N.R. recid !

20-56-4406

-....CHAR500

This form used for icle 7-A, EPTL and dual filers (replaces forms CHAR 497,

Annual Filing for Charitable Organizations

New York State Department of Law (Office of the Attorney General)
Charities Bureau - Registration Section
120 Broadway

New York, NY 10271 www.oag.state.ny.us/charities/charities.html

2005

Open to Public Inspection

CHAR 010 and CHAR 006)	www.oag.state.ny.us/ci	nances/chances.nam		· · · · · · · · · · · · · · · · · · ·
1. General Information		100 mg (100 mg) (100	3	
a. For the fiscal year beginning (mm/dd/yyyy) [0 0] / 2005 and ending ((mm/dd/yyyy) 09 30	2005	
b. Check if applicable for NYS:	c. Name of organization			d. Fed. employer ID no. (EIN) (##-#######)
☐ Address change	TAPFOUND, INC.			91-2162645
☐ Name change	aba. TAPPOOT FOUND	ATION		e. NY State registration no. (##-##-##) 20 - 56 - 44
Initial filing	Number and street (or P.O. box if mail not deliv		Room/suite	f. Telephone number
Final filing	466 GEARN STREET		202	416.359.1423 ×320
Amended filing	City or town, state or country and zip + 4			q. Email
	SAN FRANCISCO, CA 9	4102-1261		
		•		
2. Certification - Two Signatur	no Domitrod			
<u> </u>	<u> </u>	<u> </u>	3 4 4	
	rjury that we reviewed this report, including a			our knowledge and belief, they are true,
correct and complete in accorda	ince with the laws of the State of New York a			Back De 12 / 1 / 1 / 1
a. President or Authorized Office	cer/Trustee	Printed Name	P51	PRESIDENT 12/10/08
b. Chief Financial Officer or Tre	PON A-	KATE GR	IFPEN :	DIRECTOR FING ADMIN 12/4
b. Officer financial Officer of The	Signature	Printed Name		Title Date
	V			
3. Annual Report Exemption In	ıformation			
\$25,000 and contributions NOTE: An organization all other sou	ibutions from NY State (including residents, decorphisms) the organization did not use the services of solutions of the services of solutions of the services of solutions of the services of	of a professional fund real fund real fund in this exemption if no Feat, United Way or income all or substantially a	aiser (PFR) PFR or FRC rporated controls	was used <u>and</u> either: 1) the mmunity appeal <u>and</u> contributions from ributions from a single government
	ion (EPTL registrants and dual registrants)	similar to triat roquirou		7.7,
Check ➪ 🔲 if total gross	s receipts for this fiscal year did not exceed \$ any time during this fiscal year.	\$25,000 <u>and</u> the asset	s (market va	ılue) of the organization did not exceed
exemptions under both law	alming the annual report exemption under the one less, simply complete part 1 (General Information), pa of submit a fee, do not complete the following sche	rt 2 (Certification) and par	t 3 (Annual Re	eport Exemption Information) above.
4. Article 7-A Schedules				
a. Did the organization use a pro * If "Yes", complete Schedu	overnment contributions (grants)?	commercial co-venturer	for fund raisi	
5. Fee Submitted: See last pag	e for summary of fee requirements.			
Indicate the filing fee(s) you are	the contract of the contract o			
1		\$ <u>25</u> .	Submit	only one check or money order for the
•		\$ <u>250</u> -	total fee,	, payable to "NYS Department of Law"
c Total foo		e 976.		

Sc	chedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsels (FRC), Commercial Co-Venturers (CCV)
	you checked the box in question 4.a. on page 1, complete the following schedule for each PFR, FRC or CCV that the organization engaged for ad raising activity in NY State:
1.	Type of fund raising professional (FRP):
	Professional fund raiser
	Fund raising counsel
	Commercial co-venturer
2.	Name of FRP:
	Number and street (or P.O. box if mail is not delivered to street address):
	City or town, state or country and zip + 4:
3.	FRP telephone number:
4.	Services provided by FRP (provide description):
5.	Compensation arrangement with FRP (provide description):
c	Dates of contract
0.	Dates of contract through (mm/dd/yyyy) (mm/dd/yyyy)
7.	Amount paid to FRP\$

Schedule 4b: Government Contributions (Grants)

If you checked the box in question **4.b.** on page 1, complete the following schedule for **each** government contribution (grant). Use additional copies of this page if necessary to list each government contribution (grant) separately.

Sovernment Agency Name Oakland Unified School District	\$ 10,000 -
VIII VIII VIII VIII VIII VIII VIII VII	\$
	\$
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	\$
	\$ -
	. \$
Total Government Contr	ibutions (Grants) \$ 10,000

5. Fee Instructions

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500.

Or	ganization's Registration Type	Fee Instructions
•	Article 7-A	Calculate the Article 7-A filing fee using the table in part a below. The EPTL filing fee is \$0.
•	EPTL	Calculate the EPTL filing fee using the table in part b below. The Article 7-A filing fee is \$0.
•	Dual	Calculate both the Article 7-A and EPTL filing fees using the tables in parts a and b below. Add the Article 7-A and EPTL filing fees together to calculate the total fee. Submit a single check or money order for the total fee.

a) Article 7-A filing fee

Total Support & Revenue	Article 7-A Fee
more than \$250,000	\$25
up to \$250,000 *	\$10

Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of \$25, regardless of total support and revenue.

b) EPTL filing fee

Net Worth at End of Year	EPTL Fee
Less than \$50,000	\$25
\$50,000 or more, but less than \$250,000	\$50
\$250,000 or more, but less than \$1,000,000	\$100
\$1,000,000 or more, but less than \$10,000,000	\$250
\$10,000,000 or more, but less than \$50,000,000	\$750
\$50,000,000 or more	\$1500

6. Attachments - Document Attachment Check-List

Check the boxes for the documents you are attaching.

