PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 120085

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Form			U
	_	-	-

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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.



Department of the Treasury Internal Revenue Service

AF	or th	e 2016 calendar year, or tax year beginning and	l ending									
B	Check if applicab	le: C Name of organization		D Employer identifie	cation number							
	Addre											
Name change Doing business as BENETECH 77-0555413 Initial Initial Initial Number and street (or P.0. box if mail is not delivered to street address) Room/suite E Telephone number												
	r											
	Final	480 CALIFORNIA AVE.	201	650-	644-3400							
_	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	13,033,440.							
	Amer			H(a) Is this a group re								
	Appli tion pend		IAN	for subordinates	? Yes 🗶 No							
		SAME AS C ABOVE		H(b) Are all subordinates in								
		tempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. (see instructions)							
		te: WWW.BENETECH.ORG		H(c) Group exemption								
_		f organization: X Corporation Trust Association Other	L Year	of formation: 2000 N	State of legal domicile: CA							
Pa	art I	Summary		MDOWED C COM	MINITUTEO							
e	1	Briefly describe the organization's mission or most significant activities: BENE WITH SOFTWARE FOR SOCIAL GOOD.	TECH E	MPOWERS COM	MUNITIES							
Governance												
veri	2	Check this box I if the organization discontinued its operations or dispo			12 sets.							
ĝ	3	Number of voting members of the governing body (Part VI, line 1a)			11							
∞ v	4 5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		95								
itie	6	Total number of volunteers (estimate if necessary)		1600								
Activities &	-	Total unrelated business revenue from Part VIII, column (C), line 12		0.								
Ă		Net unrelated business taxable income from Form 990-T, line 34			0.							
	<u> </u>			Prior Year	Current Year							
đ	8	Contributions and grants (Part VIII, line 1h)		2,574,088.	1,663,309.							
ň	9	Program service revenue (Part VIII, line 2g)		10,689,996.	11,300,100.							
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		7,010.	5,042.							
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-4,980.	-7,827.							
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		13,266,114.	12,960,624.							
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		374,681.	168,256.							
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.							
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,593,069.	7,533,640.							
sue	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.							
Expenses	b	• • • • • • • • • • • • • • • • • • •	77.									
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,336,952.	5,722,731.							
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		12,304,702.	13,424,627.							
	19	Revenue less expenses. Subtract line 18 from line 12		961,412.	-464,003.							
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year							
Sset	20	Total assets (Part X, line 16)		5,126,976.	4,848,400.							
et A ind I	21	Total liabilities (Part X, line 26)		1,767,543.	1,952,970.							
	22 art II	Net assets or fund balances. Subtract line 21 from line 20		3,359,433.	2,895,430.							
		Signature Block	e and statem	ente and to the best of m	knowledge and belief it is							
UIIU	61 0611	מוווקס טבטקרוטרע. בטקקטוק ווומדר וומעק קגמוווווקט ווווס רקוטרון. וווקוטטוווט מכנטוווטמוועוווט Suieuui	to ann Siaith	IGHTA, AHU IU IHE UEALUL III								

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

0:	Signature of officer		I	ate
Sign Here	SUKHI NAGESH, CFO		D	utu
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	ALEXIS H. WONG			self-employed P00604756
Preparer	Firm's name 🕨 LINDQUIST VON HU	SEN & JOYCE LLP	Fi	rm's EIN 94-1250261
Use Only	Firm's address 90 NEW MONTGOMER	Y STREET, 11TH STREET		
	SAN FRANCISCO, C.	A 94105	Р	hone no. (415) 957 - 9999
May the I	RS discuss this return with the preparer shown abc	ove? (see instructions)		X Yes No
632001 11-	1-16 LHA For Paperwork Reduction Act Notic	e, see the separate instructions.		Form 990 (2016)

Form	BENEFICENT TECHNOLOGY, INC.	77-0555413	Page 2
Pa	rt 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: BENETECH IS A NONPROFIT THAT EMPOWERS COMMUNITIES WI		
	SOCIAL GOOD. THE ORGANIZATION'S WORK TRANSFORMS HOW		
	DISABILITIES READ AND LEARN, MAKES IT SAFER FOR HUMA		ERS
	TO PURSUE TRUTH AND JUSTICE, AND CONNECTS PEOPLE TO		
2	Did the organization undertake any significant program services during the year which were not listed on		
	prior Form 990 or 990-EZ?		XNo
	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 service	vices? Yes	XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations	to others, the total expenses, a	and
	revenue, if any, for each program service reported.	10 / 51	162
4a	(Code:) (Expenses \$ 9,501,086. including grants of \$) GLOBAL LITERACY: BENETECH'S GLOBAL LITERACY PROGRAM	(Revenue \$ 10,451, STRIVES TO MAKE	402.)
	LITERACY AVAILABLE TO EVERYONE. THIS IS DONE THROUGH		VES
	THERE AVAILABLE TO EVERICAL: THE TO DONE THROUGH		
	BOOKSHARE: BOOKSHARE IS THE WORLD'S LARGEST ONLINE L	IBRARY OF BOOKS	AND
	NEWSPAPERS ACCESSIBLE TO PEOPLE WHO HAVE PRINT DISAB		
	LOW VISION, A MOBILITY IMPAIRMENT OR A LEARNING DISA		-
	THEIR ABILITY TO READ PRINTED MATERIAL. OPERATING UN	DER AN EXEMPTIO	N IN
	COPYRIGHT LAW AND WITH THE PERMISSION OF OVER 800 PU		HARE
	HAS DELIVERED OVER 11,000,000 COPIES OF BOOKS AROUND		
	BOOKSHARE WAS LAUNCHED IN FEBRUARY 2002 AND HAS OVER	-	
	MEMBERS AS OF DECEMBER 31, 2016 IN THE US AND OVER 7		
	THROUGH THE ACTIVE PARTICIPATION OF THOUSANDS OF VOL		-
4b	(Code:) (Expenses \$ 1,477,806. including grants of \$ 168,256.)		545.)
	HUMAN RIGHTS PROGRAM: BENETECH'S HUMAN RIGHTS PROGRA		
	THE GLOBAL HUMAN RIGHTS MOVEMENT BY PROVIDING AND SURVEY AND OPEN INFORMATION MANAGEMENT AND DATA COL		-
	FOR RIGHTS DEFENDERS, FIELDWORKERS, RESEARCHERS, AND		JGI
		ooommindidid.	
	THE HRP'S FLAGSHIP TOOL IS MARTUS, WHICH ENABLES GRA	SSROOTS	
	NON-GOVERNMENTAL ORGANIZATIONS TO SECURELY COLLECT,		TORE
	THEIR RECORDS ON OFF-SITE SERVERS WITH EASY-TO-USE S		
	CRUCIAL EVIDENCE FOR RESEARCH, INVESTIGATION AND PRO	SECUTIONS. THE	
	APPLICATION WAS DEVELOPED BY BENETECH, IS AVAILABLE		
	LANGUAGES (ENGLISH, RUSSIAN, SPANISH, ARABIC, FRENCH		
	BURMESE, ARMENIAN, FARSI/DARI, KHMER, VIETNAMESE, AN		
4c			208.)
	BENETECH LABS: BENETECH LABS (LABS) CREATES NEW SCAL ENTERPRISES FOR SOCIAL IMPACT. IN PARTNERSHIP WITH C		תושד
	LEADERS AND STAKEHOLDERS, TECHNOLOGISTS, AND SOCIAL		
	IS WHERE THE BENETECH TEAM EXPERIMENTS AND PROTOTYPE		
	TECHNOLOGY SOLUTIONS THAT CHANGE LIVES. SOME EXAMPLE		
	INCLUDE-		
	SERVICE REFERRAL: OUR SERVICE REFERRAL PROJECT MAKES	IT EASIER TO S	HARE
	AND MAINTAIN INFORMATION ON LOCAL SERVICES THAT ARE .		
	PEOPLE THAT NEED THEM THE MOST. THESE CRITICAL SERVI		
	FOOD, SHELTER, HEALTHCARE, JOB TRAINING, CHILD CARE,		ILY
	SUPPORT SERVICES. AT THE HEART OF OUR MODEL IS AN OP	EN STANDARDS	
4d	Other program services (Describe in Schedule O.)	2 00F	
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 11,195,321.	3,885.)	
<u>4e</u>	Total program service expenses 11, 195, 321.	Г <u>аша</u> О	90 (2016)
			2016)

SEE SCHEDULE O FOR CONTINUATION(S)

Form	990	(2016)	

 Form 990 (2016)
 BENEFICENT TECHNOLOGY, INC.

