERT PEDAGOGY AND ONE TO ONE INTERACTION, ROUTE 66 LITERACY CREATES NEW PATHWAYS FOR BEGINNING READERS TO GAIN INDEPENDENCE AND TO PURSUE FURTHER EDUCATIONAL AND VOCATIONAL OPPORTUNITIES.

**4d** Other program services. (Describe in Schedule O.) SEE SCHEDULE O(Expenses \$ 303,235. including grants of \$ ) (Revenue \$ 176,982.)**4e** Total program service expenses 11,115,543.

**Part IV Checklist of Required Schedules**

	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 .....	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? .....	X	
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. ....		X
4 <b>Section 501(c)(3) organizations.</b> 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. ....	X	
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. ....		X
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. ....		X
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. ....		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III. ....		X
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. ....		X
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. ....		X
11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI. ....	X	
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. ....		X
c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII. ....		X
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. ....	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. ....		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X. ....		X
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII. ....		X
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. ....	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. ....		X
14 a Did the organization maintain an office, employees, or agents outside of the United States? .....		X
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. ....	X	
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. ....	X	
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. ....		X
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). ....		X
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. ....		X
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. ....		X
20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. ....		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? .....	N/A	

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

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i> .....	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III.</i> .....		X
<b>23</b> 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? <i>If 'Yes,' complete Schedule J.</i> .....	X	
<b>24a</b> 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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a.</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	N/A	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	N/A	
<b>d</b> Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? .....	N/A	
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I.</i> .....		X
<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? <i>If 'Yes,' complete Schedule L, Part I.</i> .....		X
<b>26</b> 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? <i>If so, complete Schedule L, Part II.</i> .....		X
<b>27</b> 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? <i>If 'Yes,' complete Schedule L, Part III.</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i> .....		X
<b>c</b> 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? <i>If 'Yes,' complete Schedule L, Part IV.</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
<b>b</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)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i> .....	X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i> .....		X
<b>37</b> 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? <i>If 'Yes,' complete Schedule R, Part VI.</i> .....		X
<b>38</b> 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. ....	X	

BAA

Form 990 (2013)

**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V. ☐

		Yes	No
<b>1 a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. <span style="float:right">73</span>		
<b>1 b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. <span style="float:right">0</span>		
<b>1 c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2 a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. <span style="float:right">91</span>		
<b>2 b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
<b>3 a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>3 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.	N/A	
<b>4 a</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)?		X
<b>4 b</b>	If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5 a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5 b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5 c</b>	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	N/A	
<b>6 a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
<b>6 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>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>7 a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
<b>7 b</b>	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	N/A	
<b>7 c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7 d</b>	If 'Yes,' indicate the number of Forms 8282 filed during the year. <span style="float:right">N/A</span>		
<b>7 e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7 f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7 g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	N/A	
<b>7 h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	N/A	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>9 a</b>	Did the organization make any taxable distributions under section 4966?	N/A	
<b>9 b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	
<b>10 Section 501(c)(7) organizations. Enter:</b>			
<b>10 a</b>	Initiation fees and capital contributions included on Part VIII, line 12. <span style="float:right">N/A</span>		
<b>10 b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. <span style="float:right">N/A</span>		
<b>11 Section 501(c)(12) organizations. Enter:</b>			
<b>11 a</b>	Gross income from members or shareholders. <span style="float:right">N/A</span>		
<b>11 b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) <span style="float:right">N/A</span>		
<b>12 a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	N/A	
<b>12 b</b>	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. <span style="float:right">N/A</span>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>13 a</b>	Is the organization licensed to issue qualified health plans in more than one state?	N/A	
<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
<b>13 b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. <span style="float:right">N/A</span>		
<b>13 c</b>	Enter the amount of reserves on hand. <span style="float:right">N/A</span>		
<b>14 a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14 b</b>	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	N/A	

**Part VI Governance, Management and Disclosure** For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI. ☒**Section A. Governing Body and Management**

		Yes	No
<b>1 a</b> Enter the number of voting members of the governing body at the end of the tax year. . . . .	<b>1 a</b> 8		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent . . . . .	<b>1 b</b> 7		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? . . . . .	<b>2</b>	X	
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .	<b>3</b>		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	<b>4</b>		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>		X
<b>6</b> Did the organization have members or stockholders? . . . . .	<b>6</b>		X
<b>7 a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	<b>7 a</b>	X	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? . . . . .	<b>7 b</b>		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body? . . . . .	<b>8 a</b>	X	
<b>b</b> Each committee with authority to act on behalf of the governing body? . . . . .	<b>8 b</b>	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O. . . . .	<b>9</b>		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

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

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ▶ CA

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

▶ TERESA THROCKMORTON 480 CALIFORNIA AVE. #201 PALO ALTO, CA 94306-1609 (650) 644-3430

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII. ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** 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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES R FRUCHTERMAN CHAIRMAN & CEO	40 0	X		X				322,415.	0.	22,217.
(2) G. GERVAISE DAVIS III DIRECTOR	1 0	X						0.	0.	0.
(3) JAMES KLECKNER SECRETARY	1 0	X		X				0.	0.	0.
(4) J. LEIGHTON READ, M.D. DIRECTOR	1 0	X						0.	0.	0.
(5) ROBERT WEXLER DIRECTOR	1 0	X						0.	0.	0.
(6) BRIAN BEHLENDROF DIRECTOR	1 0	X						0.	0.	0.
(7) CHRISTY CHIN DIRECTOR	1 0	X						0.	0.	0.
(8) YOGEN DALAL DIRECTOR	1 0	X						0.	0.	0.
(9) TERESA THROCKMORTON CFO	40 0			X				180,052.	0.	26,023.
(10) BETSY BEAUMON VP & GM, LITERACY	40 0				X			193,500.	0.	10,171.
(11) GERARDO CAPIEL VP ENGINEERING	40 0				X			166,538.	0.	19,815.
(12) JANE SIMCHUCK VP HR & ADMIN	40 0					X		158,213.	0.	8,881.
(13) FRED SLONE DIRECTOR OF OPS	40 0					X		143,891.	0.	22,246.
(14) ANH QUYNH BUI DIR PRODUCT STGY	40 0					X		136,770.	0.	14,003.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) MARTIN QUIAZON SENIOR ENGINEER	40 0					X		126,895.	0.	15,802.
(16) MARCY GOOT DIR OF MARKETING	40 0					X		132,468.	0.	10,309.
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1 b Sub-total</b>								1,560,742.	0.	149,467.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,560,742.	0.	149,467.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **16**

**3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual.

	Yes	No
<b>3</b>		X
<b>4</b>	X	
<b>5</b>		X

**4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual.

**5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person.

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
HALLMARK 514 HIGH STREET SUITE #5 PALO ALTO, CA 94301	ADMINISTRATIVE	209,192.
THE SHERIDAN GROUP 1224 M STREET NW, STE 300 WASHINGTON, DC 20005	GOVERNMENT RELATIONS	176,701.
MOTIVATE, LLC 760 MARKET ST., STE 720 SAN FRANCISCO, CA 94102	ADVERTISING	201,464.
DAPROIM AGIP HOUSE 2ND FL, HAILE SELASSIE AVE, NAIROBI KENYA	BOOK VALIDATION	190,548.
FLEXION, INC. 1500 W. MAIN ST., STE 500 SUN PRAIRIE, WI 53590	ENGINEERING SRVC	141,626.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **13**