For All Filers										
Filing Fee										
☐ Single check or money order payable to "NYS Department of Law"										
Copies of Internal Revenue Service Forms	15.									
√D IRS Form 990	☐ IRS Form 990-	☐ IRS Form 990-PF								
	☐ Schedule A : orm 990-EZ									
Schedule B to IRS Form 990	☐ Schedule B to IRS Form 990-EZ	☐ Schedule B to IRS Form 990-PF								
☐ IRS Form 990-T	☐ IRS Form 990-T	☐ IRS Form 990-T								
Additional Article 7-A Document Attachm	nent Requirement									
Independent Accountant's Report										
Audit Report (total support & revenue more than \$250,000)										
Review Report (total support & revenue \$100,001 to \$250,000)										
☐ No Accountant's Report Required (tot	al support & revenue not more than \$100,000)									

CHANGE IN ACCOUNTING PERIOT

Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Inspection The organization may have to use a copy of this return to satisfy state reporting requirements. A For the 2004 calendar year, or tax year beginning 9/30/2005 1/1/2005 and ending B Check if applicable: C Name of organization D Employer identification number Please Address change use IRS Tapfound, Inc. dba Taproot Foundation 91-2162645 label or Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Room/suite print or type. Initial return 466 Geary Street 300 415/359-1423 See Specific Final return City or town **ZIP + 4** State or country F Accounting method: Cash X Accrual Instructions. Amended return Other (specify) San Francisco 94102 Application pending Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable H and I are not applicable to section 527 organizations. trusts must attach a completed Schedule A (Form 990 or 990-EZ). Is this a group return for affiliates? G Website: www.taprootfoundation.org If "Yes," enter number of affiliates H(c) Are all affiliates included? X 501(c) (3) J Organization type (check only one) (insert no.) (If "No," attach a list. See instructions.) K Check here lif the organization's gross receipts are normally not more than \$25,000. The Is this a separate return filed by an organization H(d) organization need not file a return with the IRS; but if the organization received a Form 990 Package in the covered by a group ruling? mail, it should file a return without financial data. Some states require a complete return. Group Exemption Number > Check | if the organization is not required L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 to attach Sch. B (Form 990, 990-EZ, or 990-PF). Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.) Contributions, gifts, grants, and similar amounts received: 1a 1b 1c 1d d Total (add lines 1a through 1c) (cash \$ _____1,009,089 noncash \$ 1,009,089 2 Program service revenue including government fees and contracts (from Part VII, line 93) . 2 25,000 3 0 4 4 253 5 6a c Net rental income or (loss) (subtract line 6b from line 6a) 6c Other investment income (describe 7 8 a Gross amount from sales of assets other (B) Other (A) Securities than inventory 0 0 8a 0 8b 0 **b** Less: cost or other basis and sales expenses . 0 c Gain or (loss) (attach schedule) 0 **8c** d Net gain or (loss) (combine line 8c, columns (A) and (B)) 8d Special events and activities (attach schedule). If any amount is from gaming, check here a Gross revenue (not including \$ 29,630 **b** Less: direct expenses other than fundraising expenses c Net income or (loss) from special events (subtract line 9b from line 9a) . 9c 16,313 10 a Gross sales of inventory, less returns and allowances c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) 10c 11 11 0 12 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 1.050.655 13 13 365,756 14 14 111,283 15 15 114,125 16 16 17 17 Total expenses (add lines 16 and 44, column (A)) 591,164 18 18 459,491 19 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 333,309 20 20 Ret Net assets or fund balances at end of year (combine lines 18, 19, and 20) 792,800 Form 990 (2004) Tapfound, Inc. dba Taproot Foundation 91-2162645 Part II Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations Functional Expenses and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.) Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising and general 6b, 8b, 9b, 10b, or 16 of Part I. services Grants and allocations (attach schedule) . . . 22 \$ 0 noncash \$ (cash 0) 22 23 Specific assistance to individuals (attach schedule) . . . 23 0 24 Benefits paid to or for members (attach schedule) 24 0 25 25 0 26 26 414,719 286,156 49,766 78,797 27 27 28 28 Ol 29 29 67.889 8.084 12,798 47,007 30 30 10,000 10,000 31 31 14,900 14,900 32 32 0 33 33 5,747 3.965 690 1.092 34 34 10,441 7,204 1,253 1,984 35 225 35 816 142 1,183 36 17,264 3,002 36 25,019 4,753 37 37 9.189 6.340 1,103 1,746 38 38 2,332 1,609 280 443 39 27.849 39 27,849 Conferences, conventions, and meetings 40 40 8,075 5,819 1,615 641 41 41 0 42 Depreciation, depletion, etc. (attach schedule) 42 831 573 100 158 Other expenses not covered above (itemize): a Insurance 2,253 43a 2,253 4,788 b Other expenses 1,349 2,446 43b 8,583 c Allocation of shared costs -12.346 43c -17.846-2.200-3,30043d 0 43e 0 43f 44 Total functional expenses (add lines 22 through 43). Organizations 365,756 completing columns (B)-(D), carry these totals to lines 13 — 15. 591,164 111,283 114,125 Joint Costs. Check if you are following SOP 98-2. Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? | Yes | (iii) the amount allocated to Management and general \$; and (iv) the amount allocated to Fundraising \$ Part III Statement of Program Service Accomplishments (See page 25 of the instructions.) **Program Service** What is the organization's primary exempt purpose?

provide pro bono marketing, HR and IT services to nonprofits **Expenses** (Required for 501(c)(3) and All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number (4) orgs., and 4947(a)(1) of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) trusts; but optional for organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) others.) a Awarded Service Grants to 129 nonprofit organizations in the San Francisco Bay Area and New York City, delivering pro bono services with a total market value of \$5.2 million. Recruited over 1,100 business professionals to do pro bono work, serving our local communities. 365,756 (Grants and allocations \$ (Grants and allocations \$ (Grants and allocations \$ (Grants and allocations \$

(Grants and allocations \$

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

e Other program services (attach schedule)

365.756

Part IV Balance Sheets (See page 25 of the instructions.)