 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	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		v	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
~	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	e		x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization reactive or hold a concentration eccement, including eccements to preserve open appear	6		- 23
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
8	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	· ·		
0	Schedule D, Part III	8		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	9		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	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			x
	Schedule D, Parts XI and XII	12a		
a	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	104	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	21	x
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140		
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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	17		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	18		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	10		I X I

Form **990** (2016)

Form 990 (2016) BENEFICENT TECHNOL Part IV Checklist of Required Schedules (continued) BENEFICENT TECHNOLOGY, INC.

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
~	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
20	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete	31		
32		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		- 23
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 33		
34		34	х	
352	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
5	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		
-	Note. All Form 990 filers are required to complete Schedule O	38	х	

Form **990** (2016)

Form	990 (2016) BENEFICENT TECHNOLOGY, INC.		77-0555	413	Р	age 5
Pa					-	
	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	50			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and i	reporta	able gaming			
	(gambling) winnings to prize winners?			1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	95			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	irns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		X
b	If "Yes," enter the name of the foreign country:		,			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accou	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-			5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t					
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
_	to file Form 8282?		1	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	-	ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8	899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
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	13b				
с	Enter the amount of reserves on hand	13c				
				14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu			14b		

BENEFICENT TECHNOLOGY, INC.

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			Х
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 12			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	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?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
h	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	<u> </u>		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i>			
•	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
2	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b		x
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	155		
16-2	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
iua	taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
		16b		
Sec	exempt status with respect to such arrangements?	100		
	List the states with which a copy of this Form 990 is required to be filed CA			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	wailah		
10	for public inspection. Indicate how you made these available. Check all that apply.	avallat	iiC	
10		1 finan	cial	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	a nnañ	udi	
20	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ►			
	480 CALIFORNIA AVE., NO. 201, PALO ALTO, CA 94306			

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated
	mployees, 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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe nd a d	rson i	s bot	h an	compensation	compensation	amount of
	week					1/	(00)	from	from related	other
	(list any hours for	directo				-		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or	stee			en sate		(W-2/1099-MISC)		organization
	organizations	l trust	nal tru		oyee	ompe				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	hd	lns	Offi	Key	Hig	For			
(1) JAMES KLECKNER	1.00			37				0	0	0
SECRETARY	1 00	X		X				0.	0.	0.
(2) G. GERVAISE DAVIS III	1.00							0	0	0
DIRECTOR	1 00	X						0.	0.	0.
(3) J. LEIGHTON READ, M.D.	1.00	v						0.	0	0
DIRECTOR	1 00	X						0.	0.	0.
(4) ROBERT WEXLER	1.00	x						0.	0.	0.
DIRECTOR	1.00	^						0.	0.	0.
(5) BRIAN BEHLENDORF DIRECTOR	1.00	x						0.	0.	0.
(6) CHRISTY CHIN	1.00							0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(7) YOGEN DALAL	1.00							0.	•	0.
DIRECTOR	1.00	x						0.	0.	0.
(8) GERARDO CAPIEL	1.00								••	
DIRECTOR		x						0.	0.	0.
(9) JENNIFER MCFARLANE	1.00							•••		•••
DIRECTOR		x						0.	0.	0.
(10) KEVIN LO	1.00									
DIRECTOR		x						0.	0.	0.
(11) SAMUEL BRIGHT	1.00									
DIRECTOR		x						0.	0.	0.
(12) JAMES R. FRUCHTERMAN	40.00									
CEO		X		X				338,275.	0.	35,823.
(13) SUKHI NAGESH	40.00									
CFO				Х				170,744.	0.	24,501.
(14) MARK ROBERTS	40.00									
<u>coo</u>					Х			213,762.	0.	26,024.
(15) ELIZABETH BEAUMON	40.00									
PRESIDENT					Х			223,049.	0.	13,946.
(16) JANE POOLE	40.00								_	
VP HR & ADMIN					Х			179,905.	0.	4,278.
(17) ANH QUYNH BUI	40.00							1 62 222		01 885
VP BENETECH LABS						X		163,392.	0.	21,775.

Form 990 (2016) BENEFICEI	NT TECHI	101	LOC	GΥ,	,]	INC	•		77-0	555	413	Page 8				
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	rees	, and	d Hi	ghes	t C	compensated Employe	es (continued)							
(A) Name and title	(B) Average hours per week	(C) Position (do not check more than ond box, unless person is both a						Average P hours per (do not che box, unless		than o is both	an	(D) Reportable compensation from	(E) Reportable compensatio from related	n	Estir amo	F) nated unt of her
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	s	compe fron organ and r	nsation n the ization elated zations				
(18) BRADLEY TURNER VP GLOBAL LITERACY	40.00					x		167,018.		ο.	3	,340.				
(19) FRED SLONE	40.00											,				
DIRECTOR OF OPS						Х		159,064.		0.	29	,516.				
(20) DAVID MURPHY	40.00					v		162 225		0	25	010				
ENGINEERING DIRECTOR (21) CHARLES LAPIERRE	40.00					X		163,235.		0.	35	,848.				
TECHNICAL LEAD	40.00					x		148,719.		Ο.	3	,376.				
								11077151			5	/ 5 / 6 1				
1b Sub-total)		1,927,163.		0.	198	,427.				
c Total from continuation sheets to Part VI								0.		0.	100	0.				
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but n 								1,927,163.	000 of reportab	-	190	,427.				
compensation from the organization		1056	ISLE	eu ai	JUVE	=) wii	0 10		,000 of reportab	le		25				
											Y	es No				
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s					•			•			3	X				
 For any individual listed on line 1a, is the su 																
and related organizations greater than \$150										r	4	x				
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i>					-			-			5	x				
Section B. Independent Contractors			0/ 00		00/0											
1 Complete this table for your five highest co	mpensated inc	depe	ende	ent c	ontr	racto	rs t	hat received more than	\$100,000 of com	npens	ation fro	m				
the organization. Report compensation for (A)	the calendar y	ear	endi	ng w	vith	or wi	thir	n the organization's tax (B)	year.		(C)					
Name and business								Description of s	services	С	ompens	ation				
DAPROIM AFRICA LTD., 2ND SELASSIE AVE., NAIROBI, I	-	IA:	LLI	3				BOOK VALIDAT	ION		158	,240.				
CADEN HOWELL 928 JENNIFER ST., MADISON	N, WI 53	37(03					ENGINEERING	SERVICES		148	,495.				
FLEXION, INC. 1500 W MAIN ST. #500, SUN	N PRAIRI	IE.	, V	VI.	53	359	0	ENGINEERING	SERVICES		144	<u>,777.</u>				
JAKE BROWNELL 4318 N. ROSEMEAD DR., PE	ORIA, II	ь (516	514	1			ENGINEERING	SERVICES		141	,713.				
WORTH TRUST, 48 NEW THIRD																
KATPADI 632007, INDIA							_	BOOK VALIDAT			126	,354.				
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 ► 11																

