DLN: 93493319046353

Form **990**

Department of the Treasury Internal Revenue Service

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)

2012

OMB No 1545-0047

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

Open to Public Inspection

Nam Initia Tern Ame	ress change ne change lal return minated ended return lication pendir	THE LONG NOW FOUNDATION Doing Business As					entification number
Initia Term Ame	nal return minated ended return				68	-038474	18
Term Ame	minated ended return						
Ame Appl	ended return	Number and street (or P O box if m 2 MARINA BLVD BLDG A	all is not delivered to street address) Ro	om/suite	E Tele	ephone nui	mber
Appl					(41	15)561-	6582
	lication pendir	City or town, state or country, and Z SAN FRANCISCO, CA 94123	IP + 4		,	<u> </u>	
T Tax					G Gro	ss receipts	\$ \$ 4,451,775
		F Name and address of prin	cıpal officer	H(a	Is this a gro affiliates?	oup retur	n for
T Tax		2 MARINA BLVD BLDG A	12		aiiiiates		j 165 j* 110
T Tax		SAN FRANCISCO, CA 9412	2.3	H(E			uded? Yes No
_	c-exempt state	ıs	nsert no) 4947(a)(1) or 527		If "No," atta	ach a list	(see instructions)
J We	ebsite: 🕨 V	/WW LONGNOW ORG		H(c	Group exer	nption ni	umber ►
K Form	n of organizati	on 🔽 Corporation 🗆 Trust 🗀 Association	Other 🕨		Year of formation	1996 I	M State of legal domicile CA
Par		mmary					
		describe the organization's missio					
.	The Lo	ng Now Foundation endeavors to fo	oster long term thinking				
Governance							
<u> </u>							
፮	2 Check	this box 🔭 if the organization dis	continued its operations or dispo	sed of mor	e than 25% of	ıts net a	ssets
	3 Numbe	r of voting members of the governi	ng hody (Part VI June 1a)			3	16
Activities &		er of independent voting members o				4	16
		umber of individuals employed in c		-		5	16
[]		umber of volunteers (estimate if n				6	
۹		inrelated business revenue from Pa				7a	0
	b Net un	related business taxable income fr	om Form 990-T, line 34			7b	
					Prior Year		Current Year
	8 Con	ributions and grants (Part VIII, lir	ne 1 h)		43	9,906	2,048,400
	9 Prog	ram service revenue (Part VIII, lii	ne 2g)		8.3	88,682	812,854
Revenu	10 Inve	stment income (Part VIII, column	(A), lines 3, 4, and 7d)		17	4,130	508,641
_		er revenue (Part VIII, column (A),				7,366	34,345
		I revenue—add lines 8 through 11), line	1,46	0,084	3,404,240
		its and similar amounts paid (Part				5,000	4,000
	14 Ben	efits paid to or for members (Part I	X, column (A), line 4)	🗀			0
.	15 Sala	ries, other compensation, employe	e benefits (Part IX, column (A), lı	nes			
Expenses	5-1	•		<u> </u>	53	55,208	578,860
<u>₹</u>		essional fundraising fees (Part IX,		· · ⊢			0
<u>ज</u>		fundraising expenses (Part IX, column (D)		— <u> </u>	1.0=	77.200	000.106
		er expenses (Part IX, column (A), l l expenses Add lines 13–17 (mus				7,209	890,196 1,473,056
		enue less expenses Subtract line				7,333	1,931,184
		The reas expenses outstant into			eginning of Cu		End of Year
<u>ኞኞ</u>	i	Laccate (Bart V. Irac 15)		<u> </u>	Year	0 004	
sets or sances	20	l assets (Part X, line 16) l liabilities (Part X, line 26)			5,36	8,267	7,299,527 6,806
Assets or 3 Balances		THADDINES RAIL A HUB /Dl		1		0.7071	0,000
鱼舞士	21 Tota	assets or fund balances Subtract	ine 21 from line 20		5.36	1,537	7,292,721

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes 厂No

4,000) (Revenue \$

4d

(Expenses \$

Other program services (Describe in Schedule O)

Total program service expenses ►

71,242 including grants of \$

932,252

1,551,706)

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)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1^7 If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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		No
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 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		No
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		1	1
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . $$	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