	Note:	Where required, attached schedules and amounts within column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year		
	45	Cash—non-interest-bearing			240,459	45	401,486
	46	Savings and temporary cash investments				46	
		, ,					
	47 a	Accounts receivable	47a	983		.]	
		Less: allowance for doubtful accounts	47b	0	o	47c	983
ļ		•					
	48 a	Pledges receivable	48a	2,299			
	b	Less: allowance for doubtful accounts	48b	0	6,595	48c	2,299
	49	Grants receivable			100,000	49	503,156
	50	Receivables from officers, directors, trustees, and					
		(attach schedule)			0	50	0
y,	51 a	Other notes and loans receivable (attach					
Assets		schedule)	51a	0			
¥	1		51b	0	0	51c	0
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			3,265		8,183
	54	Investments—securities (attach schedule)	▶[CostFMV _	0	54	0
	55 a	Investments—land, buildings, and					
		equipment: basis	55a	10,099			
	b	Less: accumulated depreciation (attach					
		schedule)	55b	830		55c	9,269
	56	Investments—other (attach schedule)			0	56	0
		Land, buildings, and equipment: basis	57a	0			
	D	Less: accumulated depreciation (attach schedule)	57h		0	570	0
	58	Other assets (describe Deposits	57b	0	0	57c	5,700
	55	Deposits		 ′		30	3,700
	59	Total assets (add lines 45 through 58) (must equ	anil leı	74)	350,319	59	931,076
	60	Accounts payable and accrued expenses			17,010		64,986
	61	Grants payable	17,010	61	01,000		
	62	Deferred revenue				62	73,290
G	63	Loans from officers, directors, trustees, and key			 		
itie	1	schedule)		· .	0	63	. 0
Liabili ties	64 a	Tax-exempt bond liabilities (attach schedule) .			64a	0	
Ĕ		Mortgages and other notes payable (attach sche-			0	64b	0
	65	Other liabilities (describe) [_0	65	0
		· · · · - · · · · · · · · · · · · · · ·					
	66	Total liabilities (add lines 60 through 65)	<u></u>	<u> </u>	17,010	66	138,276
	Orga	inizations that follow SFAS 117, check here	► X	and complete lines			
		67 through 69 and lines 73 and 74.		i			
88	67	Unrestricted		<i>.</i>	101,309		159,144
n C	68	Temporarily restricted			232,000		633,656
3ala	69	Permanently restricted			69		
Ď	Orga	inizations that do not follow SFAS 117, check h	▶and				
μ̈́		complete lines 70 through 74.					
or !	70	Capital stock, trust principal, or current funds		70	·-·		
ţ	71	Paid-in or capital surplus, or land, building, and e		71			
SSE	72	Retained earnings, endowment, accumulated inc				72	
Net Assets or Fund Balances	73	Total net assets or fund balances (add lines 63	r throug	jn 69 or			
ž		lines 70 through 72;		ina 24)	222 222	72	700 000
	74	column (A) must equal line 19; column (B) must			333,309 350,319		792,800 931,076
	74	Total liabilities and net assets / fund balances	i (aud II	nes oo anu 73) .	350,319	14	931,076

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

Part IV-A Reconciliation of Revenue per			V-B Reconci	91-2162645 liation of Expenses p		Page 4
Financial Statements with Revo		lait		I Statements with Ex		
Return (See page 27 of the instru			Return		·po	ioco poi
a Total revenue, gains, and other support	10110113.7	а	Total expenses	and losses per	1	
per audited financial statements	a 1,068,501	a		statements ►		609,010
b Amounts included on line a but not	a 1,068,501	<u> </u>			a	009,010
on line 12, Form 990:		b		ed on line a but not	H	
		, ا	on line 17, Form			
(1) Net unrealized gains		(1) Donated service			
on investments \$			and use of facili			
(2) Donated services and		(2) Prior year adjus			
use of facilities \$ 17,846			reported on line			
(3) Recoveries of prior			Form 990		4. 1	
year grants \$		(;	Losses reported		1.0	
(4) Other (specify):			line 20, Form 99	90 <u>.</u> \$	1:	
\$		(-	4) Other (specify):			
<u> </u>				\$		
Add amounts on lines (1) through (4)	b 17,846			\$]	
			Add amounts or	lines (1) through (4)	b	17,846
c Line a minus line b	c 1,050,655	С		e b ▶	·C	591,164
d Amounts included on line 12,		d	Amounts include	ed on line 17.		
Form 990 but not on line a:			Form 990 but no			
(1) Investment expenses		1	1) Investment expe			
not included on line		· '	not included on			
6b, Form 990 \$			6b, Form 990			
(2) Other (specify):	1	,	2) Other (specify):		1	
(2) Caron (opeony).		'		•		
<u> </u>	1	ļ.	••	3	-	
Add amounts on lines (4) and (2)			Add amazinta a	5 in a (4) and (2)	-	Come i ha ii ii ii ii ii
Add amounts on lines (1) and (2)	0	4		n lines (1) and (2) . ▶	<u>, a</u>	[C
e Total revenue per line 12, Form 990	1 250 055	е		per line 17, Form 990		504.40
(line c plus line d)				d) ▶		591,164
Part V List of Officers, Directors, Trus of the instructions.)	stees, and Key E	mpio	yees (List each of	ne even it not compensa	itea;	see page 27
of the instructions.)	Τ	Т	(C) Componentian	(D) Contributions to	1	(E) Evenes
(A) Name and address	(B) Title and average t		(C) Compensation (If not paid,	employee benefit plans &		(E) Expense account and other
	per week devoted to po	osition	enter -0)	deferred compensation		allowances
Name Aaron Hurst Str 466 Geary St	Title President					
City San Francisco ST CA ZIP 94102	Hr/WK 40		67,500	2,700		2,100
Name See attached Str	Title Board					
City ST ZIP	Hr/WK		0	(ol .	(
Name Str	Title		· · · · · · · · · · · · · · · · · · ·			
City ST ZIP	Hr/WK				-	
Name Str	Title		-		1	
City ST ZIP	Hr/WK		i			
	Title				+	
	·					
	Hr/WK				-	
Name Str	Title					
City ST ZIP	Hr/WK	∤	 		+	
Name Str	Title					
City ST ZIP	Hr/WK				+-	
Name Str	Title					
City ST ZIP	Hr/WK				\bot	
Name Str	Title				1	
City ST ZIP	Hr/WK				\bot	
Name Str	Title					
City ST ZIP	Hr/WK					
75 Did any officer, director, trustee, or key emplo	vee receive annre	gate c	ompensation of me	ore than \$100,000 from v	VOLI	
organization and all related organizations, of	which more than \$1	10 00C	was provided by	the related organizations	?▶	Yes X No
If "Yes," attach schedule—see page 28 of the		. 5,500	provided by	Totalou organizatione	•	