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS</b>	1 a Federated campaigns.....	1 a				
	b Membership dues.....	1 b				
	c Fundraising events.....	1 c				
	d Related organizations.....	1 d				
	e Government grants (contributions)...	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above...	1 f	1,071,357.			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f.....		1,071,357.			
<b>PROGRAM SERVICE REVENUE</b>	2 a BOOKSHARE.....	Business Code 900099	9,604,730.	9,604,730.		
	b HUMAN RIGHTS.....	900099	1,069,772.	1,069,772.		
	c MIRADI.....	900099	161,982.	161,982.		
	d BENETECH LABS.....	900099	15,000.	15,000.		
	e ROUTE 66.....	900099	2,520.	2,520.		
	f All other program service revenue...					
	g Total. Add lines 2a-2f.....		10,854,004.			
	3 Investment income (including dividends, interest and other similar amounts).....		543.			543.
4 Income from investment of tax-exempt bond proceeds ..						
5 Royalties.....						
<b>OTHER REVENUE</b>	6 a Gross rents.....	(i) Real (ii) Personal				
	b Less: rental expenses.....					
	c Rental income or (loss).....					
	d Net rental income or (loss).....					
	7 a Gross amount from sales of assets other than inventory ..	(i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses.....					
	c Gain or (loss).....					
	d Net gain or (loss).....					
	8 a Gross income from fundraising events (not including.. \$ of contributions reported on line 1c). See Part IV, line 18.....	a				
	b Less: direct expenses.....	b				
	c Net income or (loss) from fundraising events.....					
	9 a Gross income from gaming activities. See Part IV, line 19.....	a				
	b Less: direct expenses.....	b				
	c Net income or (loss) from gaming activities.....					
	10 a Gross sales of inventory, less returns and allowances.....	a				
	b Less: cost of goods sold.....	b				
	c Net income or (loss) from sales of inventory.....					
	Miscellaneous Revenue Business Code					
	11 a MISC. INCOME.....		3,662.	3,662.		
	b.....					
c.....						
d All other revenue.....						
e Total. Add lines 11a-11d.....		3,662.				
12 Total revenue. See instructions.....		11,929,566.	10,857,666.	0.	543.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX.

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	409,774.	409,774.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	66,000.	66,000.		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	853,343.	417,045.	431,139.	5,159.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.	3,494,867.	3,137,982.	352,506.	4,379.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	97,353.	79,594.	17,545.	214.
9 Other employee benefits.	1,756,611.	1,426,270.	326,883.	3,458.
10 Payroll taxes.				
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.				
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion.				
13 Office expenses.	111,661.	104,692.	6,969.	
14 Information technology.				
15 Royalties.				
16 Occupancy.				
17 Travel.	425,282.	374,242.	49,101.	1,939.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	187,682.	170,986.	16,624.	72.
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	24,409.	2,323.	22,086.	
23 Insurance.	9,169.		9,169.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OUTSIDE SRVS (SEE SCHEDULE O)	2,998,959.	2,802,057.	196,902.	
b SHARED EXP (SEE SCHEDULE O)	1,549,766.	1,270,839.	275,979.	2,948.
c BOOK COLLECTION & DEVELOPMENT	495,201.	495,201.		
d COMMUNICATION & INTERNET FEES	278,864.	275,472.	3,392.	
e All other expenses.	105,581.	83,066.	22,388.	127.
25 Total functional expenses. Add lines 1 through 24e.	12,864,522.	11,115,543.	1,730,683.	18,296.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X. ☐

		(A) Beginning of year		(B) End of year
<b>ASSETS</b>	1 Cash — non-interest-bearing .....	50,732.	1	249,874.
	2 Savings and temporary cash investments .....	1,154,841.	2	416,403.
	3 Pledges and grants receivable, net .....	765,878.	3	637,577.
	4 Accounts receivable, net .....	1,100,757.	4	968,784.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....	24,726.	9	79,918.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10 a 357,494.		
	b Less: accumulated depreciation .....	10 b 214,340.	42,045.	10 c 143,154.
	11 Investments — publicly traded securities .....		11	
	12 Investments — other securities. See Part IV, line 11 .....		12	
	13 Investments — program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	5,930.
	15 Other assets. See Part IV, line 11 .....	704,580.	15	528,346.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	3,843,559.	16	3,029,986.	
<b>LIABILITIES</b>	17 Accounts payable and accrued expenses .....	1,268,609.	17	1,355,451.
	18 Grants payable .....		18	
	19 Deferred revenue .....	67,534.	19	102,075.
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		23	
	24 Unsecured notes and loans payable to unrelated third parties .....		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D ..		25	
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	1,336,143.	26	1,457,526.
<b>NET ASSETS OR FUND BALANCES</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets .....	335,743.	27	269,761.
	28 Temporarily restricted net assets .....	2,171,673.	28	1,302,699.
	29 Permanently restricted net assets .....		29	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds .....		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32 Retained earnings, endowment, accumulated income, or other funds .....		32	
	33 <b>Total net assets or fund balances</b> .....	2,507,416.	33	1,572,460.
34 <b>Total liabilities and net assets/fund balances</b> .....	3,843,559.	34	3,029,986.	

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Form 990 (2013)

**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	11,929,566.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,864,522.
3	Revenue less expenses. Subtract line 2 from line 1	3	-934,956.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,507,416.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	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	1,572,460.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII. ☐1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other \_\_\_\_\_

If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant? ☐ Yes ☒ No

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basisb Were the organization's financial statements audited by an independent accountant? ☐ Yes ☒ No

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basisc If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? ☐ Yes ☒ No

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? ☐ Yes ☒ Nob If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. ☐ Yes ☒ No

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Form 990 (2013)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2013**

Open to Public  
Inspection

Name of the organization

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

Employer identification number

77-0555413

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

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

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I      b ☐ Type II      c ☐ Type III — Functionally integrated      d ☐ Type III — Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box \_\_\_\_\_
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

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

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

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

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.) .....	1,215,280.	1,030,048.	1,641,706.	2,239,744.	1,071,357.	7,198,135.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. ....						0.
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge. ....						0.
<b>4 Total.</b> Add lines 1 through 3. ....	1,215,280.	1,030,048.	1,641,706.	2,239,744.	1,071,357.	7,198,135.
<b>5</b> 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) ...						2,972,915.
<b>6 Public support.</b> Subtract line 5 from line 4. ....						4,225,220.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>7</b> Amounts from line 4. ....	1,215,280.	1,030,048.	1,641,706.	2,239,744.	1,071,357.	7,198,135.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. ....	12,385.	14,434.	7,316.	7,811.	4,205.	46,151.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on. ....						0.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ....						0.
<b>11 Total support.</b> Add lines 7 through 10. ....						7,244,286.
<b>12</b> Gross receipts from related activities, etc (see instructions). ....					12	44,861,124.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	58.32 %
<b>15</b> Public support percentage from 2012 Schedule A, Part II, line 14 .....	<b>15</b>	56.64 %
<b>16 a 33-1/3% support test – 2013.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ....	<input checked="" type="checkbox"/>	
<b>b 33-1/3% support test – 2012.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ....	<input type="checkbox"/>	
<b>17 a 10%-facts-and-circumstances test – 2013.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ....	<input type="checkbox"/>	
<b>b 10%-facts-and-circumstances test – 2012.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ....	<input type="checkbox"/>	
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ....	<input type="checkbox"/>	

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

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

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the 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.						
6 <b>Total.</b> Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 <b>Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 acquired after June 30, 1975.						
c 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.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 <b>Total Support.</b> (Add lns 9, 10c, 11 and 12.)						
14 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

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

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15.	16	%

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

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17.	18	%

19a **33-1/3% support tests – 2013.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐

b **33-1/3% support tests – 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ☐

**Part IV Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

This image shows a blank sheet of white paper with horizontal dashed lines. The lines are evenly spaced and run across the width of the page, providing a guide for handwriting practice. There are no other markings or text on the page.