Pal	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1 '		
	gaming (gambling) winnings to prize winners?	1c		Νo
	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	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	•		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
		30		
C	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 the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Νo
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
а	If "Yes," indicate the number of Forms 8282 filed during the year 7d 0			INO
u	Ti res, indicate the number of forms 5252 med during the year.			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		Νo
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Νo
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νo
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
l1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.] '		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
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			
c	Enter the amount of reserves on hand]		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	İ	No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Rody and Management

	action 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			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		 No
6	Did the organization have members or stockholders?	6		No
	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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		N o
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	<i>y</i> es	e.) No
				No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►CA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►LOGAN ASSOCIATES 1918 43RD AVENUE SAN FRANCISCO, CA (415) 592-8151

<u>Part III</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h ar or/tr	check , unle n office rustee Highest o	ss er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		il trustiee or	ทอl Trustee		loyee	Highest compensated employee				
(1) PING FU	2 00	x						0	0	0
Director	0 00							Ŭ	Ŭ	
(2) DAVID EAGLEMAN	2 00	×						0	0	0
Director	0 00	L^_			L	<u> </u>				
(3) KIM POLESE	2 00	.,								
Director	0 00	Х						0	0	0
(4) PETER SCHWARTZ	2 00									
Director	0 00	Х						0	0	0
(5) PAUL SAFFO	2 00									
		х						0	0	0
Director (6) DAVID RUMSEY	0 00									
	2 00	x		х				0	0	0
Treasurer (7) KENTON KENTON	0 00									
(7) KEVIN KELLY	2 00	×		х				0	0	0
Secretary	0 00									
(8) MICHAEL KELLER	2 00	×						0	0	0
Director	0 00	L^			L	L				
(9) BRIAN ENO	2 00	ν,								
Director	0 00	Х						0	0	0
(10) ESTHER DYSON	2 00									
Director	0 00	X						0	0	0
(11) DOUGLAS CARLSON	2 00									
Director	0 00	х						0	0	0
(12) STEWART BRAND	10 00									
, ,		х		Х				0	0	0
PRESIDENT/CO-CH (13) DANNY HILLIS	0 00					-				
		х		х				0	0	0
CO-CHAIR (14) ALEXANDER ROSE	0 00									
, ,	40 00			х				132,769	0	3,922
Executive Dir	0 00									
	l	<u> </u>			_					Form 990 (2012)

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

		1	_								ı			1
	(A) Name and Title	(B) Average	Posi more t	tion (heck		Repor	table	(E) Reportable		(F) Estima imount o	ited
		hours per week (list	perso	n is	both	and	officer	,	comper from	the	compensation from related		compens	ation
		any hours for related					stee) ロエ	П	organiza 2/1099		organizations (W 2/1099-MISC)		from t rganızatı	on and
		organizations below	Individual trustee or director	Institutional Truste	Office	Xe y e	Highest compensat employee	Former					relate organiza	
		dotted line)	2 2 2 2 3	JE OFF		employee	>ee 2† CO	¥						
			trust	의 [편		99	n pe							
			&:	18166			ीड इ.स.							
				ļ .			ě							
1b	Sub-Total			٠.	<u>. </u>			-						
c	Total from continuation shee	ts to Part VII, S	ection A	۹.				Þ						
d	Total (add lines 1b and 1c) .							•		132,769				3,922
2	Total number of individuals (ir \$100,000 of reportable comp						d abov	e) wl	ho receive	d more th	an			
													Yes	No
3	Did the organization list any f on line 1a? <i>If</i> "Yes," complete 5							yee,	or highes	t compen	sated employee	3		N.o.
4	For any individual listed on lin							n and	d other cor	mpensati	on from the	3		No_
	organization and related organ	nizations greater	than \$	150,0 • •	000	? If	"Yes," (comp •	lete Schedi	ule J for s	uch	4		No
5	Did any person listed on line 1										or individual for	-		110
	services rendered to the orga	nızatıon? <i>If "Yes</i>	," compl	lete S	ched	lule J	l for su	ch pe	erson .			5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your fi compensation from the organi												tax year	
		(A) Name and business									(B) cription of services		(C Comper)
BRIAN	N ROE , FORT MASON CENTER BLDG									ENGINEER	emption of activices		compet	123,103
												-		