Form	n 990	0 (;	2016) BENEF	ICENT TE	CHNOLOGY	, INC.		77-0555	413 Page 9
	rt V			านe					
			Check if Schedule O cont	ains a response	or note to any lin	e 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
nts	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
			Fundraising events						
		d	Related organizations	1d					
		е	Government grants (contribut	ions) 1e					
er S		f	All other contributions, gifts, gran	ts, and					
<u>th</u>			similar amounts not included abor	ve 1f	1,663,309.				
ont nd (-	Noncash contributions included in lines						
<u>a</u> C		h	Total. Add lines 1a-1f			1,663,309.			
	_		2008/0122		Business Code	10 451 460	10 451 460		
/ice	2	а	BOOKSHARE		900099	10,451,462.	10,451,462.		
Ser		b	HUMAN RIGHTS		900099 900099	800,545.	800,545. 44,208.		
ven S		C d	BENETECH LABS ENGINEERING & CONSULTI	NC FFFC	900099	44,208. 3,390.	,		
Program Service Revenue		a	ROUTE 66	NG FEES	900099	495.	3,390. 495.		
Pro		e f	All other program service reve	210		495.	495.		
		ı g				11,300,100.			
	3		Investment income (including			,,			
	Ŭ		other similar amounts)			5,042.			5,042.
	4		Income from investment of tax			,			,
	5		Royalties	• •	. F				
			,	(i) Real	(ii) Personal				
	6	а	Gross rents	64,989.					
		b	Less: rental expenses	72,816.					
		с	Rental income or (loss)	-7,827.					
		d	Net rental income or (loss)		►	-7,827.			-7,827.
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory						
		b	Less: cost or other basis						
			and sales expenses						
			Gain or (loss)						
		d	Net gain or (loss)		▶				
en	8	а	Gross income from fundraising						
ven			including \$						
Re			contributions reported on line						
Other Revenue		h	Part IV, line 18 Less: direct expenses						
			Net income or (loss) from func						
			Gross income from gaming ac						
	-	-	Part IV, line 19						
		b	Less: direct expenses						
			Net income or (loss) from gam						
			Gross sales of inventory, less						
			and allowances	а					
		b	Less: cost of goods sold	b					
		с	Net income or (loss) from sale	s of inventory	•••••				
			Miscellaneous Revenu	e	Business Code				
	11	а							
		b							
		c							
		d							
		е	Total. Add lines 11a-11d			12 060 624	11 200 100	0.	-2,785.
	12		Total revenue. See instructions.		🕨 🖌	12,960,624.	11,300,100.	υ.	-2,/05.

77-0555413

Part IX Statement of Functional Expenses

BENEFICENT TECHNOLOGY, INC.

-	Check if Schedule O contains a respon		this Part IX		
	not include amounts reported on lines 6b, 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 domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
U	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	168,256.	168,256.		
4	Benefits paid to or for members	100,250.	100,2300		
5	Compensation of current officers, directors,				
5	trustees, and key employees	1,230,307.	461,616.	764,729.	3,962
6	Compensation not included above, to disqualified	1,250,507.	401,010.	101,125.	5,502
6					
	persons (as defined under section $4958(f)(1)$) and				
_	persons described in section 4958(c)(3)(B)	4,115,351.	3,604,976.	510,375.	
7	Other salaries and wages	4,113,331.	5,004,970.	510,575.	
8	Pension plan accruals and contributions (include	126 620	110 024	15 705	
_	section 401(k) and 403(b) employer contributions)	126,639.	110,934.	15,705.	
9	Other employee benefits	2,061,343.	1,805,701.	255,642.	
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses	95,215.	89,677.	5,538.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Traval	433,631.	392,401.	41,230.	
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	162,673.	156,799.	5,874.	
20					
	Payments to affiliates				
21		204,106.	155,418.	48,688.	
22	Depreciation, depletion, and amortization	12,772.	133,410.	12,772.	
23	Insurance	12,112.		12,112.	
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 0.)				
а	OUTSIDE SERVICES	2,043,293.	1,872,285.	171,008.	
b	FACILITY AND OTHER OFFI	1,972,698.	1,606,032.	365,651.	1,015
c	BOOK COLLECTION & DEVEL	470,276.	470,276.		,
d	COMMUNICATIONS	224,673.	220,828.	3,845.	
u e	All other expenses	103,394.	80,122.	23,272.	
е 25	Total functional expenses. Add lines 1 through 24e	13,424,627.	11,195,321.	2,224,329.	4,977
25	Joint costs. Complete this line only if the organization	,,	,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_,,	-,,,,,
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Check here

______ if following SOP 98-2 (ASC 958-720)

BENEFICENT	TECHNOLOGY,	INC.
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	LA	Check if Schedule O contains a response or not	to to only	ling in this Dart V			
		Check if Schedule O contains a response or not	e to any				
					(A) Beginning of year		(B) End of year
	4	Cash pap interact bearing			534,810.	1	616,804.
	1	Cash - non-interest-bearing Savings and temporary cash investments			846,325.	2	1,080,251.
	2			F	1,614,785.	2	923,117.
		Pledges and grants receivable, net		842,220.	3 4	1,352,103.	
	4 5	Accounts receivable, net Loans and other receivables from current and for			042,220.	4	1,352,1030
	5						
		trustees, key employees, and highest compensa Part II of Schedule L				5	
	6	Part II of Schedule L Loans and other receivables from other disquali				5	
	0	section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect		-			
6		employees' beneficiary organizations (see instr).		6			
Assets	7					7	
As	7 8	Notes and loans receivable, net				8	
	9	Inventories for sale or use Prepaid expenses and deferred charges			23,582.	9	29,444.
		Land, buildings, and equipment: cost or other	 I I	······	2575021	3	25,111
	104	basis. Complete Part VI of Schedule D	102	417,053.			
	h	Less: accumulated depreciation	10a	396,350.	71,068.	10c	20,703.
	11	Investments - publicly traded securities			, _ ,	11	2077000
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			281,858.	14	128,118.
	15	Other assets. See Part IV, line 11			912,328.	15	697,860.
	16	Total assets. Add lines 1 through 15 (must equa			5,126,976.	16	4,848,400.
	17	Accounts payable and accrued expenses			1,252,431.	17	1,446,303.
	18	Grants payable				18	
	19	Deferred revenue			159,757.	19	151,312.
	20			_		20	
	21	Escrow or custodial account liability. Complete I				21	
Ś	22	Loans and other payables to current and former					
litie		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrela		23			
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 17-24). (Complete Part X of			
		Schedule D			355,355.	25	355,355.
	26	Total liabilities. Add lines 17 through 25			1,767,543.	26	1,952,970.
		Organizations that follow SFAS 117 (ASC 958	s), check	here ► X and			
es		complete lines 27 through 29, and lines 33 an					
JUC	27	Unrestricted net assets			438,234.	27	660,586.
3al á	28	Temporarily restricted net assets			2,921,199.	28	2,234,844.
Βpt	29	Permanently restricted net assets		<u></u> [29	
Fur		Organizations that do not follow SFAS 117 (A	SC 958),	check here			
Net Assets or Fund Balances		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ec				31	
let ,	32	Retained earnings, endowment, accumulated in				32	
Z	33	Total net assets or fund balances			3,359,433.	33	2,895,430.
	34	Total liabilities and net assets/fund balances			5,126,976.	34	4 ,848,400. Form 990 (2016)

Form **990** (2016)

Part X | Balance Sheet

Form	990	(201	6

632012	11-11-16		

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))						
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					X	
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basi	s,				
	consolidated basis, or both:						
	Separate basis X Consolidated basis Both consolidated and separate basis						
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audi	t,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule	О.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Ai	udit				
	Act and OMB Circular A-133?			3a	Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		<u></u> .	3b	Х		
				Form	990	(2016)	

	1 990 (2016) BENEFICENT TECHNOLOGY, INC.	77-	-0555413 Page 12
Pa	rt 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	12,960,624.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,424,627.
3	Revenue less expenses. Subtract line 2 from line 1	3	-464,003.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,359,433.
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	2,895,430.
Pa	rt XII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII		X

F

<u>Total</u>

(Form	990	or	990-EZ)
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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.