Pårt \	Other Information (See page 28 of the instructions.)		Yes	No				
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity .	76		Χ				
	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	Χ					
	If "Yes," attach a conformed copy of the changes.							
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X				
	o If "Yes," has it filed a tax return on Form 990-T for this year?							
	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement							
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common							
	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X				
þ	If "Yes," enter the name of the organization ▶							
	and check whether it is exempt or nonexempt.							
	Enter direct and indirect political expenditures. See line 81 instructions		ر از	alay ma				
	Did the organization file Form 1120-POL for this year?	81b		X				
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge							
	or at substantially less than fair rental value?	82a	X					
b	If "Yes," you may indicate the value of these items here. Do not include this amount							
	as revenue in Part I or as an expense in Part II. (See instructions in Part III.) . 82b 17,846			Edwinin.				
	Did the organization comply with the public inspection requirements for returns and exemption applications? .	83a	X	ļ				
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	 				
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	5.5	X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	Alaman Paman		2200				
	or gifts were not tax deductible?	84b	N/A	 				
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a						
D	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		1 1				
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the							
_	organization received a waiver for proxy tax owed for the prior year. Dues, assessments, and similar amounts from members			4.49 (i) 4.45 (i)				
	Section 162(e) lobbying and political expenditures			1 4 th 1 t				
		,	44					
q	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85g		، الملت ا				
-	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to	009	-	 				
•••	its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the							
	following tax year?	85h						
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12.		27 17	11,000				
	Gross receipts, included on line 12, for public use of club facilities 86b			33.				
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders							
b	Gross income from other sources. (Do not net amounts due or paid to other			1. 5				
	sources against amounts due or received from them.)							
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or							
	partnership, or an entity disregarded as separate from the organization under Regulations sections							
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	1	 				
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:		1					
	300tion 4011	2		سأستأسه ا				
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction							
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach							
	a statement explaining each transaction	89b	1	<u> X</u>				
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			^				
	sections 4912, 4955, and 4958			0				
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0				
90 a	List the states with which a copy of this return is filed ► CA							
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)			11				
91	The books are in care of ► Name Aaron Hurst Telephone no. ► 415/359	-0226						
-,	Located at ► 466 Geary Street, Suite 300 City San Francisco ST CA ZIP + 4 ► 94102							
02	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here							
92	Section 4547 (a)(1) nonexempt chantaine trusts ming rount 350 in fed of Form 1041—Check field			. –				
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92							

Part V	Analysis of Income-Producing Ac	tivities (See p	age 33 of	the ins	tructions.)		
Note: I	Enter gross amounts unless otherwise	Unrelated b				on 512, 513, or 514	(E)
indicate	-	(A)		(B)	(C)	(D)	Related or
93	Program service revenue:	Business code		nount	Exclusion code	Amount	exempt function
	Program service revenue	240000 0000	<u></u>		Exolabion dodd		income
b						 	25,000
						 	
c d							
							
e	Medicare/Medicaid payments					 	
	· ·	<u> </u>				-	<u> </u>
	Fees and contracts from government agencies .				 	 	
94	Membership dues and assessments			/			
95	Interest on savings and temporary cash investments .				14	253	
96	Dividends and interest from securities		1				
97	Net rental income or (loss) from real estate:		adio I'm cae in				
	debt-financed property					-	
	not debt-financed property						
98	Net rental income or (loss) from personal property				ļ		
99	Other investment income					<u> </u>	
100	Gain or (loss) from sales of assets other than inventory						
101	Net income or (loss) from special events				01	16,313	
102	Gross profit or (loss) from sales of inventory				ļ. 		
103	Other revenue: a				 		
b					ļ		
C						<u> </u>	
d					ļ		
е							
104	Subtotal (add columns (B), (D), and (E))						
105	Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal the a					>	41,566
Line N	No. Explain how each activity for which income i of the organization's exempt purposes (othe					ly to the accomplisi	hment
Part I				garded	Entities (See p	page 34 of the i	
	(A) Name, address, and EIN of corporation, partnership, or disregarded entity	Percent ownership	age of interest	Natu	(C) re of activities	(D) Total income	(E) End-of-year assets
			%			(
			%				
			%			9	
			%				<u> </u>
Part >	Information Regarding Transfers id the organization, during the year, receive any funds, directly the state of the state o						Yes X No
	id the organization, during the year, pay premi If "Yes" to (b), file Form 8870 and Form 472			on a per	sonal benefit co	ntract?	Yes X No
Pleas Sign	Under penalties of perjury, I declare that I have examinand belief, it is true correct, and complete. Declaration Signature of officer	ned this return, includ n of preparer (other t	ding accompa	nying sche based on a	dules and statements all information of whice Da	th preparer has any kr 5 /20 /0 6	y knowledge iowledge.
Here	AARON HURST, P Type or print name and title.	PESIDENT	***				
Paid	Preparer's signature Alona Cul —		Date 5/18/	106	Check if self- employed ► X	Preparer's SSN or PTI	N (See Gen. Inst. W)
Prepare	Time tiding (or journ & Tionno Conon Cion				EIN	► 68-028800 ₀	4
Use On	if self-employed), address, and ZIP + 4		CA 9490	1	Phone	no.► 415/457-87	70
	1 address, and En . 4 1710 Enrount/World	-,	2	`			Form 990 (2004)

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),

501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

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

2004

91-2162645

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Tapfound, Inc. dba Taproot Foundation