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

PUBLIC DISCLOSURE COPY  
**Schedule of Contributors**

OMB No. 1545-0047

**2013**

► Attach to Form 990, Form 990-EZ, or Form 990-PF

► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

Employer identification number

77-0555413

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

- ☒ 501(c)( 3 ) (enter number) organization  
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
☐ 527 political organization

Form 990-PF

- ☐ 501(c)(3) exempt private foundation  
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation  
☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules**

- ☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year. . . . . ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.**

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

77-0555413

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 349,952.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 126,190.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

77-0555413

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

77-0555413

Use duplicate copies of Part III if additional space is needed.

**BAA**

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

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

- ▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**  
▶ **See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2013**

Open to Public  
Inspection

**If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

Employer identification number

**BENEFICENT TECHNOLOGY INC. DBA BENETECH®**

**77-0555413**

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ..... \$ 0

3 Volunteer hours ..... 0

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... \$ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... \$ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☒ No
- 4a Was a correction made? ..... ☐ Yes ☒ No
- b If 'Yes,' describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c) , except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ..... ☐ Yes ☒ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.**

Schedule C (Form 990 or 990-EZ) 2013

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and 'limited control' provisions apply.

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1 a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....															
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....		191,384.													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....		191,384.	0.												
<b>d</b> Other exempt purpose expenditures .....		12,673,138.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....		12,864,522.	0.												
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns. ....		793,226.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	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.	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.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
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.														
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>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....		198,307.	0.												
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....		0.	0.												
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....		0.	0.												
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....															
<input type="checkbox"/> Yes <input type="checkbox"/> No															

**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 2a through 2f.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
<b>2 a</b> Lobbying non-taxable amount .....	667,014.	666,563.	743,986.	793,226.	2,870,789.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e)) .....					4,306,184.
<b>c</b> Total lobbying expenditures .....	164,690.	150,186.	157,481.	191,384.	663,741.
<b>d</b> Grassroots nontaxable amount .....	166,754.	166,641.	185,997.	198,307.	717,699.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e)) .....					1,076,549.
<b>f</b> Grassroots lobbying expenditures .....					0.

BAA

Schedule C (Form 990 or 990-EZ) 2013

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
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 similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Part III-A, line 3, is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2 a	
b Carryover from last year	2 b	
c Total	2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

**Part IV** Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

**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, lines 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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

Open to Public  
Inspection

Name of the organization

Employer identification number

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

77-0555413

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II Conservation Easements.**

Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2 a
b Total acreage restricted by conservation easements .....	2 b
c Number of conservation easements on a certified historic structure included in (a) .....	2 c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register. ....	2 d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

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

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

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

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

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

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

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

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

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

- a ☐ Public exhibition  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations  
 d ☐ Loan or exchange programs  
 e ☐ Other \_\_\_\_\_

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

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

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

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

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

	Amount
c Beginning balance	1 c
d Additions during the year	1 d
e Distributions during the year	1 e
f Ending balance	1 f

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

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. ☐ Yes ☐ No

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a 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 current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  %  
 b Permanent endowment  %  
 c Temporarily restricted endowment  %

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

3 a Are there endowment funds not in the possession of the organization 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 organizations listed as required on Schedule R? ☐ Yes ☐ No

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

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered 'Yes' to Form 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
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment	357,494.		214,340.	143,154.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				143,154.

BAA

Schedule D (Form 990) 2013

**Part VII Investments – Other Securities.**

N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 12.)		

**Part VIII Investments – Program Related.**

N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (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) BENGINEERING STOCK	10,000.
(3) DEPOSITS	52,779.
(4) LT RECEIVABLE	223,327.
(5) RELATED ENTITY RECEIVABLE BE	242,240.
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B), line 15.)	528,346.

**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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (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 organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. ☐

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

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

[illegible]

**Schedule F**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

- Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.  
► Attach to Form 990. ► See separate instructions.  
► Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

Open to Public  
Inspection

Name of the organization

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

Employer identification number

77-0555413

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☒ **Yes** ☐ **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. **PART V**
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.) **PART V**

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) AFRICA			PROGRAM SERVICES	LITERACY FOR DISABLED	9,946.
(2) AFRICA			PROGRAM SERVICES	HUMAN RIGHTS	16,931.
(3) SOUTH AMERICA			PROGRAM SERVICES	HUMAN RIGHTS	1,516.
(4) CENTRAL AMERICA			PROGRAM SERVICES	HUMAN RIGHTS	29,736.
(5) ASIA			PROGRAM SERVICES	HUMAN RIGHTS	55,722.
(6) MIDDLE EAST			PROGRAM SERVICES	HUMAN RIGHTS	139,312.
(7) AFRICA			GRANTS	HUMAN RIGHTS	66,000.
(8) INDIA			PROGRAM SERVICES	LITERACY FOR DISABLED	37,832.
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
<b>3a</b> Sub-total. . . . .					356,995.
<b>b</b> Total from continuation sheets to Part I. . . . .					
<b>c</b> Totals (add lines 3a and 3b) . . .	0	0			356,995.

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule F (Form 990) 2013

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			AFRICA	SUPPORT MISSION	10,000	WIRED FUNDS			
(2)			AFRICA	SUPPORT MISSION	10,000	WIRED FUNDS			
(3)			AFRICA	SUPPORT MISSION	32,000	WIRED FUNDS	35,731	COMPUTER EQUIP.	ACTUAL COST
(4)			AFRICA	SUPPORT MISSION	8,000	WIRED FUNDS			
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . **6**

N/A

3 Enter total number of other organizations or entities . . . . . **6**

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**Part IV Foreign Forms**

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

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

**PART I, LINE 2 - GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE US**

QUARTERLY FINANCIAL AND NARRATIVE REPORTS ARE REQUIRED FROM ALL ORGANIZATIONS OUTSIDE THE U.S. THAT RECEIVE GRANT FUNDS FROM BENETECH. RECEIPTS ARE REQUIRED FOR EXPENSES FOR ITEMS PURCHASED WITH GRANT FUNDS. IN ADDITION, BENETECH HUMAN RIGHTS PROGRAM STAFF MAKE SEVERAL SITE VISITS PER YEAR TO EACH OF THE ORGANIZATIONS.

**PART I - ADDITIONAL SUPPLEMENTAL INFORMATION**

THE PURPOSE OF THE FOUR LISTED GRANTS IS TO SUPPORT ORGANIZATIONS WORK IN BUILDING THE CAPACITY TO COLLECT, MONITOR AND DOCUMENT HUMAN RIGHTS VIOLATIONS.