2016	
Open to Public Inspection	

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service		 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. 					Open to Public		
							Inspection		
Name of	the organizati		ion about benedule A			0113 13 01 1			identification number
			FICENT TEC	HNOLOGY, INC					7-0555413
Part I	Reason			All organizations must co		s part.) Se	ee instruction		
The orga				(For lines 1 through 12, c					
1	1	•		on of churches described	•	,			
2	1 · · ·		•	Attach Schedule E (Forn			•,,-,,•,•		
3	1			anization described in se			::)		
4	1	-		njunction with a hospital			-	Viiii) Entor	the hospital's name
- L	city, and stat	-	ation operated in ee		described	30010	, i i i i i i i i i i i i i i i i i i i		the hospital s hame,
5	1 27	-	or the benefit of a co	ollege or university owned	1 or operat	ed by a d	overnmental	unit describ	ed in
5			Complete Part II.)			cubyag	overnmentar		
6	1			mental unit described in s	section 17	0(6)(1)(A)	(v)		
7 X	1		-	antial part of its support f				the general	nublic described in
/ [Ũ		omplete Part II.)	andar part of its support i	ioni a gove	erninentai		une general	
8	1			(1)(A)(vi). (Complete Parl	+ II)				
9	1			l in section 170(b)(1)(A)(d in conii	inction with a	land-arant	college
•				culture (see instructions).					
	university:		grant concept of agric				y, and olato c	i tro conog	
10	ı ´—	on that norma	Illy receives: (1) more	e than 33 1/3% of its sup	port from (contributi	ons member	shin fees a	nd gross receipts from
				ct to certain exceptions,					
			-	e (less section 511 tax) fro					-
			mplete Part III.)					. gaa	
11	1		• •	ively to test for public sa	fetv. See s	ection 50)9(a)(4).		
12	1 -	-	-	ively for the benefit of, to	•			arrv out the	purposes of one or
	-	-	-	ed in section 509(a)(1) o	-			-	
				of supporting organizatio					
a 🗌		-	• •	supervised, or controlled		-		-	giving
				gularly appoint or elect a					
			complete Part IV, Se						
b 🗌			-	d or controlled in connec	tion with its	s support	ed organizati	on(s), by ha	ving
			-	anization vested in the s			-		-
		•	t complete Part IV,		•				
с 🗌	Type III fui	nctionally inte	grated. A supportin	g organization operated	in connect	ion with, a	and functiona	ally integrate	ed with,
	its support	ed organizatio	n(s) (see instructions	s). You must complete I	Part IV, Se	ctions A,	D, and E.		
d 🗌	🗌 Type III no	n-functionally	y integrated. A supp	porting organization oper	ated in cor	nnection v	with its suppo	orted organi	zation(s)
	that is not	functionally int	tegrated. The organized and the transmission of the tegrated and teg	zation generally must sat	isfy a distr	ibution re	quirement an	d an attent	veness
	requiremer	nt (see instruct	ions). You must cor	nplete Part IV, Sections	A and D,	and Part	V .		
e	Check this	box if the orga	anization received a	written determination fro	m the IRS	that it is a	а Туре I, Туре	e II, Type III	
	functionally	/ integrated, o	r Type III non-functio	nally integrated support	ing organiz	ation.			
f En	ter the number	of supported of	organizations						
g Pro			n about the supporte			<u> </u>			
	(i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the organ in your governin	ization listed ig document?	(v) Amount o	-	(vi) Amount of other
	organizatior	1		above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)
			1	1			1		

Schedule A (Form 990 or 990-EZ) 2016 BENEFICENT TECHNOLOGY, INC. Part II Support Schedule for Organizations Described in Sections 17

77-0555413 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2239744.	1071357.	2120929.	2574088.	1663309.	9669427.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	2239744.	1071357.	2120929.	2574088.	1663309.	9669427.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						4777051.
	Public support. Subtract line 5 from line 4.						4892376.
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	2239744.	1071357.	2120929.	2574088.	1663309.	9669427.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources \dots	7,811.	4,205.	32,915.	74,846.	70,031.	189,808.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						9859235.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	-	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
<u> </u>	organization, check this box and stor		roontogo				>
	ction C. Computation of Publ						49.62 %
	Public support percentage for 2016 (14	4 7 0 0 /
	Public support percentage from 2015					15	
16a	33 1/3% support test - 2016. If the c	-					
h	stop here. The organization qualifies						
ŭ	33 1/3% support test - 2015. If the c	-					
17~	and stop here. The organization qual 10% -facts-and-circumstances tes						
17 d	and if the organization meets the "fac						
	meets the "facts-and-circumstances"		•	-	•	•	
h	10% -facts-and-circumstances tes						
D D	more, and if the organization meets the	-					
	organization meets the "facts-and-cire						
18	Private foundation. If the organization						
		and not oncoil a		a, 100, 11a, 01 11k	5, 511001X 1113 DUX a		

Schedule A (Form 990 or 990-EZ) 2016

(Complete only if you checked the box on line 10 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.)

Sec	tion A. Public Support					_	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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 per- formed, 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 bus-						
4	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
E							
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
1 a	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						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is						
10	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	's first, second, thi	rd, fourth, or fifth	tax year as a section	on 501(c)(3) orga	nization,
	check this box and stop here	<u></u>)
-	tion C. Computation of Publi						
	Public support percentage for 2016 (li					15	%
	Public support percentage from 2015					16	%
-	ction D. Computation of Invest						
17	Investment income percentage for 20	16 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
19a	33 1/3% support tests - 2016. If the	organization did	not check the box	on line 14, and lin	e 15 is more than	33 1/3% , and lin	e 17 is not
	more than 33 1/3%, check this box ar	nd stop here. The	e organization qua	lifies as a publicly	supported organiz	ation	▶∟
b	33 1/3% support tests - 2015. If the	•					
	line 18 is not more than 33 1/3%, che			•		•	
20	Private foundation. If the organization	n did not check a	t box on line 14, 19	9a, or 19b, check t			
63202	23 09-21-16				Sch	edule A (Form 9	990 or 990-EZ) 2016

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Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
40		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Schedule A (Form 990 or 990-EZ) 2016 BENEFICENT TECHNOLOGY, INC. Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	stion B. Type I Supporting Organizations	110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		100	110
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	-		
2				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
800	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a				
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2016

1

Schedule A (Form 990 or 990-EZ) 2016 BENEFICENT TECHNOLOGY, INC.

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	v integrate	ad Type III supporting or	anization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2016

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	<u> </u>
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i) Fusses Distributions	(ii) Underdistributions	(iii) Distributable
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j and 4c			
8	Breakdown of line 7:			
<u> </u>				
-	Excess from 2013			
	Excess from 2014			
-	Excess from 2015			
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Schedule A	(Form 990 or 990-EZ) 2016	BENEFICENT	TECHNOLOGY,	INC.	77-0555413 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D,	mation. Provide the (2, 3b, 3c, 4b, 4c, 5a, 6 ines 2 and 3; Part IV, S	explanations required by 6, 9a, 9b, 9c, 11a, 11b, a section E, lines 1c, 2a, 2	y Part II, line 10; Part II, line 17a and 11c; Part IV, Section B, line: b, 3a, and 3b; Part V, line 1; Par complete this part for any addit	or 17b; Part III, line 12; s 1 and 2; Part IV, Section C, t V, Section B, line 1e; Part V,

623171 04-01-16

Identification of Excess Contributions Included on Part II, Line 5

77-0555413

2016

	** Do Not File **	
***	Not Open to Public Inspection	***

Contributor's Name	Total Contributions	Excess Contributions
BILL AND MELINDA GATES FOUNDATION	250,000.	52,815.
GOOGLE	1,600,389.	1,403,204.
LAVELLE FUND FOR THE BLIND	874,952.	677,767.
MACARTHUR FOUNDATION	500,000.	302,815.
OAK FOUNDATION	2,350,000.	2,152,815.
THE PETER AND ELIZABETH C. TOWER FOUNDATION	200,000.	2,815.
THE POSES FAMILY FOUNDATION	379,190.	182,005.
WILLIAM & FLORA HEWLETT FOUNDATION	200,000.	2,815.
	_	
Total Excess Contributions to Schedule A, Part II, Line 5		4,777,051.

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Employer identification number

(Form 990, 990-EZ, or 990-PF)	
Department of the Treasury Internal Revenue Service	
	-

Name of the organization

Schedule B

BENEFICENT	TECHNOLOGY,	INC.
Organization type (check one):		

77-0555413

Filers of:	Section:
Form 990 or 990-EZ	\fbox 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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

BENEF	ICENT	TECHNOLOGY,	INC.
Part I	Contri	butors (See instructio	ons). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$70,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$125,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5		\$525,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

77-0555413

Name of organization

BENEFICENT TECHNOLOGY, INC.