Employer identification number

Part I			est Paid Employees			ustees
(a) Nam	(See page 1 of the e and address of each emp		ist each one. If there a (b) Title and average hours		(d) Contributions to	(e) Expense
(a) Ivaiii	than \$50,000	loyee paid more	per week devoted to position	(c) Compensation	employee benefit plans & deferred compensation	account and other allowances
	es Shepard					•
	Geary Street, Suite 3					
-	Francisco	ST CA	Title Natl Program Dir			_
Zip 9410			Avg hr/wk 40	63,750	0	0
Name Matt	•					
	Geary Street, Suite 3		Titl Managing Dis			
Zip 9410	Francisco	ST CA	Title Managing Dir	60.044	o	900
	02 Country		Avg hr/wk 40	60,241		900
Name Str					1	
City		ST	Title			
Zip	Country	31	Avg hr/wk			
Name	Country		Avg III/wk			
Str						
City		ST	Title			
Zip	Country	,	Avg hr/wk			
Name	00011111		, rvg mvk			
Str					ļ	
City		ST	Title		Ì	
Zip	Country		Avg hr/wk			
Total number	er of other employees pa	aid over				
\$50,000 .	<u> </u>					
Part II		_	nest Paid Independer			
			ist each one (whether			(c) Compensation
	Name and address of each	i independent contracti	or paid more than \$50,000	(6) 19	pe of service	(c) compensation
Name NO	NE		Check here if a business	s		
Str						
City						
ST	ZIP	Count		1		
Name			Check here if a business	s <u> </u>		
Str						
City ST ·	ZIP	Count	n/			
Name	ZII	Count	Check here if a busines	el		
Str			Check here if a busines	•		
City						
ST	ZiP	Count	rv.			ļ
Name	<u> </u>	Count	Check here if a busines	s	. , , ,	
Str				~		
City						
ST	ZIP	Count	ry			
Name			Check here if a busines	s		
Str						
City						
SŤ	ZIP	Count	ry			I
	er of others receiving ov	er \$50,000 for		30 30 00 00	the traffic part of the first to	
nrofoncione	al services	•		0		

01	24	62	645
91	-2	צמו	040

Page 2

Pari	Ш	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	atter or in	ng the year, has the organization attempted to influence national, state, or local legislation, including any mpt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid iccurred in connection with the lobbying activities * 0 (Must equal amounts on line 38, VI-A, or line i of Part VI-B.)	1		х
	orga	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other inizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of lobbying activities.			
2	subs with own	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority er, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the sactions.)			
а	Sale	e, exchange, or leasing of property?	2a	and allowed	Χ
b		ding of money or other extension of credit?	2b		X
С		nishing of goods, services, or facilities?	2c		Х
d		ment of compensation (or payment or reimbursement of expenses if more than \$1,000)? see Part V, Form 990	2d	Х	
е 3 а		nsfer of any part of its income or assets?	2e		Х
Ja		determine that recipients qualify to receive payments.)	3a		χ.
b		you have a section 403(b) annuity plan for your employees?	3b	Х	 ^
4 a		you maintain any separate account for participating donors where donors have the right to provide advice			
		he use or distribution of funds?	4a	X	<u> </u>
<u>b</u>	Do y	you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	<u> </u>	X
Par	IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The c	rgani	zation is not a private foundation because it is: (Please check only ONE applicable box.)			
5	\sqcup	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)			
11 a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
11 b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12		An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)			_
	-	Provide the following information about the supported organizations. (See page 5 of the instructions.)			_
	-	(a) Name(s) of supported organization(s) (b) Line number of from a			_
	-				
14	П	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)			-

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

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

Caler	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d)N/A	(e) Total
15	Gifts, grants, and contributions received. (Do	(4) 2007	10/2003	10/202	(4/14/24	(e) Total
	not include unusual grants. See line 28.)	524,086	27,306	79,596		630,988
16	Membership fees received	024,000	27,000	10,000		030,900
17	Gross receipts from admissions, merchandise					
	sold or services performed, or furnishing of					I
	facilities in any activity that is related to the					
	organization's charitable, etc., purpose	29,212	17,317	779		47,308
18	Gross income from interest, dividends,	20,212	17,017	773		77,500
	amounts received from payments on securities					
	loans (section 512(a)(5)), rents, royalties, and					į
	unrelated business taxable income (less					
	section 511 taxes) from businesses acquired					
	by the organization after June 30, 1975	940	131	32		1,103
19	Net income from unrelated business	340	101	52		1,100
	activities not included in line 18		,			0
20	Tax revenues levied for the organization's					
	benefit and either paid to it or expended on					
	its behalf					o
21	The value of services or facilities furnished to					
	the organization by a governmental unit			•		
	without charge. Do not include the value of					
	services or facilities generally furnished to the					
	public without charge					o
22	Other income. Attach a schedule. Do not	-				
	include gain or (loss) from sale of capital assets					l o
23	Total of lines 15 through 22	554,238	44,754	80,407	0	
24	Line 23 minus line 17	525,026				
25	Enter 1% of line 23	5,542				
26	Organizations described on lines 10 or 11: a Enter 2% o	<u> </u>			> 26a	12,642
	,		• • •		204	12,042
D	Prepare a list for your records to show the name of and amount governmental unit or publicly supported organization) whose total				a and gray to	的复数形式
	amount shown in line 26a. Do not file this list with your return				Comment ()	233,867
_	Total support for section 509(a)(1) test: Enter line 24, column (e)					632,091
	Add: Amounts from column (e) for lines: 18	1,103 19		0	200	032,091
•	22	1,105 19 0 26t		<u></u>	▶ 26d	234,970
	Public support (line 26c minus line 26d total)					397,121
	Public support percentage (line 26e (numerator) divided by				≥ 26f	62.83%
27	Organizations described on line 12: a For amounts incl					
21	prepare a list for your records to show the name of, and total arr					
	file this list with your return. Enter the sum of such amounts f		cach year nom, e	acii disquamicu	person. Do no t	
		•	01)		(2000)	
_	, , , , , , , , , , , , , , , , , , , ,					. 1 . 4
D	For any amount included in line 17 that was received from each show the name of, and amount received for each year, that was					
	(Include in the list organizations described in lines 5 through 11,					
	difference between the amount received and the larger amount					
	amounts) for each year:		(-),			
	(2003) (2002)	(20	001)		(2000)	
	((2000)	
С	Add: Amounts from column (e) for lines: 15	0 16	0			
	17 0 20	0 21	0	<u>.</u>	► 27c	c
d		e 27b total	0	- !	> 27d	С
е					. > 27e	C
f	Total support for section 509(a)(2) test: Enter amount from line				0	Si Maria V. Lora
g	—				. > 27g	0.00%
h	Investment income percentage (line 18, column (e) (numera	ator) divided by li	ne 27f (denomin	ator))	Þ 27h	0.00%
28	Unusual Grants: For an organization described in line 10, 11, or	or 12 that received	any unusual gran	its during 2000 th	rough 2003, pred	are
	a list for your records to show, for each year, the name of the co					

