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)

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

OMB No. 1545-0047

Open to Public Inspection

~	FUI	the 2012 calen	uar year, or tax year beginning , 2012, and endir	1 g		,			
В	Check	k if applicable:	C	-	D Emplo	yer Identii	ication Num	nber	
	X	Address change	Burning Man Project		45-	26382	73		
	\boldsymbol{H}	Name change	660 Alabama Street		E Teleph				
	H	nitial return	San Francisco, CA 94110			-865-			
	\mathbf{H}		,		413	-603	3000	_	
	\vdash	Terminated							
	Н.	Amended return	F	III N C al-	G Gross			<u>591, (</u>	
	L.J.ª	Application pending	F Name and address of principal officer:	H(a) is this				Yes	X No
_			Same As C Above	H(b) Are all if 'No,	affiliates included attach a list.	luded? . (see insti	uctions) L	Yes	No
1_	Tax	x-exempt status	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	2		•	-		
J	We	ebsite: 🟲 ww	w.burningmanproject.org	H(c) Group	exemption n	umber 🟲			
K	Fon	m of organization:	X Corporation Trust Association Other ► L Year of Forma	tion: 201	1 M:	State of le	gal domicile	: CA	- 1000
P	artl	Summar	v	- 190100	7.55			-	
	1	Briefly descri	be the organization's mission or most significant activities: Burning	Man Pr	oject	Drov	ides t	·he	
	á.	infrastr	uctural tools, educational programs, art progr	came ar	oloce	er fr	amemo.	rks	. – – –
Governance		that all	ow people around the world to apply the 10 pri	inciple	s of	Burni	no Mai	n in	
Ē			munities and fields of human endeavor.			- 	119 114		
를	2		x F if the organization discontinued its operations or disposed of mo	ore than 2	5% of its	net ass	ets.	. – – –	
යු	3	Number of vo	ting members of the governing body (Part VI, line 1a)			131			17
ං ජ	4		dependent voting members of the governing body (Part VI, line 1b)						
Ę.	5	Total number	of individuals employed in calendar year 2012 (Part V, line 2a)			5			16 3
Activities &	6		of volunteers (estimate if necessary)						30
A			d business revenue from Part VIII, column (C), line 12			7 a		32.77 32	0.
	l b	Net unrelated	business taxable income from Form 990-T, line 34			7 b	10.43		0.
					rior Year		Curre	ent Yea	
40	8		and grants (Part VIII, line 1h)			3		539,	959.
Revenue	9	Program serv	ice revenue (Part VIII, line 2g)				100		680.
8	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)			1	- 573-W		33.
č	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)					591,	672.
	13	Grants and si	milar amounts paid (Part IX, column (A), lines 1-3)	1					
	14		to or for members (Part IX, column (A), line 4)						
	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)			- 1		40 (096.
9			undraising fees (Part IX, column (A), line 11e)					401	330.
Expenses	1		·	A	PS2 (11/17/16)	DAY OF THE		A. P. A.L.	45.0000
×			ing expenses (Part IX, column (D), line 25) 55,517.					188	
	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)				5 5555	219,8	829.
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)				(3)	259,9	925.
	19	Revenue less	expenses. Subtract line 18 from line 12			3	28.095	331,	747.
3				Beginnin	g of Curren	t Year		of Year	
Not Asset Fund Balan	20	Total assets (Part X, line 16)			0.		368,2	249.
27 27	21	Total liabilities	6 (Part X, line 26)			0.			502.
žŽ	22	Net assets or	fund balances. Subtract line 21 from line 20			0.	35	331,	
	1	Signature		- F.		0.		331,	
Unde	r nana			he heel of mu	- Loculados	and helief	it is town o	oreast a	
comp	olete. D	eclaration of prepar	clare that I have examined this release including accompany of exhemits and statements, and to the Other than officer) is based on all information of which property has any knowledge.	ne best of my	KIROWICEGO (end ochor	reis nue, c	Oliect, ai	10
37		-	WIMO		11-1	1-13	5		
Sig	ın	Signatur	office	Dat	ė	-			
He	re	Jen	<u>ife</u> r Raiser	Treas	urar				
•••	•		orint name and title.	11003	drer_				
-	4000	Print/Type or	eparer's name Preparer's signature Date	1	Charle IS	(ii P	TIN		-
			Ι '' Ι Ι Ι Ι Ι Ι Ι Ι Ι Ι Ι Ι Ι Ι Ι Ι Ι	[-	<u> </u>		OE #	
Pai			is Kollaja D. Chris Kollaja /////	7	self-employe	a P	00162	774	
	par	.1	A.L. Nella and Company, LLP						
US	е Оп	Firm's addres			Firm's EIN				
			San Francisco, CA 94102		Phone no.	(415)	621-		-, 30.76
May	the	IRS discuss thi	s return with the preparer shown above? (see instructions)				X Yes	- LJ	No