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 1-1

		Check if Schedule O contains a response	mse to any question i	(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
					exempt function revenue	business revenue	excluded from tax under sections 512,513,or 514
	1a	Federated campaigns 1a	1				
	b	Membership dues 1	241,859				
rinutions, Gins, Grants Other Similar Amounts	c	Fundraising events 10					
ğΨ	d	Related organizations 10	 j				
5 ≝	e	Government grants (contributions)					
Siz		All other contributions, gifts, grants, and	 !				
19 H	f	similar amounts not included above					
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$	132,084				
and	h	Total. Add lines 1a-1f	🛌	2,048,400			
			Business Code				
ang	2a	Ticket Sales	900099	24,423	24,423		
ا <u>چ</u>	b	Texas Clock	900099	725,405	725,405		
93	C	Speaking Fees	900099	3,026	3,026		
er	d	Seminars	900099	60,000	60,000		
Program Serwice Revenue	e						
<u>s</u>	f	All other program service revenue					
<u> </u>	g	Total. Add lines 2a-2f		812,854			
	3	Investment income (including divide		218,795			218,795
	4	and other similar amounts) Income from investment of tax-exempt bond	-	0			
	5	Royalties	· · · · ·	0			
		(ı) Real	(II) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		0			
		(ı) Securities	(II) O ther				
	7a	Gross amount from sales of 1,330,335 assets other than inventory					
	b	Less cost or other basis and sales expenses 1,040,489					
	C	Gain or (loss) 289,846					
	d	Net gain or (loss)		289,846			289,846
eune	8a	Gross income from fundraising events (not including \$					
omer nevenue		of contributions reported on line 1c) See Part IV, line 18					
j	b	Less direct expenses b					
)	C O-	Net income or (loss) from fundraising	events 🛌	0			
	Уa	Gross income from gaming activities See Part IV, line 19	1				
	b	Less direct expenses b					
	c	Net income or (loss) from gaming act	ivities	0			
]	10a	Gross sales of inventory, less returns and allowances					
		a	14,173				
	b	Less cost of goods sold b	7,046				
	C	Net income or (loss) from sales of inv	_	7,127	7,127		
		Miscellaneous Revenue	Business Code	36.040	36 040		
	11a	Sponsored project	900099	26,949 269	26,949		
	b	O ther income	900099	269	269		
	C C	All other revenue					
	d e	Total. Add lines 11a-11d	🕨				
	12		. -	27,218			
[12	Total revenue. See Instructions .	· · · · •	3,404,240	847,199		508,641

	t IX Statement of Functional Expenses				
Secti	on 501(c)(3) and 501(c)(4) organizations must complete all columns A			olete column (A)	
	Check if Schedule O contains a response to any question in this F	art IX			<u></u>
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	4,000	4,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	136,691	123,022	13,669	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	350,854	33,273	317,581	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	12,066	141	11,925	
9	Other employee benefits	39,664	5,914	33,750	
10	Payroll taxes	39,585	13,079	26,506	
11	Fees for services (non-employees)				_
а	Management	0			
b	Legal	58,299	51,288	5,241	1,770
c	Accounting	4,886		4,886	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	274.704	260 505	2.026	2.250
	Schedule O)	374,791	, , , , , , , , , , , , , , , , , , ,	3,036	3,250
12	Advertising and promotion	30,497	29,430	1,067	
13	•	27,997	10,556	17,441	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	118,226	50,941	67,285	
17	Travel	73,041	65,354	7,562	125
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	1,572	1,572		
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	4,247		4,247	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Postage and Shipping	6,091	5,077	1,014	
b	Merchant Charges	12,589	10,529	2,060	
c	Overhead Fees	26,949	26,949		
d	Materials and Supplies	137,661	121,928	15,663	70
e	- · · · · · · · · · · · · · · · · · · ·	13,350		1,940	716
25	Total functional expenses. Add lines 1 through 24e	1,473,056	<u>'</u>	534,873	5,931
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here		- 32,232		-,