the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part	Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/4	١	<u> </u>
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?			
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?			
c d	dealing with student admissions, programs, and scholarships?		 	
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:	10 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
a b	Students' rights or privileges?			
С	Employment of faculty or administrative staff?	330		
d	Scholarships or other financial assistance?			
e f	Use of facilities?			
g	Athletic programs?	<u>33c</u>	ļ	-
h		33 h	1 (500 A)	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	<u>34</u> 2	ļ	
b	Has the organization's right to such aid ever been revoked or suspended?	34t	1 . 44 44	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation			· ·

	Tapfound, Inc. db	oa Taproot Found	dation	91-2	162645		Page 5
Part	VI-A Lobbying Expenditures by Electing F				ctions.)		
Check	(To be completed ONLY by an eligible of				mited control" pi	rovicio	
Спеск	▶a ☐ if the organization belongs to an affiliated group	. Check >	b if you che	cked "a" and "li	mitea control pi	rovisions a	
	Limits on Lobbying E	•	red)		(a) Affiliated group totals	for Al	(b) completed L electing inizations
36	Total lobbying expenditures to influence public opinion (gras			36		- J. Grac	THEOLOTIS
37	Total lobbying expenditures to influence a legislative body (
38	Total lobbying expenditures (add lines 36 and 37)	• •				0	0
39	Other exempt purpose expenditures						***************************************
40	Total exempt purpose expenditures (add lines 38 and 39)					0	0
41	Lobbying nontaxable amount. Enter the amount from the fo	llowing table—					***
	If the amount on line 40 is— The lobbyir	ng nontaxable am	ount is—				
	Not over \$500,000	amount on line 40					
	Over \$500,000 but not over \$1,000,000 \$100,000 pt			,	an Albert Anna Graeg (1877) San Albert San San ann an 1889 (1887)	are j man and artists	
	Over \$1,000,000 but not over \$1,500,000 \$175,000 pl					0	0
	Over \$1,500,000 but not over \$17,000,000 . \$225,000 pl)	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Over \$17,000,000			J Carlon			
	Grassroots nontaxable amount (enter 25% of line 41)					0	0
43	Subtract line 42 from line 36. Enter -0- if line 42 is more that					0	0
44	Subtract line 41 from line 38. Enter -0- if line 41 is more that	in line 38		<u>44</u>		UI Principal Cost	O
	Caution: If there is an amount on either line 43 or line 44, y	vou must file Form	4720				
	4-Year Averag			01/h)		<u> </u>	1.118
	(Some organizations that made a section 50	•			eelumne heleur		
	See the instructions for lin	• •	•		coluitins below.		
	Occ die matroctona for th						
		Lobby	ing Expenditu	res During 4-	Year Averagir	ng Perio	d
	Calendar year (or	(a)	(b)	(c)	(d)		(e)
	fiscal year beginning in)	2004	2003	2002	2001		Total
45	Lobbying nontaxable amount						
						- ;	
46	Lobbying ceiling amount (150% of line 45(e))	इ. १,न्यु ए हेर्न वर्ग हो है			m una haritaria.	dr _e	
47	Total lobbying expenditures						(
48	Grassroots nontaxable amount						(
	Grassioots nontaxable amount	4.5 2.5 24	* (111. 114. 114.	11 14 14 4 14 16 12		
49	Grassroots ceiling amount (150% of line 48(e))					3.5	(
50	Grassroots lobbying expenditures						(
Par	VI-B Lobbying Activity by Nonelecting Pu	ublic Charities					
	(For reporting only by organizations that	at did not compl	ete Part VI-A)	(See page 1	1 of the instru	uctions.)	
Durin	g the year, did the organization attempt to influence nationa	l state or local legi	slation including	anv			
	pt to influence public opinion on a legislative matter or refer	-		any	Yes N	10 A	Amount
а	Volunteers					X	
b	Paid staff or management (Include compensation in expen				·	$\overline{\mathbf{x}}$	
C	Media advertisements	*	= :			X	- and correctly before a same
ď	Mailings to members, legislators, or the public				1 1	X	
e	Publications, or published or broadcast statements					Х	
f	Grants to other organizations for lobbying purposes					Х	
g	Direct contact with legislators, their staffs, government offi				1	X	
h	Rallies, demonstrations, seminars, conventions, speeches				1 1	X	
i	Total lobbying expenditures (Add lines c through h.)					<u>: </u>	
•	If "Yes" to any of the above, also attach a statement giving				<u> </u>		

Part	VII	Information Reg Exempt Organiz	parding Transf cations (See p	fers To and Transactions age 11 of the instructions.)	and Relationships With Noncharita	ble		
51	501(c) of the Code (other the	an section 501(c)(3) organizations) or in section 527	g with any other organization described in section, relating to political organizations?	on		
а	Trans	fers from the reporting	organization to a	noncharitable exempt organizatio	n of:		Yes	No
	(i)	Cash				51a(i)		Х
	(ii)	Other assets				a(ii)		X
b	Other	transactions:						
	(i)	Sales or exchanges of	f assets with a nor	ncharitable exempt organization		b(i)		Х
						b(ii)		Х
						b(iii)		Х
	(iv)					b(iv)		Х
	(v)					b(v)		Х
						b(vi)		Х
С						С		Х
d	of the in any	goods, other assets, or transaction or sharing	or services given b	by the reporting organization. If the ow in column (d) the value of the	umn (b) should always show the fair market va e organization received less than fair market va goods, other assets, or services received:			
	(a) e no.	(b) Amount involved	Name of nonc	(c) charitable exempt organization	(d) Description of transfers, transactions, and sha	ring arrang	emente	
					2 description of transfers, transactions, and one	g Girang	Simonio	
						<u> </u>		
								
	 							_
	·	<u> </u>		·				
						•		
	descr		of the Code (other		ion 527?	Yes	X	No
		Name of organization	1	(b) Type of organization	(c) Description of relationship			
			. —					

							<u></u>	
			· · · · · · · · · · · · · · · · · · ·					
		····						

Tapfound Inc. dba Taproot Foundation Notes to Form 990 and Schedule A Tax ID #91-2162645 For nine months ended September 30, 2005

Form 990, Part I, Line 9: Special Events

The organization hosted a wine tasting event in San Francisco. Tickets were sold and the proceeds were used to benefit the organization's tax exempt purpose.