77-0555413

Part I	Contributors (See instructions). Use duplicate copies of Part I if additiona	al spa	ice is needed.	
(a)	(b)		(c)	(d)
No.	Name, address, and ZIP + 4		Total contributions	Type of contribution
7		\$_	50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
8		\$_	50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)		(c)	(d)
No. 9	Name, address, and ZIP + 4	\$_	Total contributions	Type of contribution Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
<u>10</u>		\$_	152,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
		\$_	200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
		\$_		Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

Page 2

623452 10-18-16

BENEFICENT TECHNOLOGY, INC.

Part II	Noncash Property (See instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(See instructions)	
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	p.op.op.op.op.op.op.op.op.op.op.op.op.op	(See instructions)	
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	p	(See instructions)	
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	p	(See instructions)	
		\$	
(a) No.	(12)	(c)	(4)
from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(See instructions)	Date received
		\$	
(a)	<i>"</i> ,	(c)	
No.	(b)	FMV (or estimate)	(d) Data reacived
from Part I	Description of noncash property given	(See instructions)	Date received
		\$	
			000 E7 or 000 E1/

Employer identification number

77-0555413

Name of orga	nization		Employer identification number
BENEFI	CENT TECHNOLOGY, INC.		77-0555413
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete	columns (a) through (e) and the fol	bed in section 501(c)(7), (8), or (10) that total more than \$1,000 for ollowing line entry. For organizations
	completing Part III, enter the total of exclusively religion Use duplicate copies of Part III if addition		00 or less for the year. (Enter this info. once.) *
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of g	gift
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I		 	
-		(e) Transfer of g	gift
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(-)		
-		(e) Transfer of g	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
[·			
	Transferee's name, address, a	(e) Transfer of g and ZIP + 4	gift Relationship of transferor to transferee
	·····, ·····,		•

SCHEDULE C 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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. 2016 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Internal Revenue Service	▶ Information about Schedule C (Form 990 or 990-E2) and its instructions is at www.irs.gov/form990.	Inspection			
If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Act					

- 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

|--|

Nar	ne of organization Employer identification number							
	BENEFIC	ENT TECHNOLOGY, I	NC.			77-05554	413	
Pa	art I-A Complete if the or	ganization is exempt unde	r section 501(c) c	or is a section 5	27 or	ganization.		
								_
1	Provide a description of the organi	zation's direct and indirect political	campaign activities in	Part IV.				
2	Political campaign activity expendi	•			▶\$			
3	Volunteer hours for political campa							
-					·· -			_
Pa	art I-B Complete if the or	ganization is exempt unde	r section 501(c)(3	3).				_
1	Enter the amount of any excise tax	incurred by the organization under	r section 4955	-	▶\$			•
2	Enter the amount of any excise tax	incurred by organization managers	s under section 4955		▶\$		0	•
3	If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	r this year?			Yes	N	0
4a	a Was a correction made?					🗌 Yes	N	ο
	If "Yes." describe in Part IV.							
Pa	art I-C Complete if the org	ganization is exempt unde	r section 501(c),	except section	501(c	e)(3).		
1	Enter the amount directly expende	d by the filing organization for secti	ion 527 exempt function	on activities	▶\$			
2	Enter the amount of the filing organ	nization's funds contributed to othe	er organizations for sec	ction 527				
	exempt function activities		-		▶\$			
3					-			
	line 17b				▶\$			
4	Did the filing organization file Form						N	0
5	Enter the names, addresses and e						zation	
	made payments. For each organiza	ation listed, enter the amount paid 1	from the filing organiza	ation's funds. Also er	nter the	e amount of politi	ical	
	contributions received that were place	romptly and directly delivered to a s	separate political orga	nization, such as a s	eparate	e segregated fun	nd or a	
	political action committee (PAC). If	additional space is needed, provid	e information in Part I	V.				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fi		(e) Amount of		
				filing organization		contributions red		d
				funds. If none, ente	er -0	promptly and delivered to a s		
						political organ		
						If none, ent		

Sche	dule C (Form 990 or 990-EZ) 2016 BENEF	ICENT TECHNOLOGY, INC.	77-0	555413 Page 2
Pa	· · ·	n is exempt under section 501(c)(3) and fi	iled Form 5768 (el	ection under
	section 501(h)).			
A CI	neck 🕨 📖 if the filing organization belong	gs to an affiliated group (and list in Part IV each affiliated	d group member's nam	e, address, EIN,
	expenses, and share of exces	s lobbying expenditures).		
B C	neck 🕨 🛄 if the filing organization check	ed box A and "limited control" provisions apply.		
	Limits on Lobb (The term "expenditures" m	(a) Filing organization's totals	(b) Affiliated group totals	
1a	Total lobbying expenditures to influence public	ic opinion (grass roots lobbying)	16,081.	
b		jislative body (direct lobbying)	150,852.	
с	Total lobbying expenditures (add lines 1a and	11b)	166,933.	
d			13,257,694.	
е		s 1c and 1d)	13,424,627.	
f	Lobbying nontaxable amount. Enter the amo		821,231.	
	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.		
g	Grassroots nontaxable amount (enter 25% o	f line 1f)	205,308.	
h	Subtract line 1g from line 1a. If zero or less, e	nter -0-	0.	
i	Subtract line 1f from line 1c. If zero or less, en	nter -0-	0.	
j		r line 1h or line 1i, did the organization file Form 4720		Yes 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2013 (b) 2014 (c) 2015		(d) 2016	(e) Total					
2a Lobbying nontaxable amount	793,226.	796,526.	765,235.	821,231.	3,176,218.				
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					4,764,327.				
c Total lobbying expenditures	191,384.	174,603.	121,772.	166,933.	654,692.				
d Grassroots nontaxable amount	198,307.	199,132.	191,309.	205,308.	794,056.				
e Grassroots ceiling amount (150% of line 2d, column (e))					1,191,084.				
f Grassroots lobbying expenditures				16,081.	16,081.				

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 BENEFICENT TECHNOLOGY, INC. 77-055541 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 e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	())
of th	e lobbying activity.	Yes	No	Amo	ount
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: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	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				
	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				
с	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?				
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ection	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section	• •			<u>.</u>
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"NO," OF	(b) Par	t III-A, III	1e 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 politic	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year				
	Carryover from last year				
-	Total				
	3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
5	expenditure next year?		4		
	t IV Supplemental Information		j		
	ide the descriptions required for Part I-A, line 1: Part I-B, line 4: Part I-C, line 5: Part I-A (affiliated group	list): Part II	A lines 1	and 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

								1545-0047
	HEDULE D m 990)	Complete if the org	anization answer	I Statements ed "Yes" on Form 990,			20	16
Depar	tment of the Treasury		Attach to Form 990.					to Public
	al Revenue Service	Information about Schedule D (For	rm 990) and its ins	structions is at www.irs				
Nam	e of the organizat	BENEFICENT TECHNOL				•	loyer identificat 77-0555	413
Pa	rt I Organiz	ations Maintaining Donor Advise	ed Funds or Ot	her Similar Funds	or Ac	cou	Ints.Complete if	the
	organizatio	on answered "Yes" on Form 990, Part IV, lin						
			,	advised funds	(b)	Fund	ds and other acc	ounts
1		end of year						
2		of contributions to (during year)						
3 4		of grants from (during year) at end of year						
5		ion inform all donors and donor advisors in		sets held in donor advise	ed funds	<u> </u>		
-	-	on's property, subject to the organization's	-				Yes	No No
6		ion inform all grantees, donors, and donor a						
	for charitable purp	poses and not for the benefit of the donor o	or donor advisor, o	for any other purpose of	conferrir	ng		
	impermissible priv							No No
Pa		vation Easements. Complete if the org	-		art IV, li	ne 7.		
1		servation easements held by the organizat		1				
		n of land for public use (e.g., recreation or e	education)	Preservation of a histo	-	•		
		of natural habitat n of open space		Preservation of a certif	ied hist	oric s	structure	
2		a through 2d if the organization held a quali	fied conservation o	contribution in the form o	of a con	serva	ation easement or	n the last
-	day of the tax yea	• •					Held at the End of	
а		conservation easements			— Г	2a		
b		tricted by conservation easements				2b		
с		rvation easements on a certified historic str				2c		
d		rvation easements included in (c) acquired						
		nal Register				2d		
3		rvation easements modified, transferred, re	leased, extinguishe	ed, or terminated by the	organiz	ation	o during the tax	
4	year	where property subject to conservation ea	comont is located					
5		ation have a written policy regarding the pe						
Ū	•	forcement of the conservation easements i		nopootion, nanaling of			Yes	
6	•	er hours devoted to monitoring, inspecting,						e year
	▶							
7	Amount of expense	ses incurred in monitoring, inspecting, hand	dling of violations, a	and enforcing conservat	ion ease	emen	nts during the yea	r
	▶\$							
8		ervation easement reported on line 2(d) abov	•			-	<u> </u>	<u> </u>
~		n)(4)(B)(ii)?					└── Yes	
9		ibe how the organization reports conservation		-				
	conservation ease	ble, the text of the footnote to the organiza	IIION S III ANCIAI SIAI	ements that describes t	ne orga	πζαι	ion's accounting	101
Pa		ations Maintaining Collections o	f Art, Historica	al Treasures, or Ot	her Si	imila	ar Assets.	
	Complete	if the organization answered "Yes" on Form	n 990, Part IV, line 8	3.				
1a	If the organizatior	n elected, as permitted under SFAS 116 (AS	SC 958), not to rep	ort in its revenue statem	ent and	l bala	ance sheet works	of art,
		es, or other similar assets held for public exl		, or research in furtheran	ice of p	ublic	service, provide,	in Part XIII,
-		otnote to its financial statements that descri						
b	-	n elected, as permitted under SFAS 116 (AS						
		er similar assets held for public exhibition, e	oucation, or resear	cn in furtherance of pub	nic serv	ice, p	provide the follow	ing amounts
	(i) Bevenue inclu	tems: uded on Form 990, Part VIII, line 1					\$	
							-	
2		n received or held works of art, historical tre				-		
_		punts required to be reported under SFAS 1			J, P			
а		d on Form 990, Part VIII, line 1				•	\$	
b		n Form 990, Part X					\$	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 632051 08-29-16 Schedule D (Form 990) 2016