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	11,959	1	237,072
	2	Savings and temporary cash investments	533,272	2	843,432
	3	Pledges and grants receivable, net		3	0
	4	Accounts receivable, net	11,500	4	196,481
	5	Loans and other receivables from current and former officers, directors, trustees, ke employees, and highest compensated employees. Complete Part II of Schedule L	у	5	0
ers Sec	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employer and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	rs	6	0
gssets	7	Notes and loans receivable, net		7	0
₹	8	Inventories for sale or use		8	0
	9	Prepaid expenses and deferred charges		9	0
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 388,9	76		
	ь	Less accumulated depreciation 10b	295,800	10c	388,976
	11	Investments—publicly traded securities	4,504,271	11	5,633,566
	12	Investments—other securities See Part IV, line 11		12	0
	13	Investments—program-related See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11	13,002	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,369,804	16	7,299,527
	17	Accounts payable and accrued expenses	8,267	17	6,806
	18	Grants payable	,	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabi		persons Complete Part II of Schedule L		22	ı
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D		25	
	26	Total liabilities. Add lines 17 through 25	8,267	26	6,806
^ 		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
<u></u>	27	Unrestricted net assets	4,841,438	27	2,479,744
3 0	28	Temporarily restricted net assets	520,099	28	4,812,977
2	29	Permanently restricted net assets		29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds		30	
<u>}</u>	31	Paid-in or capital surplus, or land, building or equipment fund		31	
î	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	5,361,537	33	7,292,721
	34	Total liabilities and net assets/fund balances	5,369,804	34	7,299,527

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,4	104,240
2	Total expenses (must equal Part IX, column (A), line 25)	2			73,056
3	Revenue less expenses Subtract line 2 from line 1	3			31,184
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		7,2	292,721
Par	t XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits explain why in Schedule O and describe any steps taken to undergo such audits.	equired	3b		