Form 990, Part I, Line 42: Depreciation Form 990, Part IV, Line 57: Property & Equipment

Property and equipment, consisting of office and computer equipment, are stated at cost. Depreciation is computed using the straight-line method over the estimated useful lives of the assets, which range from three to five years.

Form 990, Part V: Board of Directors

The following directors can be reached in care of: Taproot Foundation 466 Geary Street, Suite 300 San Francisco, CA 94102

Caroline Barlerin, Chair
Joe Fay, Vice Chair
Kerry Bessey
Patrick DiChiro
Antoinette LaBelle
Elaine Mason
Paul Wiefels

Ryan Kluft, Treasurer
Aaron Hurst, President
Jill Blair
Tom Eddington
Stefan Linn
Dick Matgen



1116 Lincoln Avenue San Rafael, CA 94901 415/457-8770 Fax 415/457-8771

TapFound Inc. dba Taproot Foundation

Financial Statements &
Independent Auditor's Report
for the nine-month period ended
September 30, 2005



1116 Lincoln Avenue San Rafael, CA 94901 415/457-8770 Fax 415/457-8771

Independent Auditor's Report

To the Board of Directors TapFound Inc. dba Taproot Foundation San Francisco, California

I have audited the accompanying statement of financial position of TapFound Inc., dba Taproot Foundation, as of September 30, 2005 and the related statements of activity, changes in net assets, functional expenses, and cash flows for the nine-month period then ended. These financial statements are the responsibility of TapFound's management. My responsibility is to express an opinion on these financial statements based on my audit.

I conducted my audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that I plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. I believe that my audit provides a reasonable basis for my opinion.

In my opinion, the financial statements referred to above present fairly, in all material respects, the financial position of TapFound Inc. as of September 30, 2005, and the result of its operations for the 9-month period then ended in conformity with accounting principles generally accepted in the United States of America.

January 27, 2006

Certified Public Accountant

Statement of Financial Position September 30, 2005

ASSETS	Unrestricted	Temporarily <u>Restricted</u>	<u>Total</u>
Current Assets:			
Cash & equivalents	\$175,986	\$225,500	\$401,486
Grants receivable, current portion (Note 3)	95,000	217,000	312,000
Donations receivable	2,299		2,299
Other receivables	983		983
Prepaid expenses	<u>8,183</u>		<u>8,183</u>
Total current assets	282,451	442,500	724,951
Grants receivable, less discount to present value (Note 3)		191,156	191,156
Deposits	5,700		5,700
Property & equipment, net of accumulated depreciation of \$830	9,269		<u>9,269</u>
TOTAL ASSETS	<u>\$297,420</u>	<u>\$633,656</u>	<u>\$931,076</u>
LIABILITIES & NET ASSETS			
Current Liabilities:			
Accounts payable	\$29,284		\$29,284
Accrued payroll liabilities	27,065		27,065
Accrued vacation pay	8,637		8,637
Deferred contract revenue	<u>73,290</u>		<u>73,290</u>
TOTAL LIABILITIES	138,276	0	138,276
NET ASSETS			
Unrestricted	159,144		159,144
Temporarily Restricted (Note 4)		<u>633,656</u>	633,656
TOTAL NET ASSETS	159,144	633,656	792,800
TOTAL LIABILITIES & NET ASSETS	<u>\$297,420</u>	<u>\$633,656</u>	<u>\$931,076</u>

Statement of Activity and Changes in Net Assets for the 9-month period ended September 30, 2005

	Temporarily		
	<u>Unrestricted</u>	Restricted	<u>Total</u>
Support & Revenue:			
Grants	\$15,000	\$942,156	\$957,156
Net assets released from restrictions:			
Satisfaction of donor requirements (Note 5)	540,500	(540,500)	0
Contributions	51,933		51,933
In-kind contributions	17,846		17,846
Special events income, less direct donor benefits of \$13,317	16,313		16,313
Contract fees	25,000		25,000
Interest	<u>253</u>		<u>253</u>
Total support & revenue	666,845	401,656	1,068,501
Expenses:			
Programs	378,102		378,102
Administration	113,483		113,483
Fundraising	<u>117,425</u>		117,425
Total expenses	609,010	0	609,010
			
CHANGE IN NET ASSETS	57,835	401,656	459,491
NET ASSETS, January 1st	101,309	232,000	333,309
		 .	
NET ASSETS, September 30th	<u>\$159,144</u>	<u>\$633,656</u>	<u>\$792,800</u>

Statement of Functional Expenses For the 9-Month Period Ended September 30, 2005

	Programs	Administration	Fundraising	Total
Salaries	\$286,156	\$49,766	\$78,797	\$414,719
Payroll taxes & benefits	47,007	8,084	12,798	67,889
Temporary help				0
Occupancy	17,264	3,002	4,753	25,019
Special events				0
Accounting & auditing		12,819		12,819
Travel		27,849		27,849
Telephone & internet	7,204	1,253	1,984	10,441
Office supplies	3,965		1,092	5,747
Professional fees	694		10,000	10,694
Conferences & meetings	5,819	1,615	641	8,075
Printing & copying	1,609	280	443	2,332
Bank fees	,			0
Insurance		2,253		2,253
Professional development				0
Staff recruitment		2,148		2,148
Postage	816		225	1,183
Payroll fees		2,081		2,081
Fundraising		,	4,608	4,608
Equipment	6,340	1,103	1,746	9,189
Depreciation	573		158	831
Other	655	298	180	1,133
Total Expenses	\$378,102	\$113,483	\$117,425	\$609,010