Sche	dule D (Form 990) 2016 BENEFIC	ENT TECHNO	LOGY	, INC.			77	<u>'-05</u>	55413	B Page 2
Par	t III Organizations Maintaining C	Collections of A	rt, Hist	orical Tr	easures, o	or Othe	r Similar	Asse	ts(contin	ued)
3	Using the organization's acquisition, access	ion, and other record	ds, check	any of the	following tha	at are a sig	nificant use	of its	collectior	items
	(check all that apply):									
а	Public exhibition	c			hange progra					
b	Scholarly research	e	•	Other						
С	Preservation for future generations									
4										
5	During the year, did the organization solicit of								-	
Der	to be sold to raise funds rather than to be m								Yes	└── No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" on F	Form 990, F	'art IV,	line 9, or	
	reported an amount on Form 990, Pa									
та	Is the organization an agent, trustee, custod								7.	
	on Form 990, Part X?							L	Yes	└── No
b	If "Yes," explain the arrangement in Part XIII	and complete the to	bliowing ta	able:					A	
									Amount	
	Beginning balance									
	Additions during the year									
	Distributions during the year						1e 1f			
t 20	Ending balance Did the organization include an amount on F								Yes	No
	If "Yes," explain the arrangement in Part XIII									
Par									<u></u>	
		(a) Current year		ior year			d) Three year	s back	(e) Four	years back
1a	Beginning of year balance	(u) ourient your	(2)11	ior your	(0)	<u>, , , , , , , , , , , , , , , , , , , </u>	uj 111100 jour	o such	(0) - 0 u	jouro suore
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities									
-	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur		ce (line 1o	a. column (a	a)) held as:				<u> </u>	
а	Board designated or quasi-endowment	,	%	, (
	Permanent endowment	%								
с	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse		ation that	t are held a	nd administe	ered for the	e organizati	on		
	by:									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on So	chedule R?					3b	
4	Describe in Part XIII the intended uses of the		owment f	unds.						
Par	t VI Land, Buildings, and Equipn	nent.								
	Complete if the organization answere	ed "Yes" on Form 99	0, Part IV	, line 11a. S	See Form 990), Part X, li	ine 10.			
	Description of property	(a) Cost or c		(b) Cost		• •	cumulated		(d) Book	value
		basis (investi	ment)	basis ((other)	depr	reciation			
1a	Land									
	Buildings			<u> </u>						
	Leasehold improvements				3,330.		34,472			3,858.
	Equipment			36	3,723.	3	61,878	•	1	L,845.
	Other							\rightarrow		
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colum	n (B), line 1	0c.)		🕨	►	20),703.

Schedule D (Form 990) 2016

Part VII	Investments -	Other Securities.		
Schedule D	(Form 990) 2016	BENEFICENT	TECHNOLOGY,	INC.

Complete if the organization answered "Yes"	on 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DEPOSITS	58,595.
(2) GRANT/CONTRIBUTION RECEIVABLE	384,617.
(3) RELATED-PARTY RECEIVABLE	244,648.
(4) BENGINEERING STOCK	10,000.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	697,860.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	DEPOSITS	5,355.	
(3)	TERM ENDOWMENT	350,000.	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	355,355.	

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 X

Schedule D (Form 990) 2016

D (Form 990) 2016	BENEFICENT	TECHNOLOGY,	INC.

b Other (Describe in Part XIII.)

lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

c Add lines 4a and 4b

Part XIII Supplemental Information.

Sche	dule D (Form 990) 2016 BENEFICENT TECHNOLOGY ,	, INC.	77-055541	B Page 4
	t XI Reconciliation of Revenue per Audited Financial S	statements With Rever	ue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV	, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
Pa	t XII Reconciliation of Expenses per Audited Financial	Statements With Expe	nses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV	, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
с	Other losses			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		

4b

4c

5

BASED ON AN ANALYSIS PREPARED BY THE ORGANIZATION, IT WAS DETERMINED THAT

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1 a and 4; Part IV, lines 1 b and 2b; Part V, line 4; Part X, line 2; Part XI,

THE TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN HAD NO MATERIAL EFFECT ON

THE RECORDED TAX ASSETS AND LIABILITIES OF THE ORGANIZATION. THE

ORGANIZATION'S FEDERAL AND STATE INCOME TAX RETURNS FOR THE YEARS 2012

THROUGH 2015 ARE SUBJECT TO EXAMINATION BY REGULATORY AGENCIES, GENERALLY

FOR THREE YEARS AND FOUR YEARS AFTER THEY ARE FILED FOR FEDERAL AND STATE

RESPECTIVELY.

PART X, LINE 2:

SCHEDULE F (Form 990)			ivities Outside the Ur n answered "Yes" on Form 990, Part			OMB No. 1545-0047
Department of the Treasury				Open to Public		
Internal Revenue Service Name of the organization	Information ab	but Schedule F	(Form 990) and its instructions is at	www.irs.gov/id		Inspection ntification number
BENEFICENT TECH	INOLOGY	TNC.			77-0555	413
			tside the United States. Comple	ete if the organ		
Form 990, Part IV						
1 For grantmakers. Does	the organizatior	n maintain recor	ds to substantiate the amount of its gr	ants and other		
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award the	e grants or ass	istance?	X Yes No
-	ribe in Part V the	organization's	procedures for monitoring the use of it	s grants and o	ther assistance of	outside the
United States.	in a fallau in a Davi					
3 Activities per Region. (T (a) Region	he following Part (b) Number of		an be duplicated if additional space is (d) Activities conducted in the region		vity listed in (d)	
(a) negion	offices	employees,	(by type) (such as, fundraising, pro-		vity listed in (d) gram service,	(f) Total expenditures
	in the region	agents, and independent	gram services, investments, grants to		e specific type	for and investments
		contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
	_			LITERACY FO	OR THE	
ASIA	0	0	PROGRAM SERVICES	DISABLED		589,645.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	HUMAN RIGHT	'S	166,994.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	LABS		32,814.
LATIN AMERICA	0	0	PROGRAM SERVICES	HUMAN RIGHT	S	500,627.
EUROPE (INCLUDING				LITERACY FO	OR THE	
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	DISABLED		211,548.
NORTH AMERICA	0	0	PROGRAM SERVICES	LITERACY FO DISABLED	DR THE	85,839.
	0	<u> </u>	I ROGRAM SERVICES	DISADUD		
EUROPE (INCLUDING						
ICELAND & GREENLAND)	0	0	GRANTS	HUMAN RIGHT	'S	50,000.
CIID_CAUADANI ADDTCA			CDANTE		ומ	110 050
SUB-SAHARAN AFRICA 3 a Sub-total	0		GRANTS	HUMAN RIGHT	.o	118,256.
b Total from continuation		5				1,100,120.
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	0				1,755,723.