SCHEDULE I  
(Form 990)

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.  
▶ Attach to Form 990.

2013

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

77-0555413

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. SEE PART IV

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) COMMUNITY PARTNERS 1000 N. ALAMEDA ST. STE 240 LOS ANGELES, CA 90012	95-4302067	501 (C) (3)	366,317.	0.			HUMAN RIGHTS STATISTICS
(2) INTERNEWS NETWORK 876 7TH STREET, P.O. BOX 4448 ARCATA, CA 95518	94-3027961	501 (C) (3)	30,387.	0.			DEV. SECURE DOCUMENTATION TOOLKIT
(3) OLIVER+COADY, INC. 387 FRONT ST OWEGO, NY 13827	26-3972852		13,070.	0.			DEV. SECURE DOCUMENTATION TOOLKIT
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 2
- 3 Enter total number of other organizations listed in the line 1 table. 1

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(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
1					
2					
3					
4					
5					
6					
7					

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I. LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

ALL U.S. ORGANIZATIONS ARE REQUIRED TO SUBMIT MONTHLY FINANCIAL REPORTS. ADDITIONAL NARRATIVE REPORTS, WITH MILESTONES MET AND PROGRAM ACHIEVEMENTS, ARE SCHEDULED FOR EACH AWARD. THE REPORTING REQUIREMENTS MUST BE MET TO RECEIVE CONTINUED FUNDING. ON SITE AND WEB BASED MEETINGS ARE HELD ON A REGULAR BASIS.

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION

THE PURPOSE OF THE GRANT TO COMMUNITY PARTNERS IS TO SUPPORT THE HUMAN RIGHTS DATA ANALYSIS GROUP. THE PURPOSE OF THE GRANTS TO INTERNEWS AND OLIVER+COADY ARE TO ASSIST IN THE DEVELOPMENT OF A TOOLKIT FOR SECURE DOCUMENTATION OF HUMAN RIGHT VIOLATIONS.

**SCHEDULE J**  
**(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2013**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

**BENEFICENT TECHNOLOGY INC. DBA BENETECH®**

Employer identification number

**77-0555413**

**Part I Questions Regarding Compensation**

**1 a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain. ....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? .....

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

**a** Receive a severance payment or change-of-control payment? .....

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....

**c** Participate in, or receive payment from, an equity-based compensation arrangement? .....

If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

**a** The organization? .....

**b** Any related organization? .....

If 'Yes' to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

**a** The organization? .....

**b** Any related organization? .....

If 'Yes' to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III. .... **PART III**

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III. ....

**9** If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
1 a		
1 b	N/A	
2	N/A	
3		
4 a		X
4 b		X
4 c		X
5 a		X
5 b		X
6 a		X
6 b		X
7	X	
8		X
9	N/A	

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule J (Form 990) 2013

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

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

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
JAMES R FRUCHTERMAN	(i)	260,346.	62,069.	0.	22,217.	344,632.	0.
1 CHAIRMAN & CEO	(ii)	0.	0.	0.	0.	0.	0.
TERESA THROCKMORTON	(i)	164,052.	16,000.	0.	26,023.	206,075.	0.
2 CFO	(ii)	0.	0.	0.	0.	0.	0.
BETSY BEAUMON	(i)	176,500.	17,000.	0.	10,171.	203,671.	0.
3 VP & GM, LITERACY	(ii)	0.	0.	0.	0.	0.	0.
GERARDO CAPIEL	(i)	153,538.	13,000.	0.	19,815.	186,353.	0.
4 VP ENGINEERING	(ii)	0.	0.	0.	0.	0.	0.
JANE SIMCHUCK	(i)	145,713.	12,500.	0.	8,881.	167,094.	0.
5 VP HR & ADMIN	(ii)	0.	0.	0.	0.	0.	0.
FRED SLONE	(i)	133,891.	10,000.	0.	22,246.	166,137.	0.
6 DIRECTOR OF OPS	(ii)	0.	0.	0.	0.	0.	0.
ANH QUYNH BUI	(i)	126,270.	10,500.	0.	14,003.	150,773.	0.
7 DIR PRODUCT STGY	(ii)	0.	0.	0.	0.	0.	0.
8	(i)						
(ii)							
9	(i)						
(ii)							
10	(i)						
(ii)							
11	(i)						
(ii)							
12	(i)						
(ii)							
13	(i)						
(ii)							
14	(i)						
(ii)							
15	(i)						
(ii)							
16	(i)						
(ii)							

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Schedule J (Form 990) 2013

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, for Part II. Also complete this part for any additional information.

**PART I. LINE 7 - NON-FIXED PAYMENTS NOT LISTED**

EMPLOYEES RECEIVE AN ANNUAL BONUS BASED ON A BOARD-APPROVED INCENTIVE COMPENSATION

PLAN AND BY MEETING BONUS OBJECTIVES SET EACH YEAR. FINAL AMOUNTS PAID ARE SUBJECT

TO BOARD APPROVAL BY INDEPENDENT DIRECTORS.

**SCHEDULE R**  
(Form 990)

**Related Organizations and Unrelated Partnerships**  
 ▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
 ▶ Attach to Form 990. ▶ See separate instructions.  
 ▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Employer identification number

77-0555413

BENEFICIENT TECHNOLOGY INC. DBA BENETECH@

**Part I Identification of Disregarded Entities** Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) ----- ----- ----- -----					
(2) ----- ----- ----- -----					
(3) ----- ----- ----- -----					

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) N/A ----- ----- -----							
(2) ----- ----- ----- -----							
(3) ----- ----- ----- -----							
(4) ----- ----- ----- -----							

**Part III** Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) N/A												
(2)												
(3)												

**Part IV** Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?	
								Yes	No
(1) BENGINEERING, INC									
PALO ALTO, CA 94306	ENGINEERIN G SVCS	CA	N/A	C CORP	10.	5,296.	100.00	X	
77-0556653									
(2)									
(3)									

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Schedule R (Form 990) 2013

**Part V Transactions With Related Organizations** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity.....		<input checked="" type="checkbox"/> 1a
<b>b</b> Gift, grant, or capital contribution to related organization(s).....		<input checked="" type="checkbox"/> 1b
<b>c</b> Gift, grant, or capital contribution from related organization(s).....		<input checked="" type="checkbox"/> 1c
<b>d</b> Loans or loan guarantees to or for related organization(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> 1d
<b>e</b> Loans or loan guarantees by related organization(s).....		<input checked="" type="checkbox"/> 1e
<b>f</b> Dividends from related organization(s).....		<input checked="" type="checkbox"/> 1f
<b>g</b> Sale of assets to related organization(s).....		<input checked="" type="checkbox"/> 1g
<b>h</b> Purchase of assets from related organization(s).....		<input checked="" type="checkbox"/> 1h
<b>i</b> Exchange of assets with related organization(s).....		<input checked="" type="checkbox"/> 1i
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s).....		<input checked="" type="checkbox"/> 1j
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s).....		<input checked="" type="checkbox"/> 1k
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s).....		<input checked="" type="checkbox"/> 1l
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s).....		<input checked="" type="checkbox"/> 1m
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).....		<input checked="" type="checkbox"/> 1n
<b>o</b> Sharing of paid employees with related organization(s).....		<input checked="" type="checkbox"/> 1o
<b>p</b> Reimbursement paid to related organization(s) for expenses.....		<input checked="" type="checkbox"/> 1p
<b>q</b> Reimbursement paid by related organization(s) for expenses.....		<input checked="" type="checkbox"/> 1q
<b>r</b> Other transfer of cash or property to related organization(s).....		<input checked="" type="checkbox"/> 1r
<b>s</b> Other transfer of cash or property from related organization(s).....		<input checked="" type="checkbox"/> 1s