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As Filed Data -

DLN: 93493319046353

Employer identification number

OMB No 1545-0047

SCHEDULE A

Name of the organization THE LONG NOW FOUNDATION

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

2012

Open to Public Inspection

		coction	500(2)(2)	on managers and on	ner than one	or more pub		ed organıza			n 509(a)(1) or
е	ı	other th				is not contr	onea directly	or inairect	iy by one or n	iore disdual	III AA DARCANC
	_	the box	that descri	ly supported organiz bes the type of supp b Type II c ox, I certify that the	orting organ Type II	ization and o I - Function	complete line ally integrate	s 11e throu d d	gh 11h Type III - No	on-functiona	ally integrated
10 11	Г Г	Anorga	anızatıon orç	ganized and operated ganized and operated	d exclusively	for the bene	efit of, to perf	orm the fun	ctions of, or t		
		•		oss investment inco janization after June				•		tax) from bu	ısınesses
				ities related to its ex	•	-			` '		
	•	=		·			- ·		· ·	-	-
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	•	=		·			- ·		· ·	-	-
9	ı	=		·			- ·		· ·	-	-
9	\sqcap	Anorga	anızatıon tha	at normally receives	(1) more th	an 331/3% o	fits support	from contril	outions, mem	bership fees	, and gross
									nutions mem	hershin fees	and aross
									outions mam	harchin faac	and groce
9	Г	An orga	anızatıon tha	at normally receives	(1) more th	an 331/3% o	fits support	from contril	outions, mem	bership fees	, and gross
9	Γ	An orga	anızatıon tha	at normally receives	(1) more th	an 331/3% o	fits support	from contril	outions, mem	bership fees	, and gross
9	Γ	An orga	anızatıon tha	at normally receives	(1) more th	an 331/3% o	fits support	from contril	outions, meml	bership fees	s, and gross
9	Γ	An orga	anızatıon tha	at normally receives	(1) more th	an 331/3% o	fits support	from contril	outions, mem	bership fees	, and gross
									outions mam	harchin faac	and gross
8				described in section							•
									outions mam	harchin faac	and groce
9	Г	An orga	anızatıon tha	at normally receives	(1) more th	an 331/3% o	fits support	from contril	outions, mem	bership fees	, and gross
9	Γ	An orga	anızatıon tha	at normally receives	(1) more th	an 331/3% o	fits support	from contril	outions, mem	bership fees	, and gross
9		Anorga	anızatıon tha	at normally receives	(1) more th	an 331/3% o	fits support	from contril	outions, mem	bership fees	s, and gross
9	ı	=		·			- ·		· ·	-	-
		receipt	s from activ	ities related to its ex	kempt function	ons—subjec	t to certain e	xceptions, a	and (2) no mo	re than 331	/3% of
					•	-			` '		
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from bu	ısınesses
		•						•		,	
		acquire	ed by the ord	ianization after June	30.1975 S	ee section 5	509(a)(2).(C	omplete Pa	rt III)		
		acquire	ed by the org	janization after June	30,1975 S	ee section 5	509(a)(2). (C	omplete Pa	rt III)		
		acquire	ed by the org	janization after June	30,1975 S	ee section 5	5 09(a)(2). (C	omplete Pa	rt III)		
	_										
10	Γ										
10	Г	Anorga	anızatıon orç	ganized and operated	d exclusively	to test for p	oublic safety	See sectio	n 509(a)(4).		
	<u>'</u>	_	•	•	•		•				
11	Γ	An orga	anization or	anized and operated	d exclusively	for the bene	efit of, to perf	orm the fun	ctions of, or t	o carry out	the purposes of
11		Anorga	anızatıon org	ganized and operated	d exclusively	for the bene	efit of, to perf	orm the fun	ctıons of, or t	o carry out	the purposes of
11	ı										
	•										
		one or	more publici	y supported organiz	atıons descr	ibed in secti	on 509(a)(1)	or section	509(a)(2) So	ee section 5	09(a)(3). Check
		one or	more publici	ly supported organiz	ations descr	ibed in secti	ion 509(a)(1)	or section	509(a)(2) S	ee section 5	09(a)(3). Check
										ee section 5	09(a)(3). Check
										ee section s	os(a)(s). elleck
											. , . ,
		the box	that descri	bes the type of supp	orting organ	ization and d	complete line	s 11e throu	gh 11h		
		<u> </u>	Type I	h Type II C	Type II	I - Function	ally integrate	4 4 \square	Type III - No	n-functions	lly integrated
		a I	Type I	b Type II c	Type II	I - Function	ally integrate	d d 	Type III - No	on-functiona	illy integrated
				• •							
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e	ı	Byche	cking this be	ox, I certify that the	organization	is not contr	folled directly	or indirect	ly by one or n	nore disdual	itiad narconc
											ilieu persons
			nan lounuati			or more nub		ad arganiza			
				on managers and on	ner than one	or more pub		ed organıza			
		section	509(a)(2)	on managers and ou	ner than one	or more pub		ed organıza			
			1509(a)(2)	Ū		·	licly support	•	tions describ	ed in sectio	n 509(a)(1) or
f			. ,. ,	received a written de		·	licly support	•	tions describ	ed in sectio	n 509(a)(1) or
f		If the o	rganization	Ū		·	licly support	•	tions describ	ed in sectio	n 509(a)(1) or
f		If the o	. ,. ,	Ū		·	licly support	•	tions describ	ed in sectio	n 509(a)(1) or
		If the o check t	rganization this box	received a written de	etermination	from the IR	olicly supported	Type I, Typ	e II, or Type	ed in sectio	n 509(a)(1) or
f g		If the o check t Since A	rganization this box August 17, 2	Ū	etermination	from the IR	olicly supported	Type I, Typ	e II, or Type	ed in sectio	n 509(a)(1) or
		If the o check t Since A	rganization this box August 17, 2	received a written de	etermination	from the IR	olicly supported	Type I, Typ	e II, or Type	ed in sectio	n 509(a)(1) or
		If the o check t Since A followin	rganization this box August 17, 2 ng persons?	received a written de	etermination zation accep	from the IR	olicly supported in the support of t	Type I, Typ on from any	tions describe	ed in sectio	n 509(a)(1) or ing organization,
		If the o check t Since A followin	rganization this box August 17, 2 ng persons?	received a written de	etermination zation accep	from the IR	olicly supported in the support of t	Type I, Typ on from any	tions describe	ed in sectio	n 509(a)(1) or
		If the o check t Since A followin (i) A pe	rganization this box August 17, 2 ng persons? erson who di	received a written de 2006, has the organi rectly or indirectly c	etermination zation accep ontrols, eith	from the IR oted any gift er alone or t	olicly supported in the supported in the support of	Type I, Typ on from any	tions describe	ed in sectio	n 509(a)(1) or ing organization, Yes No
		If the o check t Since A followin (i) A pe	rganization this box August 17, 2 ng persons? erson who di	received a written de	etermination zation accep ontrols, eith	from the IR oted any gift er alone or t	olicly supported in the supported in the support of	Type I, Typ on from any	tions describe	ed in sectio	n 509(a)(1) or ing organization, Yes No
		If the ocheck to Since A following (i) A per and (iii)	rganization this box August 17, 2 ng persons? erson who di) below, the	received a written de 2006, has the organi rectly or indirectly o governing body of th	etermination zation accep controls, eith e supported	from the IR oted any gift er alone or t organization	olicly supported in the supported in the support of	Type I, Typ on from any	tions describe	ed in sectio III support 11g	Yes No
		If the ocheck to Since A following (i) A per and (iii)	rganization this box August 17, 2 ng persons? erson who di) below, the	received a written de 2006, has the organi rectly or indirectly c	etermination zation accep controls, eith e supported	from the IR oted any gift er alone or t organization	olicly supported in the	Type I, Typ on from any	tions describe	ed in sectio	Yes No
		If the o check to Since A followin (i) A per and (iii) A fa	rganization this box August 17, 2 ng persons? erson who di) below, the amily memb	received a written de 2006, has the organi rectly or indirectly o governing body of th er of a person descri	etermination zation accep ontrols, eith e supported bed in (i) abo	from the IR oted any gift er alone or t organization	elicly supported of the	Type I, Typ on from any	tions describe	ed in sectio III support 11g 11g	Yes No
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g		If the of check to Since A following (i) A per and (iii) A for (iiii) A for (iiiii) A for (iiiiii) A for (iiiiiiii) A for (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	rganization this box August 17, 2 ng persons? erson who di) below, the amily memb 35% contro	received a written do 2006, has the organi rectly or indirectly o governing body of th er of a person descri lled entity of a perso	zation accep controls, eith e supported bed in (i) abo n described	from the IR. Sted any gift er alone or t organization ove? in (i) or (ii) a	elicly supported that it is a foot on contribution of the contribu	Type I, Typ on from any	tions describe	ed in sectio III support 11g 11g	Yes No
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instructions