Statement of Activities Outside the United States

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

OMB No. 1545-0047

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND &						
		GREENLAND)	SUPPORT MISSION	50,000.	WIRED FUNDS	0.		
		SUB-SAHARAN AFRICA	SUPPORT MISSION	50,000.	WIRED FUNDS	0.		
				,				
		SUB-SAHARAN						
		AFRICA	SUPPORT MISSION	12,500.	WIRED FUNDS	0.		
		SUB-SAHARAN						
			SUPPORT MISSION	10,026.	WIRED FUNDS	Ο.		
		SUB-SAHARAN AFRICA	SUPPORT MISSION	11,875.	WIRED FUNDS	0.		
		SUB-SAHARAN						
		AFRICA	SUPPORT MISSION	11,940.	WIRED FUNDS	0.		
		SUB-SAHARAN AFRICA	SUPPORT MISSION	10 000	WIRED FUNDS	0.		
		AFRICA	BOLLOVI MISSION	10,000.	MIUTU LONDS	0.		+
		SUB-SAHARAN						
			SUPPORT MISSION		WIRED FUNDS	0.		
			recognized as charities by the		-			0
	-	-				····· <u>·</u> <u>·</u>		8
 Enter total number of 	other organizations	or entities				<u></u>		0

Schedule F (Form 990) 2016

77-0555413

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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2016

			TECHNOLOGY,	INC.
Part IV F	Foreign Form	S		

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	X No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately 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; do not file with Form 990)</i>	Yes	X 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	X 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? <i>If</i> "Yes," <i>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)</i>	Yes	X 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	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2016

Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds): Part I, li

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:

QUARTERLY OR OTHER PERIODIC REPORTS AND NARRATIVES 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 MADE SITE VISITS DURING

THE YEAR TO MAJORITY OF THE ORGANIZATIONS.

SC	SCHEDULE J Compensation Information							
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	F	20	16			
•		Compensated Employees		20	IU)		
Dono	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic		
	al Revenue Service	Information about Schedule J (Form 990) and its instructions is at www.irs.gov/for		Inspe				
Nam	e of the organizatio			identificatio		mber		
BENEFICENT TECHNOLOGY, INC. 77-0555413								
Pa	rt I Question	s Regarding Compensation						
	o				Yes	No		
1a		iate box(es) if the organization provided any of the following to or for a person listed on Form	1990,					
		line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or o	, i i i i i i i i i i i i i i i i i i i						
	Travel for com							
		cation and gross-up payments spending account Health or social club dues or initiation fee						
			ur, chei)					
h	If any of the hoves	on line 1a are checked, did the organization follow a written policy regarding payment or						
5	,	provision of all of the expenses described above? If "No," complete Part III to explain		1b				
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
_	•	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2				
3	Indicate which, if a	ny, of the following the filing organization used to establish the compensation of the organization	ation's					
		ector. Check all that apply. Do not check any boxes for methods used by a related organizat						
	establish compens	ation of the CEO/Executive Director, but explain in Part III.						
	Compensation	n committee Written employment contract						
	Independent of	compensation consultant Compensation survey or study						
	X Form 990 of o	ther organizations X Approval by the board or compensation of	ommittee					
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
	organization or a re	lated organization:				37		
а		e payment or change-of-control payment?				X		
b		ceive payment from, a supplemental nonqualified retirement plan?				X X		
С		ceive payment from, an equity-based compensation arrangement?		4c		^		
	If "Yes" to any of III	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only contion 501/	(2) E01(c)(4) and E01(c)(20) arganizations must complete lines 5.0						
5		c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on					
5	contingent on the r							
я	•			5a		x		
b	Any related organiz	ation?		5u 5b		x		
-		or 5b, describe in Part III.						
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on					
	contingent on the r							
а		,		6a		Х		
		ation?				Х		
		or 6b, describe in Part III.						
7	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment	s					
		nes 5 and 6? If "Yes," describe in Part III		7	Х			
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t	the					
		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X		
9		id the organization also follow the rebuttable presumption procedure described in						
		ז 53.4958-6(c)?				L		
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forn	n 990)) 2016		

77-0555413

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 on 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 aren't 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 column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denenits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) JAMES R. FRUCHTERMAN	(i)	272,275.	66,000.	0.	5,300.	30,523.	374,098.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SUKHI NAGESH	(i)	170,744.	0.	0.	2,929.	21,572.	195,245.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MARK ROBERTS	(i)	194,512.	19,250.	0.	4,324.	21,700.	239,786.	0.
COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ELIZABETH BEAUMON	(i)	203,549.	19,500.	0.	4,490.	9,456.	236,995.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JANE POOLE	(i)	163,905.	16,000.	0.	3,601.	677.	184,183.	0.
VP HR & ADMIN	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ANH QUYNH BUI	(i)	148,892.	14,500.	0.	3,309.	18,466.	185,167.	0.
VP BENETECH LABS	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) BRADLEY TURNER	(i)	161,818.	5,200.	0.	3,340.	0.	170,358.	0.
VP GLOBAL LITERACY	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) FRED SLONE	(i)	144,664.	14,400.	0.	3,240.	26,276.	188,580.	0.
DIRECTOR OF OPS	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) DAVID MURPHY	(i)	151,235.	12,000.	0.	3,337.	32,511.	199,083.	0.
ENGINEERING DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) CHARLES LAPIERRE	(i)	135,969.	12,750.	0.	2,976.	400.	152,095.	0.
TECHNICAL LEAD	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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, and for Part II. Also complete this part for any additional information.

PART I, LINE 7:

EMPLOYEES RECEIVE ANNUAL BONUSES BASED ON 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 J (Form 990) 2016

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury

Internal Revenue Service Name of the organization 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.

BENEFICENT TECHNOLOGY, INC.

Employer identification number 77 - 0555413

OMB No 1545-0047

Open to Public

Inspection

6

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

NEED TO LIVE AND PROSPER. BENETECH IS ALSO CONSTANTLY PURSUING THE NEXT

BIG SOCIAL IMPACT.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

UNIVERSITIES AND PUBLISHERS AROUND THE WORLD, BOOKSHARE PROVIDES PEOPLE

WITH PRINT DISABILITIES INSTANT ACCESS TO MORE THAN 540,000 BOOKS

SPANNING 33 LANGUAGES AND 150 DAILY NEWSPAPERS, IN WAYS THAT WORK FOR

THEM.

DIAGRAM CENTER: A COMPLEMENTARY INITIATIVE TO BOOKSHARE, THE DIGITAL IMAGE AND GRAPHIC RESOURCES FOR ACCESSIBLE MATERIALS (DIAGRAM) CENTER IS DEDICATED TO REVOLUTIONIZING HOW STUDENTS WITH DISABILITIES ACCESS EDUCATIONAL CONTENT, ESPECIALLY SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM) MATERIALS. IN 2016, DIAGRAM EXPANDED ITS WORK BY GROWING ITS COMMUNITY OF CROSS-SECTOR EXPERTS IN ASSISTIVE TECHNOLOGY, EDUCATION FOR STUDENTS WITH DISABILITIES, AND PUBLISHING OF EDUCATIONAL CONTENT.

BORN ACCESSIBLE: THE BORN ACCESSIBLE INITIATIVE IS DRIVING SYSTEMIC CHANGE IN THE PUBLISHING INDUSTRY BY HELPING PUBLISHERS CREATE ACCESSIBLE BOOKS FROM THE START. THIS IS WHERE THE NEXT EQUILIBRIUM CHANGE WILL BE SEEN WHEN COMPANIES BEGIN TO PUBLISH BOOKS IN AN ACCESSIBLE FASHION, AND ANYONE WITH DISABILITY WILL BE ABLE TO ACCESS THEM IN THE SAME WAY AS THEIR PEERS, WITHOUT HAVING TO LOOK FOR A

REMEDIATED COPY.