**2** If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BENGINEERING, INC	D	800	ACCRUAL
(2)			
(3)			
(4)			
(5)			
(6)			

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TEEA5003L 06/27/13

**Part VI** **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) -----													
(2) -----													
(3) -----													
(4) -----													
(5) -----													
(6) -----													
(7) -----													
(8) -----													

## Part VII Supplemental Information

**Supplemental information**  
Provide additional information for responses to questions on Schedule R (see instructions).

[illegible]

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

- ▶ 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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

Open to Public  
Inspection

Name of the organization

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

Employer identification number

77-0555413

**FORM 990, PART IX, LINE 24A - OUTSIDE SERVICES**

SERVICES PROVIDED BY COMPANIES PRIMARILY FOR DESIGN ENGINEERING, FINANCIAL AUDIT AND  
TAX PREPARATION, DATA ENTRY, AND TEMPORARY ACCOUNTING AND ADMINISTRATION ASSISTANCE.

**FORM 990, PART IX, LINE 24B - SHARED EXPENSES**

RENT, TELEPHONE, OFFICE SUPPLIES, EQUIPMENT, LIABILITY INSURANCE, POSTAGE, FREIGHT,  
RECEPTIONIST, HR, AND IT SERVICES.

**FORM 990, PART III, LINE 1 - ORGANIZATION MISSION**

BENETECH IS A NONPROFIT TECHNOLOGY COMPANY THAT DEVELOPS SOFTWARE APPLICATIONS TO  
ADDRESS PRESSING SOCIAL NEEDS. BASED IN PALO ALTO, CALIFORNIA, AND FOUNDED IN 1989  
ON THE BELIEF THAT THE BENEFITS OF TECHNOLOGY MUST REACH ALL OF HUMANITY, THE  
ORGANIZATION'S SOCIAL ENTERPRISE BUSINESS MODEL AIMS TO CREATE FINANCIALLY  
SUSTAINABLE PROJECTS THAT MEASURE SUCCESS IN THE NUMBER OF LIVES CHANGED FOR THE  
BETTER. EACH OF ITS PROGRAM AREAS—GLOBAL LITERACY, HUMAN RIGHTS, THE ENVIRONMENT, AND  
BENETECH LABS—OFFERS GREAT SOCIAL IMPACT ON FUNDS INVESTED. WITNESSING THE VALUE IN  
OFFERING AFFORDABLE TOOLS THAT TRANSFORM THE LIVES OF INDIVIDUALS WITH DISABILITIES,  
JIM FRUCHTERMAN, THE ORGANIZATION'S FOUNDER AND CEO, WAS INSPIRED TO START AN  
ORGANIZATION THAT UTILIZED TECHNOLOGY TO SERVE SOCIAL CAUSES. BENETECH'S TOOLS HAVE  
SINCE GONE TO CHANGE THE WAYS IN WHICH PEOPLE WITH DISABILITIES ACCESS PRINTED  
INFORMATION; ALLOW FRONTLINE HUMAN RIGHTS DEFENDERS TO SAFELY DOCUMENT ABUSE; AND  
EMPOWER ENVIRONMENTAL PRACTITIONERS TO SUCCEED IN THEIR EFFORTS TO PROTECT SPECIES  
AND ECOSYSTEMS.

**FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS**

BOOKSHARE®: BOOKSHARE PROVIDES COPYRIGHTED MATERIAL IN ACCESSIBLE DIGITAL FORMATS TO  
PEOPLE WITH QUALIFYING PRINT DISABILITIES. IT IS A WEB-BASED LIBRARY OF BOOKS,  
PERIODICALS, AND NEWSPAPERS. MILLIONS OF PEOPLE THROUGHOUT THE UNITED STATES WITH  
VISUAL IMPAIRMENTS, PHYSICAL DISABILITIES AND SEVERE LEARNING DISABILITIES MEET THE

Name of the organization

Employer identification number

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

77-0555413

**FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS**

STRINGENT COPYRIGHT LAW EXEMPTION THAT PERMITS REPRODUCTION OF COPYRIGHTED MATERIAL INTO SPECIALIZED FORMATS AND DISTRIBUTION FOR PERSONAL USE. AROUND THE WORLD, INDIVIDUALS THAT MEET THESE QUALIFICATIONS HAVE ACCESS TO FREELY DISTRIBUTABLE MATERIAL AND COPYRIGHTED BOOKS FOR WHICH BOOKSHARE HAS INTERNATIONAL PERMISSIONS. THE BOOKS AND PUBLICATIONS CAN BE READ WITH A VARIETY OF SOFTWARE APPLICATIONS AND HARDWARE DEVICES THAT PLAY VIDEO, PRODUCE SYNTHETIC SPEECH (TEXT-TO-SPEECH), LARGE PRINT, OR BRAILLE. THIS INCLUDES A NUMBER OF TOOLS PROVIDED BY BENETECH, INCLUDING READERS FOR APPLE AND ANDROID SMARTPHONES AND TABLETS, AND MAJOR WEB BROWSERS. BOOKSHARE WAS LAUNCHED IN FEBRUARY 2002 AND HAS OVER 285,000 ELIGIBLE MEMBERS AS OF DECEMBER 31, 2013. THROUGH THE ACTIVE PARTICIPATION OF THOUSANDS OF VOLUNTEERS, PARTNERS, UNIVERSITIES AND PUBLISHERS AROUND THE WORLD, BOOKSHARE PROVIDES PEOPLE WITH PRINT DISABILITIES WITH INSTANT ACCESS TO MORE THAN 222,000 BOOKS AND 150 DAILY NEWSPAPERS.

**FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS**

HUMAN RIGHTS: BENETECH'S HUMAN RIGHTS PROGRAM (HRP) DEVELOPS TECHNOLOGY SOLUTIONS TO ADVANCE THE GLOBAL HUMAN RIGHTS MOVEMENT, THE JOURNALISM SECTOR, AND OTHER FIELDS WHERE INFORMATION PLAYS A KEY ROLE FOR ACCOUNTABILITY, TRANSPARENCY, AND JUSTICE.