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 787,554 423,602 488,202 439,906 2,048,400 4,187,664 include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 787,554 423,602 488,202 439,906 2,048,400 4,187,664 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 0 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column **Public support.** Subtract line 5 from 4,187,664 line 4 Section B. Total Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 787,554 423,602 488,202 439,906 2,048,400 4,187,664 Amounts from line 4 Gross income from interest, dividends, payments received on 197,033 120,989 161,134 144,126 218,795 842,077 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or 0 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 IV) 11 Total support (Add lines 7 5,029,741 through 10) **12** Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 83 260 % Public support percentage for 2011 Schedule A, Part II, line 14 15 63 300 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┡ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2011 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage

19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))

Investment income percentage from 2011 Schedule A, Part III, line 17

17

18

17

18

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493319046353

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Supplemental Financial Statements

Open to Public Inspection

	me of the organization	-	Emp	loyer identification number
IHE	ELONG NOW FOUNDATION		68-	384748
Pa	rt I Organizations Maintaining Donor Adv			
	organization answered "Yes" to Form 990	•	1	(1) 5
	Total number at and afterna	(a) Donor advised funds		(b) Funds and other accounts
L	Total number at end of year		+	
2	Aggregate contributions to (during year)		+	
3 4	Aggregate grants from (during year)		+	
	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		or advi	Yes No
5	Did the organization inform all grantees, donors, and doused only for charitable purposes and not for the beneficonferring impermissible private benefit?	_		
Pa	rt III Conservation Easements. Complete if	the organization answered "Yes" to	o Forn	n 990, Part IV, line 7.
L 2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of an Preservation of a c	certifie	d historic structure
	easement on the last day of the tax year	1		Held at the End of the Year
а	Total number of conservation easements		2a	neid at the End of the Year
b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
d	Number of conservation easements included in (c) acq	` '	20	
u	historic structure listed in the National Register	lanea area o/17/00, and not on a	2d	
3	Number of conservation easements modified, transferr	ed, released, extinguished, or terminate	d by th	e organization during
	the tax year 🕨			
1	Number of states where property subject to conservat	on easement is located ►		
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?		— dling of	violations, and Yes No
_	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easen	nents c	Juring the year
5	▶			and you
	A mount of expenses incurred in monitoring, inspecting	and enforcing conservation easements	s durin	the year
7	► \$,, and emoreing conservation casements	o ddiiii,	, the year
3	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 17	7 0 (h)(4)(B)(ι)
9	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial		
Pai	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Ot	ner Similar Assets.
La	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its rever ts held for public exhibition, education,	or rese	arch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			* \$
	(ii) Assets included in Form 990, Part X			▶ \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		r finan	· <u></u>
а		, , , , , , , , , , , , , , , , , , , ,		.
-	Revenues included in Form 990, Part VIII, line 1			▶ \$