Name of the organization

BENEFICENT TECHNOLOGY, INC.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: [MANDARIN, SIMPLIFIED]) 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 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 100 COUNTRIES AND IS AVAILABLE FOR WINDOWS, MAC OS, AND LINUX. IN ADDITION TO THE DESKTOP APPLICATION, THE MARTUS ECOSYSTEM ALSO INCLUDES ADDITIONAL TOOLS SUCH AS MOBILE MARTUS -BENETECH'S FREE, OPEN SOURCE SECURE ANDROID-BASED MOBILE DOCUMENTATION APPLICATION, BUILT ON MARTUS TECHNOLOGY - AND SECUREAPP, A CUSTOMIZABLE, SECURE DATA COLLECTION TOOL. IN ADDITION TO DEVELOPING SOFTWARE FOR THE HUMAN RIGHTS FIELD, THE BENETECH HUMAN RIGHTS PROGRAM TEAM PROVIDES TRAINING AND SUPPORT TO GRASSROOTS AND INSTITUTIONAL PARTNERS IN OVER 50 COUNTRIES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: EXCHANGE PLATFORM (OPEN REFERRAL) THAT ENABLES RESOURCE DATA TO BE SHARED IN REAL-TIME. BY SUCCESSFULLY COORDINATING DATA AMONG MULTIPLE STAKEHOLDERS, OUR OPEN REFERRAL PROJECT CAN GENERATE TOOLS AND PRACTICES THAT YIELD TRANSFORMATIVE CHANGE FOR COMMUNITIES THAT NEED

THESE SERVICES.

DIGITAL SECURITY TRAINING ALTERNATE REALITY GAMES: OUR DIGITAL SECURITY TRAINING ARG (ALTERNATE REALITY GAMES) ASKS TRAINING PARTICIPANTS TO INVESTIGATE AND COMPLETE FICTITIOUS TASKS THROUGH THEIR REAL-WORLD DEVICES AND INTERACTIONS WITH EACH OTHER. OUR CONCEPTUAL ARG WOULD ALLOW LEADERSHIP AT HUMAN RIGHTS ORGANIZATIONS TO ENROLL THEIR FIELD WORKERS INTO A SIMULATED TRAINING AND ASSESSMENT ENVIRONMENT. THE PLATFORM CAN INCLUDE SEVERAL EXERCISES THAT GUIDE USERS TO COMPLETE TASKS WITHIN THE DIGITAL SECURITY SPACE. MODULES COULD INCLUDE -IDENTIFYING PHISHING, MALWARE PREVENTION, CREATING STRONG PASSWORDS, SECURE PHONE CALLS, OFF THE RECORD CHAT, SECURE EMAIL, REMOVING IDENTIFYING METADATA FROM MEDIA, HTTPS CERT CHECKING, USING TOR, ETC.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ROUTE 66 LITERACY & OTHER: 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.

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,885.

FORM 990, PART VI, SECTION A, LINE 2:

TWO OF BENETECH'S DIRECTORS, JAMES R. FRUCHTERMAN AND JAMES KLECKNER, ARE

ALSO DIRECTORS AND HAVE FINANCIAL INTERESTS IN RAF TECHNOLOGY, INC., A 632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016)

Schedule O (For	m 990 or 9	90-EZ) (2016)
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Name of the organization

BENEFICENT TECHNOLOGY, INC.

FOR-PROFIT COMPANY LOCATED IN REDMOND, WASHINGTON.

FORM 990, PART VI, SECTION A, LINE 7A:

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.

FORM 990, PART VI, SECTION B, LINE 11B:

THE CFO RECEIVES A COPY OF THE FORM 990 FROM THE PREPARER AND CONDUCTS THE FIRST REVIEW OF THE FORM FOR ACCURACY. A COPY OF THE DRAFT 990 IS THEN PROVIDED TO THE CEO, ALL BOARD MEMBERS, AND THE VP OF HR FOR THEIR REVIEW, EDITS, AND COMMENTS. THE CFO THEN INCORPORATES ANY COMMENTS AND EDITS RECEIVED, IF NECESSARY. ANY EDITS OR CHANGES ARE APPROPRIATELY COMMUNICATED TO THE PREPARER AND ONCE FINALIZED, THE FINAL FORM 990 IS SIGNED OFF BY THE CFO.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH KEY EMPLOYEE, OFFICER, AND DIRECTOR IS EXPECTED TO READ AND SIGN ANNUALLY THE COMPANY'S CONFLICT OF INTEREST POLICY AND CODE OF CONDUCT POLICY WHICH ARE THEN REVIEWED BY THE GOVERNANCE COMMITTEE OF THE BOARD AND THEN FILED WITH ITS MINUTES. IF A CONFLICT EXISTS, THE BOARD OR THE APPROPRIATE COMMITTEE SHALL FOLLOW THE PROCEDURES SET FORTH IN THE CONFLICT OF INTEREST POLICY TO APPROPRIATELY PROTECT BENETECH'S INTERESTS.

FORM 990, PART VI, SECTION B, LINE 15A:

THE GOVERNANCE COMMITTEE OF THE BOARD OF DIRECTORS ANNUALLY REVIEWS

COMPARABLE COMPENSATION INFORMATION, AND COMPENSATION OF THE CEO AND CFO, 632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016) Name of the organization

BENEFICENT TECHNOLOGY, INC.

AND RECOMMENDS ANY CHANGES FOR FULL BOARD APPROVAL.

FORM 990, PART VI, SECTION C, LINE 19:

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.

FORM 990, PART XII, LINE 2C:

THE PROCESS OF OVERSEEING THE AUDIT AND SELECTING AN INDEPENDENT

ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR.

SCH	EDULE R

(Form 990)

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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.

Department of the Treasury Internal Revenue Service

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

Name of the organization

BENEFICENT TECHNOLOGY, INC.

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

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			(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No

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

OMB No. 1545-0047

2016 Open to Public Inspection

Employer identification number

77-0555413

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. Part III

	i anelenip aaning tre ta						-					
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income	Share of total income	Share of end-of-year		ortionate	Code V-UBI	Gener	al or Po	ercentage ownership
or related organization		(state or foreign	entity	(related, unrelated, excluded from tax under sections 512-514)	Income	assets		tions?	20 of Schedule	parti		Swiiersnip
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	
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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. Part IV

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(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(t contr ent	o)(13) olled
		country)				466666		Yes	No
BENGINEERING, INC 77-0556653			BENEFICENT						
480 CALIFORNIA AVE., STE. 201			TECHNOLOGY,						
PALO ALTO, CA 94306	ENGINEERING SERVICES	CA	INC.	C CORP	3.	5,309.	100%	Х	
	-								
	-								
	-								

Schedule R (Form 990) 2016 BENEFICENT TECHNOLOGY, INC.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No	
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?				
а	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				
b	Gift, grant, or capital contribution to related organization(s)	1b		Х	
с	Gift, grant, or capital contribution from related organization(s)	1c		Х	
	Loans or loan guarantees to or for related organization(s)	1d	Х		
	Loans or loan guarantees by related organization(s)	1e		Х	
f	Dividends from related organization(s)	1f		X	
g	Sale of assets to related organization(s)	1g		Х	
h	Purchase of assets from related organization(s)	1h		Х	
	Exchange of assets with related organization(s)	1i		Х	
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X	
- I	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х	
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х	
	Sharing of paid employees with related organization(s)	10		Х	
р	Reimbursement paid to related organization(s) for expenses	1p		X	
q	Reimbursement paid by related organization(s) for expenses	1q		X	
r	Other transfer of cash or property to related organization(s)	1r		X X	
s Other transfer of cash or property from related organization(s)					
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)				
(2)				
(3)				
<u>(</u> 4)				
<u>(5)</u>				
(6)				

Schedule R (Form 990) 2016 BENEFICENT TECHNOLOGY, INC.

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are a partners 501(c) orgs. Yes I) all s sec.)(3) .? No	(f) Share of total income	(g) Share of end-of-year assets	Dispr tior	n) opor- nate tions?	(j) General o managing partner? Yes NO	(k) Percentage ownership

Schedule R (Form 990) 2016