MARTUS: MARTUS IS AN OPEN-SOURCE SOFTWARE INFORMATION MANAGEMENT AND DATA COLLECTION FRAMEWORK THAT ALLOWS USERS ANYWHERE IN THE WORLD TO SECURELY GATHER AND ORGANIZE SENSITIVE INFORMATION. THE APPLICATION WAS DEVELOPED BY BENETECH, IS AVAILABLE IN ELEVEN LANGUAGES (ENGLISH, RUSSIAN, SPANISH, ARABIC, FRENCH, THAI, NEPALI, BURMESE, ARMENIAN, FARSI/DARI AND KHMER) AND IS MADE AVAILABLE AT NO COST FOR HUMAN RIGHTS DEFENDERS. MARTUS AUTOMATICALLY ENCRYPTS THE INFORMATION AND COPIES IT TO A NETWORK OF SECURE SERVERS AROUND THE WORLD. THE SYSTEM IS DESIGNED SO THAT ONLY THE USER WHO CREATED IT—NOT EVEN BENETECH—IS GIVEN ACCESS TO THE ENCRYPTED DATA. SINCE THE DATA IS

Name of the organization	Employer identification number
BENEFICENT TECHNOLOGY INC. DBA BENETECH®	77-0555413

**FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS**

BACKED UP, USERS CAN RETRIEVE THEIR INFORMATION WHEN AND WHERE IT IS SAFE TO DO SO. MARTUS HELPS THOSE WHO COLLECT THIS VALUABLE HUMAN RIGHTS INFORMATION STAY SAFE, WHILE ALSO PROTECTING THE IDENTITIES OF THOSE WHO WOULD OTHERWISE FACE VIOLENCE AND REPRESSION FOR TELLING THEIR STORIES. THE MARTUS SOFTWARE HAS BEEN DOWNLOADED BY PEOPLE AND ORGANIZATIONS IN OVER 120 COUNTRIES AND IS AVAILABLE FOR APPLE AND ANDROID SMARTPHONES AND TABLETS. IN ADDITION TO THE DESKTOP APPLICATION, THE MARTUS ECOSYSTEM ALSO INCLUDES MOBILE MARTUS--BENETECH'S FREE, OPEN SOURCE SECURE ANDROID-BASED MOBILE DOCUMENTATION APPLICATION, BUILT ON OUR MARTUS TECHNOLOGY. MOBILE MARTUS BRINGS SECURE DATA COLLECTION, STORAGE AND BACKUP ONE STEP CLOSER TO THE FIELD. IT ALLOWS A USER TO SEND DATA FROM THE FIELD--INCLUDING PHOTOS, VIDEOS, AUDIO OR TEXT--TO A DESKTOP MARTUS ACCOUNT.

**FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION**

BENETECH LABS: BENETECH LABS IS BENETECH'S INNOVATION ARM. THE LABS IS WHERE WE IDENTIFY SOCIAL NEEDS; GENERATE PROPOSED TECHNOLOGICAL SOLUTIONS; AND BUILD PROOFS OF CONCEPT, GATHER FEEDBACK, AND CREATE PROTOTYPES. WE EXPECT NEW BENETECH SOCIAL GOOD PROGRAMS TO COME OUT OF THESE LAB EXPLORATIONS.

SOCIALCODING4GOOD: SOCIALCODING4GOOD, CREATED IN 2011, IS A PILOT PROJECT AIMED AT DRAMATICALLY RESHAPING THE TECH VOLUNTEER LANDSCAPE. THERE ARE MANY NONPROFITS AND SOCIAL-GOOD PROGRAMS IN THE WORLD THAT NEED THE HELP OF PROFESSIONAL TECHNOLOGISTS, BUT THEIR RESOURCES DON'T OFTEN ALLOW FOR IT. AS A RESULT, THE CAUSES THEY'RE WORKING ON-- FROM CIVIC ENGAGEMENT AND EDUCATION, TO POVERTY ALLEVIATION AND THE ENVIRONMENT--SUFFER. AT THE SAME TIME, PROFESSIONAL TECHNOLOGISTS ARE EAGER TO HELP WORK ON THESE IMPORTANT SOCIAL CHALLENGES, BUT OFTEN STRUGGLE TO FIND THE RIGHT MATCH FOR BOTH THEIR PASSION AND SKILLS. USING A WEB-BASED PLATFORM, SOCIALCODING4GOOD COLLECTS INFORMATION ON BOTH VOLUNTEER TECHNOLOGISTS AND PROGRAMS

Name of the organization

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

Employer identification number

77-0555413

**FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION**

WITH NEED SO THAT OUR COMMUNITY MANAGERS CAN CONNECT THESE PROFESSIONALS WITH OPPORTUNITIES THAT ARE THE RIGHT FIT. IN THIS WAY, VOLUNTEERS GET TO WORK ON THE HUMANITARIAN OPEN SOURCE SOFTWARE PROJECTS THAT WOULD MOST BENEFIT FROM THEIR TIME AND TALENT. BY BRIDGING THE CORPORATE, NONPROFIT AND TECHNOLOGY COMMUNITIES, SOCIALCODING4GOOD BRINGS TOGETHER THE BEST AND BRIGHTEST TO GENERATE MEANINGFUL AND SUSTAINABLE COLLABORATIONS FOR SOCIAL GOOD.

TOOLS FOR CLEAN WATER ORGANIZATIONS: WATER IS ONE OF THE MOST BASIC REQUIREMENTS FOR LIFE. ALL TOO OFTEN, HOWEVER, WE STRUGGLE TO DELIVER CLEAN, SAFE WATER TO COMMUNITIES. THIS IS ESPECIALLY TRUE IN THE DEVELOPING WORLD, WHERE ACCESS TO CLEAN, SAFE WATER IS ONE OF THE MOST PRESSING ENVIRONMENTAL AND HEALTH ISSUES OF OUR TIME. WHY DO SOME COMMUNITIES, EVEN IN POOR, RURAL AREAS, SUCCEED AT DELIVERING CLEAN WATER AND IMPLEMENTING SANITATION SYSTEMS WHILE OTHERS FAIL? BENETECH, IN PARTNERSHIP WITH FUNDACIÓN AVINA, BEGAN EXPLORING THIS QUESTION, FOCUSING ON RURAL COMMUNITIES IN LATIN AMERICA. CURRENTLY BENETECH IS INTEGRATING AN ASSESSMENT METHODOLOGY DEVELOPED BY AVINA WITH AN OPEN SOURCE DATA COLLECTION PLATFORM FOR MOBILE DEVICES AND DESKTOP COMPUTERS THAT WILL WORK BOTH ONLINE AND OFFLINE AND IS STRAIGHTFORWARD AND EASY TO USE. BY COLLECTING SURVEY DATA DIGITALLY AND CONSTRUCTING A PROFILE FOR EACH ORGANIZATION IN AN INTUITIVE DASHBOARD FORMAT, THE TOOL WILL PROVIDE IMMEDIATE FEEDBACK AND WILL REDUCE THE RESOURCES REQUIRED FOR DATA COLLECTION AND MODELING. LOOKING FORWARD, THIS INFORMATION WILL ENABLE THE CUSTOMIZED DELIVERY OF DIGITAL TRAINING MATERIALS, WHICH WILL MAKE TRAINING MATERIALS ALREADY DEVELOPED BY AVINA MORE ACCESSIBLE AND RELEVANT TO SPECIFIC COMMUNITIES.