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	<u>llections of Ar</u>	t, His	itori	cai ii	<u>reasui</u>	res, or O	<u>tne</u>	r Similar As	ssets (co	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other reco	rds, cl	heck	any of	the follo	wing that a	are a	significant use	e of its	
а	Public exhibition		d	Γ	Loan	or exch	ange progr	ams			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expl	aın hov	w the	y furth	er the o	rganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit o								ıılar	_	_
	assets to be sold to raise funds rather than t		-							┌ Yes	No
Par	t IV Escrow and Custodial Arrang Part It line 9 or rg orted an an	•					answere	a "Y	es" to Form	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						rotherass	ets r	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follov	wing	able						
									Aı	nount	
С	Beginning balance						L	1c			
d	Additions during the year						L	1d			
е	Distributions during the year							1e			
f	Ending balance						L	1 f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	•						┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anatı	on has	been pr	ovided in P	art >	(III		Γ
Pa	rt V Endowment Funds. Complete										
		(a)Current year	(b) Prior	year	b (c) Tw	o years back	(d)	Three years back	(e)Four y	ears back
1a	Beginning of year balance										
b	Contributions							-			
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
_	and programs							-			
f	Administrative expenses							\vdash			
g	End of year balance		<u> </u>								
2	Provide the estimated percentage of the curr	ent year end balan	ice (lir	ne 1g	, colum	nn (a)) h	eld as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	zatıon	that	are hel	d and a	dmınıstere	d for	the	Yes	No
	(i) unrelated organizations								3a		110
	(ii) related organizations								3a		
b	If "Yes" to 3a(II), are the related organization	ns listed as require	ed on S	Sche	dule R?				3	b	
4	Describe in Part XIII the intended uses of th										
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	90, Pa				(I-) C+			4 (4) B	
	Description of property				a) Cost o sıs (ınve	estment)	(b) Cost or o basis (oth		(c) Accumulate depreciation	ed (d) Ex	ook value
1 a	Land						388	,976			388,976
b	Buildings										
C	Leasehold improvements		•								
	Equipment		•								
					5) (404.11					
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (B), line	10(c).)		•	<u> ► </u>		388,976

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or category	(b)Book value	(c) Method	d of valuation
(including name of security)		Cost or end-of-	year market value
(1)Financial derivatives			
(2)Closely-held equity interests Other			
Other			
Total. (Column (b) must equal Form 990, Part X. col (B) line 12)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. See		<u> </u> 13	
(a) Description of investment type	(b) Book value		d of valuation
	(=) = = = = = = = = = = = = = = = = = =		year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			
(a) Descrip			(b) Book value
-			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	:)		
Part X Other Liabilities. See Form 990, Part >			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
Teacrar meetine taxes			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	İ		

j Par	Reconciliation of Revenue per Audited Financial Statements with Revenue per Retur	<u>n</u>
1	Total revenue, gains, and other support per audited financial statements	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments	
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIII)	
e	Add lines 2a through 2d	
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)	
C	Add lines 4a and 4b	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	
Part	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	urn
1	Total expenses and losses per audited financial statements	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities	
b	Prior year adjustments	
C	Other losses	
d	Other (Describe in Part XIII)	
e	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	
b	Other (Describe in Part XIII)	
C	Add lines 4a and 4b	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	
Part	t XIII Supplemental Information	
Com	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines $1a$ and 4 , Part IV, lines	1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier Return Reference Explanation