Statement of Cash Flows for the 9-month period ended September 30, 2005

Cash flows	from	operating	activities:
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Change in net assets	\$459,491
Adjustments to reconcile revenue over (under) expenses to net cash from operating activities:	
Depreciation	830
Changes in assets & liabilities:	
(Increase) decrease in grants receivable	(402 156)
(Increase) decrease in donations & other receivables	(403,156) 3,313
(Increase) decrease in prepaid expenses	
(Increase) decrease in deposits	(6,475)
Increase (decrease) in accounts payable	(4,143) 16,652
Increase (decrease) in accrued payroll liabilities	27,065
Increase (decrease) in accrued vacation pay	4,259
Increase (decrease) in deferred contract revenue	73,290
Cash provided (used) by operating activities:	171,126
Cash flows from investing activities:	
Purchase of office equipment	(10,099)
Cash provided (used) by investing activities:	(10,099)
Cash provided (used) during year	161,027
Cash & equivalents, January 1st	<u>240,459</u>
Cash & equivalents, December 31st	<u>\$401,486</u>

Notes to Financial Statements September 30, 2005

1. The Foundation

Nature of activities

TapFound Inc., dba Taproot Foundation, (the Foundation) was founded in 2002. Its mission is to strengthen nonprofit Foundations by engaging business professionals in volunteer service. Nonprofit Foundations in need of professional services (marketing/fundraising, information technology, and human resources) apply for a service grant from the Foundation. The Foundation then facilitates the placement of volunteer professionals to accomplish the specific goals of the nonprofit Foundation, monitors progress on the project, and assures its completion. The Foundation currently operates in San Francisco and New York City.

The Foundation is a nonprofit Foundation, exempt from income taxes under IRS Code Section 501(c) (3), and section 23701(d) of the California Revenue and Taxation Code. The Foundation is governed by a 13-member Board of Directors.

Funding

The Foundation receives the majority of its funding through corporate and foundation grants and contributions. Support is also received through contributions from individuals and special events.

Change in Accounting Period

The Foundation has elected to change its accounting period from a calendar year to a fiscal year ending September 30th. As such, these financial statements are for the interim short period: the 9-month period ending September 30, 2005. The first full fiscal year will be from October 1, 2005 to September 30, 2006.

2. Summary of Significant Accounting Policies

Basis of Presentation

Net assets, revenues, expenses, gains, and losses are classified based upon the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Foundation and changes therein are classified and reported as follows:

Unrestricted net assets, which includes resources not subject to donor-imposed restrictions.

Temporarily restricted net assets, which includes resources subject to donor-imposed stipulations that may or will be met either by actions of the Foundation and/or the passage of time.

Accounting for Restricted Support

The Foundation reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

(continued)

Notes to Financial Statements September 30, 2005

(continued)

The Foundation reports gifts of fixed assets as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those assets must be maintained, the Foundation reports expirations of donor restrictions when the donated or acquired assets are placed in service.

Cash and Cash Equivalents

Cash and cash equivalents consist of a bank checking account.

Donations Receivable

Donations receivable consist of donations received through the internet, whereby the cash has not yet been transferred to the Foundation.

Fair Value of Financial Instruments

The carrying amounts of cash and cash equivalents, receivables, and accounts payable approximate fair value because of the short maturity of these instruments.

Property & Equipment

The Organization capitalizes all expenditures for property and equipment in excess of \$1000. Purchased property and equipment are carried at cost. Donated property and equipment are carried at the approximate fair value at the date of donation. Depreciation is computed using the straight-line method over an estimated useful life of three years.

Functional Expenses

The Foundation allocates its expenses on a functional basis among its program and support services. Expenses that can be identified with a specific activity or support service are allocated directly. Expenses that are common to several functions are allocated according to a formula based on the relative amount of staff time spent on the particular function.

In-kind Contributions

In-kind contributions consist of office space and services received for the New York City program. It is recorded based on the respective fair market value that the Foundation would expect to pay for such space and support services.

Professional volunteer services which are facilitated by Taproot Foundation, but received by other nonprofit organizations, are not recorded on the books because they are considered to be agency transactions.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Notes to Financial Statements September 30, 2005

3. Grants Receivable.

	Temporarily		
	Unrestricted	Restricted	<u>Total</u>
Current portion	\$95,000	\$217,000	\$312,000
Due in one to three years		198,000	198,000
Less discount to present value (4%)		(6,844)	(6,844)
Grants receivable, net	\$95,000	\$408,156	\$503,156

4. Temporarily Restricted Net Assets

Temporarily restricted net assets at September 30, 2005 consist of awards received for the following:

Launch & support of the New York City office	\$262,500
Capacity building	18,000
Service grants to nonprofit organizations	162,000
Operating support - 10/05 to 7/08	<u>191,156</u>
	\$633,656

5. Net Assets Released From Restriction

During 2005, donor requirements were satisfied and the corresponding restrictions released for the following:

Service grants to nonprofit organizations	\$370,000
Launch of the New York City office	67,500
Capacity building	35,000
Operating support for 2005	<u>68,000</u>
•	\$540,500

6. Operating Leases

The Foundation amended its lease for office space on Geary Street in San Francisco, expanding into a second office. Premises are leased for three years until October 31, 2008. Monthly rent is \$4,267, with annual increases based on the consumer price index. The lease contains two one-year options to renew. Future minimum lease payments are as follows:

Year Ending	
September 30, 2006	\$56,187
September 30, 2007	\$26,830
September 30, 2008	\$24,120
September 30, 2009	\$2,010

7. Related Party Transactions

The President of the Foundation is compensated for his services as Executive Director.

Notes to Financial Statements September 30, 2005

8. Concentrations

As of September 30, 2005, the Foundation had \$407,000 on deposit with one bank, exceeding the Federal Deposit Insurance Corporation (FDIC) limit by \$307,000.

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