Name of the organization

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

Employer identification number

77-0555413

**FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION**

MIRADI: MIRADI IS AN OPEN-SOURCE SOFTWARE APPLICATION THAT ENABLES USERS TO DESIGN, MONITOR AND EVALUATE THEIR CONSERVATION EFFORTS. THE SOFTWARE ALLOWS THEM TO DEVELOP PROJECT OBJECTIVES AND INTERVENTIONS, PRIORITIZE THREATS, LOOK AT EVENT CHAINS, ASSESS WHICH ACTIONS ARE WORKING AND ADJUST THEIR STRATEGIES ACCORDINGLY. MIRADI, DEVELOPED BY BENETECH IN COLLABORATION WITH THE CONSERVATION MEASURES PARTNERSHIP (CMP), BUNDLES KEY FUNCTIONS OF EXISTING COMMERCIAL PROJECT MANAGEMENT TOOLS (WHICH ARE NOT DESIGNED FOR CONSERVATION MANAGEMENT) TOGETHER WITH CONSERVATION-SPECIFIC BEST PRACTICES, AT A LOW COST. MIRADI'S FIRST PRODUCTION VERSION WAS RELEASED IN 2008. OVER 7,000 USERS WHO ARE MANAGING COMPLEX ENVIRONMENTAL PROGRAMS IN OVER 170 DIFFERENT COUNTRIES HAVE NOW DOWNLOADED MIRADI. A NEW "MIRADI SHARE" WEB SITE IS NOW BEING DEVELOPED BY A THIRD PARTY SOFTWARE CONSULTING GROUP. WHETHER USED TO MANAGE A SMALL COUNTY PARK OR REVIVE AN ENTIRE MARINE HABITAT, MIRADI HELPS CONSERVATIONISTS TO INTEGRATE BEST PRACTICES IN ENVIRONMENTAL ADAPTIVE MANAGEMENT WITH LOCAL EXPERTISE, EMPOWERING THEM TO SUCCEED IN THEIR EFFORTS TO PROTECT AND RESTORE SPECIES AND ECOSYSTEMS.

**FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.**

TWO BENETECH DIRECTORS, JAMES FRUCHTERMAN AND JAMES KLECKNER, ARE ALSO DIRECTORS AND HAVE FINANCIAL INTERESTS IN RAF TECHNOLOGY, INC., A FOR-PROFIT COMPANY LOCATED IN REDMOND, WA.

**FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY**

THE BYLAWS OF BENEFICENT TECHNOLOGY, INC. STATE "ONE DIRECTOR OF THIS CORPORATION SHALL BE DESIGNATED BY THE DESIGNATOR FROM TIME TO TIME", THEREFORE THE DESIGNATOR HAD THE AUTHORITY TO ELECT ONE MEMBER OF THE GOVERNING BODY.

Name of the organization

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

Employer identification number

77-0555413

**FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS**

AT LEAST ONE WEEK PRIOR TO FILING RETURN, THE 990 IS EMAILED TO ALL BOARD MEMBERS WITH REQUESTS FOR COMMENTS OR QUESTIONS. CFO ALSO MEETS WITH THE CEO AND CHAIRMAN OF THE BOARD FOR FURTHER 990 REVIEW PRIOR TO FILING.

**FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS**

EMPLOYEES AND DIRECTORS RECEIVE BENETECH'S CONFLICT OF INTEREST POLICY ANNUALLY AND MUST SUBMIT AN ACKNOWLEDGMENT TO HUMAN RESOURCES. CEO AND CFO SUBMIT ADDITIONAL ANNUAL WRITTEN CONFLICT OF INTEREST LETTERS TO THE BOARD OF DIRECTORS.

**FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES**

CEO AND CFO SALARIES ARE DETERMINED BY THE BOARD OF DIRECTORS BASED ON PERFORMANCE AND COMPARABLE DATA FROM: COMPDATA, GUIDE STAR, NON-PROFIT TIMES SALARY SURVEY, PROFESSIONALS FOR NON-PROFITS SALARY RANGE SURVEY AND CONSULTANT-SUPPLIED HI TECH DATA. THE COMPARABLE DATA IS ALSO USED FOR KEY EMPLOYEE SALARY GUIDELINES. ALL EMPLOYEE SALARIES OTHER THAN CEO AND CFO ARE APPROVED BY CEO AND VICE PRESIDENT OF HUMAN RESOURCES.

**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

ANNUAL AUDITED FINANCIALS ARE MADE AVAILABLE TO THE PUBLIC BY POSTING TO BENETECH'S WEBSITE AFTER BOARD APPROVAL. AVAILABLE UPON REQUEST ARE: AUDITED FINANCIALS, GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY.

2013

# California Exempt Organization Annual Information Return

199

Calendar Year 2013 or fiscal year beginning (mm/dd/yyyy), and ending (mm/dd/yyyy)

Corporation/Organization Name

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

California corporation number

2269751

Address (suite, room, or PMB no.)

FEIN

480 CALIFORNIA AVE #201

77-0555413

City

State

ZIP Code

PALO ALTO

CA

94306-1609

- A** First Return ..... ☐ Yes ☒ No
- B** Amended Information Return ..... ☐ Yes ☒ No
- C** IRC Section 4947(a)(1) trust ..... ☐ Yes ☒ No
- D** Final Information Return? • ☐ Dissolved • ☐ Surrendered (Withdrawn)

• ☐ Merged/Reorganized

Enter date (mm/dd/yyyy): •

**E** Check accounting method:1 ☐ Cash 2 ☒ Accrual 3 ☐ Other**F** Federal return filed?1 • ☐ 990T 2 • ☐ 990 PF 3 • ☐ Sch H (990)**G** Is this a group filing for the subordinates/affiliates? ..... ☐ Yes ☒ No  
If 'Yes,' attach a roster. See instructions**H** Is this organization in a group exemption? ..... ☐ Yes ☒ No  
If 'Yes,' What's the parent's name?**I** Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? ..... ☐ Yes ☒ No  
If 'Yes,' explain, and attach copies of revised documents.**J** If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign, or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? ..... ☒ Yes ☐ No  
If 'Yes,' complete and attach form FTB 3509.**K** Is the organization exempt under R&TC Section 23701g? ... ☐ Yes ☒ No  
If 'Yes,' enter gross receipts from nonmember sources ..... \$**L** If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. No filing fee is required. .... ☒**M** Is the organization a Limited Liability Company? ..... ☐ Yes ☒ No**N** Did the organization file Form 100 or Form 109 to report taxable income? ..... ☐ Yes ☒ No**O** Is the organization under audit by the IRS or has the IRS audited in a prior year? ..... ☐ Yes ☒ No

CACA1112L 11/20/13

**Part I Complete Part I unless not required to file this form. See General Instructions B and C.**

<b>Receipts and Revenues</b>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8 .....	1	10,858,209.
	2	Gross dues and assessments from members and affiliates. ....	2	
	3	Gross contributions, gifts, grants, and similar amounts received. .... SEE SCH. B	3	1,071,357.
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Instruction B ....	4	11,929,566.
	5	Cost of goods sold. ....	5	
	6	Cost or other basis, and sales expenses of assets sold. ....	6	
	7	Total costs. Add line 5 and line 6. ....	7	
	8	Total gross income. Subtract line 7 from line 4. ....	8	11,929,566.
<b>Expenses</b>	9	Total expenses and disbursements. From Side 2, Part II, line 18 .....	9	12,864,522.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 .....	10	-934,956.
<b>Filing Fee</b>	11	Filing fee \$10 or \$25. See General Instruction F. ....	11	
	12	Total payments. ....	12	
	13	Penalties and Interest. See General Instruction J. ....	13	
	14	Use tax. See General Instruction K. ....	14	
	15	Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result. ....	15	
<b>Sign Here</b>	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 taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer ▶	Title	Date	• Telephone (650) 644-3400
<b>Paid Preparer's Use Only</b>	Preparer's signature ▶	Date	Check if self-employed ▶ <input type="checkbox"/>	• PTIN P00430745
	Firm's name (or yours, if self-employed) and address ▶	• FEIN 77-0360232		
				• Telephone (408) 241-8700
	May the FTB discuss this return with the preparer shown above? See instructions. .... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