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DLN: 93493319046353

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Noncash Contributions

Name of the organization THE LONG NOW FOUNDATION

Employer identification number

Pa	rt I Types of Property			L	08-0384748			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	Method of a noncash contri			ts
1	Art—Works of art			- 9				
	Art—Historical treasures .							
	Art—Fractional Interests							
	Books and publications							
	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	6	132,084				
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
	O ther ► ()							
26	O ther ►()							
	O ther ►()							
	O ther ▶ ()							
29	Number of Forms 8283 received for which the organization comple				29		<u>,, </u>	
30>	During the year, did the organiza	ition receiv	e hy contribution any propo	arty reported in Part I lines	1-28 that it	\vdash	Yes	No
Jua								
	must hold for at least three year				u to be used			Na
	for exempt purposes for the enti					30a	-+	No
ь 31	If "Yes," describe the arrangement Does the organization have a gif			review of any non-standard	contributions?	31		Νo
							i	
J∠d	Does the organization hire or uscontributions?	· · ·		· · · · · · · · ·		32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	an amount	ın column (c) for a type of	property for which column (a) is checked,			

Page **2**

Schedule M (Fo	Page 2
Part II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b,
	32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the
	number of items received, or a combination of both. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization THE LONG NOW FOUNDATION

Employer identification number

68-0384748

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The Long Now Foundation's 990s are available through Guidestar (www guidestar org) All other governing documents are available by request as per applicable laws

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15b		Board members do not receive financial compensation. Compensation for key employees is recommended by the Executive Director and reviewed by the Board of Directors

ldentifier	Return Reference	Explanation
Form 990, Part VI Line 15a	Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The Executive Director compensation is based on Board review and comparison data with other Northern California nonprofit organizations

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	All Trustees, Directors, Officers, and Key Employees are required to sign a Conflict of Interest policy. It is the policy of the Board that the existence of any interests that give rise to conflict be disclosed on a timely basis and always before any transaction is consummated. It shall be the continuing responsibility of the Board, officers, and management employees to scrutinize their transactions and outside business interests and relationships for potential conflicts and to immediately make such disclosures. Board member disclosures should be made to a Board officer and staff disclosures should be made to the chief executive. The Board shall determine whether a conflict exists and is material, and in the presence of an existing material conflict, whether the contemplated transaction may be authorized as just, fair, and reasonable to Long Now. The decision of the BOard on these matters will rest in their sole discretion, and their concern must be the welfare of Long Now and the advancement of its purpose.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11b	Form 990, Part VI, Line 11b Form 990 Review Process	The Executive Director and Board review the 990 before filing

ldentifier	Return Reference	Explanation
Form 990, Part III, Line 4d	Form 990, Part III, Line 4d Other Program Services Description	OTHER PROGRAM SERVICES 4 The Long Now Foundation engages in various projects and programs whose aim is to creatively foster responsibility in the framework of the next 10,000 years. Besides the 10,000 Year Clock and Seminars about Long-term Thinking, these projects include a series of special events, a museum space open to the public seven days a week, Long Bets, the Rosetta project, PanLex, and Revive and Restore. OTHER PROGRAM SERVICES 5. Revive and Restore. Revive & Restores mission is to enhance biodiversity through genetic rescue of endangered and extinct species. Beside its focus on bringing back the passenger pigeon, Revive & Restore is exploring projects to support genomic work in allele replacement for species experiencing a loss of diversity. Revive & Restore also serves as a clearinghouse for de-extinction and rewilding projects worldwide.

ldentifier	Return Reference	Explanation
Form 990, Part III, Line 2	· ·	PanLex - The vision underlying the PanLex project is that the worlds thousands of human languages can flourish over the long-term future. To help make them all useful for global communication, PanLex aims to translate any word (or word-like phrase) from any language into any other language. High-quality communication across languages usually requires more than lexical translation (translating words), but lexical translation is one of its main prerequisites. Revive and Restore - Erevive & Restores mission is to enhance biodiversity through genetic rescue of endangered and extinct species. Beside its focus on bringing back the passenger pigeon, Revive & Restore is exploring projects to support genomic work in allele replacement for species experiencing a loss of diversity. Revive & Restore also serves as a clearinghouse for de-extinction and rewilding projects worldwide.