**Part II** Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information.

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions . . . . .	•	1	
	2	Interest . . . . .	•	2	543.
	3	Dividends . . . . .	•	3	
	4	Gross rents . . . . .	•	4	
	5	Gross royalties . . . . .	•	5	
	6	Gross amount received from sale of assets (See instructions) . . . . .	•	6	
	7	Other income. Attach schedule . . . . . SEE STATEMENT 1	•	7	10,857,666.
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1. . . . .	•	8	10,858,209.
<b>Expenses and Disbursements</b>	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule . . . . .	•	9	475,774.
	10	Disbursements to or for members . . . . .	•	10	
	11	Compensation of officers, directors, and trustees. Attach schedule . . . . .	•	11	853,343.
	12	Other salaries and wages . . . . .	•	12	3,494,867.
	13	Interest . . . . .	•	13	
	14	Taxes . . . . .	•	14	
	15	Rents . . . . .	•	15	
	16	Depreciation and depletion (See instructions) . . . . .	•	16	24,409.
	17	Other Expenses and Disbursements. Attach schedule . . . . . SEE STATEMENT 2	•	17	8,016,129.
	18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9 . . . . .	•	18	12,864,522.

**Schedule L Balance Sheets****Beginning of taxable year****End of taxable year**

Assets	(a)	(b)	(c)	(d)
1 Cash . . . . .		1,205,573.		666,277.
2 Net accounts receivable . . . . .		1,866,635.		1,606,361.
3 Net notes receivable . . . . .				
4 Inventories . . . . .				
5 Federal and state government obligations . . . . .				
6 Investments in other bonds . . . . .				
7 Investments in stock . . . . .				
8 Mortgage loans . . . . .				
9 Other investments. Attach schedule . . . . .				
10 a Depreciable assets . . . . .	231,976.		357,494.	
b Less accumulated depreciation . . . . .	189,931.	42,045.	214,340.	143,154.
11 Land . . . . .				
12 Other assets. Attach schedule . . . . . STM 3		729,306.		614,194.
13 <b>Total assets</b> . . . . .		3,843,559.		3,029,986.
<b>Liabilities and net worth</b>				
14 Accounts payable . . . . .		1,268,609.		1,355,451.
15 Contributions, gifts, or grants payable . . . . .				
16 Bonds and notes payable . . . . .				
17 Mortgages payable . . . . .				
18 Other liabilities. Attach schedule . . . . . STM 4		67,534.		102,075.
19 Capital stock or principle fund . . . . .		2,507,416.		1,572,460.
20 Paid-in or capital surplus. Attach reconciliation . . . . .				
21 Retained earnings or income fund . . . . .				
22 <b>Total liabilities and net worth</b> . . . . .		3,843,559.		3,029,986.

**Schedule M-1 Reconciliation of income per books with income per return**

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1 Net income per books . . . . .	•	-934,956.	7 Income recorded on books this year not included in this return. Attach sch . . . . .	•	
2 Federal income tax . . . . .	•		8 Deductions in this return not charged against book income this year. Attach schedule . . . . .	•	
3 Excess of capital losses over capital gains . . . . .	•		9 Total. Add line 7 and line 8 . . . . .		
4 Income not recorded on books this year. Attach schedule . . . . .	•		10 Net income per return. Subtract line 9 from line 6 . . . . .		-934,956.
5 Expenses recorded on books this year not deducted in this return. Attach schedule . . . . .	•				
6 Total. Add line 1 through line 5 . . . . .		-934,956.			

**Schedule B**  
**(Form 990, 990-EZ,**  
**or 990-PF)**

Department of the Treasury  
Internal Revenue Service

CA PUBLIC DISCLOSURE COPY

**Schedule of Contributors**

OMB No. 1545-0047

**2013**

► Attach to Form 990, Form 990-EZ, or Form 990-PF

► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

**BENEFICENT TECHNOLOGY INC. DBA BENETECH®**

Employer identification number

**77-0555413**

**Organization type** (check one):

**Filers of:**

Form 990 or 990-EZ

**Section:**

☒ 501(c)( 3 ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules**

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year. . . . . ► \$

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.**

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

Employer identification number

77-0555413

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 349,952.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 126,190.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

BENEFICENT TECHNOLOGY INC. DBA BENETECH®

Employer identification number

77-0555413

**Part III****Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8) or (10)****organizations that total more than \$1,000 for the year.** Complete columns (a) through (e) and the following line entry.For organizations completing Part III, enter total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.)

▶ \$ N/A

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

**STATEMENT 1**  
**FORM 199, PART II, LINE 7**  
**OTHER INCOME**

MISC. INCOME.....	\$	3,662.
PROGRAM SERVICE REVENUE.....		10,854,004.
<b>TOTAL</b>	<b>\$</b>	<b><u>10,857,666.</u></b>

**STATEMENT 2**  
**FORM 199, PART II, LINE 17**  
**OTHER EXPENSES**

BANK CHARGES.....	\$	3,890.
BOOK COLLECTION & DEVELOPMENT.....		495,201.
COMMUNICATION & INTERNET FEES.....		278,864.
CONFERENCES, CONVENTIONS, AND MEETINGS.....		187,682.
ENTERTAINMENT.....		11,162.
INSURANCE.....		9,169.
MISCELLANEOUS.....		32,968.
OFFICE EXPENSES.....		111,661.
OTHER EMPLOYEE BENEFIT.....		1,756,611.
OUTSIDE SRVS (SEE SCHEDULE O).....		2,998,959.
PENSION PLAN CONTRIBUTIONS.....		97,353.
SHARED EXP (SEE SCHEDULE O).....		1,549,766.
SUBSCRIPTIONS & DUES.....		57,561.
TRAVEL.....		425,282.
<b>TOTAL</b>	<b>\$</b>	<b><u>8,016,129.</u></b>

**STATEMENT 3**  
**FORM 199, SCHEDULE L, LINE 12**  
**OTHER ASSETS**

BENGINEERING STOCK.....		10,000.
DEPOSITS.....		52,779.
LT RECEIVABLE.....		223,327.
NET INTANGIBLE ASSETS.....		5,930.
PREPAID EXPENSES AND DEFERRED CHARGES.....		79,918.
RELATED ENTITY RECEIVABLE BE.....		242,240.
<b>TOTAL</b>	<b>\$</b>	<b><u>614,194.</u></b>

**STATEMENT 4**  
**FORM 199, SCHEDULE L, LINE 18**  
**OTHER LIABILITIES**

DEFERRED REVENUE.....		102,075.
<b>TOTAL</b>	<b>\$</b>	<b><u>102,075.</u></b>