orr	m 990 (2012) Burning Man Project	45-2638273	Page 2
	rt III Statement of Program Service Accomplishments		
P. Principle	Check if Schedule O contains a response to any question in this Part III		, X
1			-
•	Burning Man Project provides the infrastructural tools, education	onal programs, ar	t
	programs and other frameworks that allow people around the world	i to apply the 10	
	principles of Burning Man in many communities and fields of human	an endeavor.	
	billicibles of purified but in many communication and rate and	<u></u>	
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior	
4	Form 990 or 990-EZ?	☐ Yes [X No
	If 'Yes,' describe these new services on Schedule O.		•
_	and the state of t	ervices? Yes	X No
3		CIVICOS L	A NO
_	If 'Yes,' describe these changes on Schedule O.	nines or moneyad by ov	BOBCOC
4	Describe the organization's program service accomplishments for each of its three largest program se Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	of grants and allocations to	penses.
	others, the total expenses, and revenue, if any, for each program service reported.	3	
	· · · · · · · · · · · · · · · · · · ·		
	a (Code:) (Expenses \$ 47,363, including grants of \$)	(Revenue \$)
7	Researched, developed plan, and evaluated sites for a future ci	vic, artistic, ar	ıd
	ecological rural center in northern Nevada.		
	ecological iniai centel in northern novada.		
4	10 (COGC.) (Expenses 4 30,370:	(Revenue \$)
	Fiscally sponsored Burners Without Borders, an organization than	t_promotes_activi	ties_
	around the globe to support a community's inherent capacity to	thrive by encoura	iging_
	innovative approaches to disaster relief and grassroots initiat	ives that make a	
	positive impact. Major projects in 2012 included Hurricane Sand	<u>y relief, a scree</u>	<u>n</u>
	printing project in Haiti, and a fire spinning educational yout	h program in Keny	<u>a</u>
	Ic (Code:) (Expenses \$ 36,105. including grants of \$)	(Revenue \$ 51	,000.)
-	Facilitated civic engagement projects including a partnership w	ith The Downtown	
	Project in Las Vegas to bring vibrant, interactive art and cult	ure to Downtown I	as
	<u>Vegas</u>		
	<u></u>		
4	ad Other program services. (Describe in Schedule O.) See Schedule O		
4		680.)	

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х 1 X 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?..... 3 Х 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? If 'Yes,' complete Schedule C, Part II. 4 X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III..... X 5 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, 6 X 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 Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 Х complete Schedule D, Part III...... 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...... Х 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 X permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V..... If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, 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..... Х 11 a X 11 b Х 11 c X 11 d e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X..... X 11e 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... 11 f X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete 12a Х Schedule D, Parts XI, and XII... b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and Х 12b if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E......... 13 X 14a 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 Х 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..... X 15 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 X X 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. X 19 20 X 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H......... bild 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?..... 20b

Form 990 (2012) Burning Man Project Part IV Checklist of Required Schedules (continued)

	(commerce)	_	-	_
21	Did the experience country to the dr page of	1	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	2 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		x
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		x
24	la 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24-		x
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b	<u> </u>	<u> </u>
	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?			
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24c 24d	<u> </u>	_
	a 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? If 'Yes,' complete Schedule L, Part I	25a		х
	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		х
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		х
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		х
	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):			
1	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
(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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	contributions? If 'Yes,' complete Schedule M.	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		х
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		
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
t	olf '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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	200 (2	1010

Check if Schedule O contains a response to any question in this Part V			[
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	11		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		1888
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	3000	X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	3		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		8 5	SOF
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O			
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		х
b If 'Yes,' enter the name of the foreign country: ►		AND DE	3000
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	CONTRACTOR OF THE PARTY OF THE	Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		-	Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c	_	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			x
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were			_
not tax deductible?	бь	STANDAR	Electrical con-
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			4
services provided to the payor?	7a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7ь		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	53 (Q) (S)	SECTION	A SHARE
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	San Park	Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	 		- 1
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		
	7h	BUNNETA	CONTRACTOR OF THE PARTY.
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?			
9 Sponsoring organizations maintaining donor advised funds.	8	10000	S000000
a Did the organization make any taxable distributions under section 4966?	0.0	A SOURCE	
b Did the organization make a distribution to a donor, donor advisor, or related person?		\dashv	
10 Section 501(c)(7) organizations. Enter:	9Ь	Charles II	S. March
a Initiation fees and capital contributions included on Part VIII, line 12	SECTION 1		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		7	
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
	- 33		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		200	NEW YEAR
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand	- 12		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	14b		

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI.

30	ection A. Governing Body and Management							
•	1 a 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.		Yes	No				
	b Enter the number of voting members included in line 1a, above, who are independent 1b							
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? See Schedule O	2	Х					
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		x				
4	Did the organization make any significant changes to its governing documents							
	since the prior Form 990 was filed?	5		X				
 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 								
_		6		Х				
•	7 a 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?	7 a		x				
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
	a The governing body?	8 a	Х					
9	b Each committee with authority to act on behalf of the governing body?	8 b	Х					
_	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule Q	9		X				
)U	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode.						
10	a Did the organization have local chapters, branches, or affiliates?	10 a	Yes	No X				
	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?							
	operations are consistent with the organization's exempt purposes?	10 b						
11	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х					
10	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O							
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13.	12 a	Х					
	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 Ь	x					
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is doneSee, Schedule O	12 c	x					
13	Port of the first transfer of the control of the co	13	Х	_				
14	Politica and the control of the cont	14	X					
15	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?			4				
	a The organization's CEO, Executive Director, or top management official See Schedule O	15a	Х	A STATE OF THE PARTY OF				
	b Other officers of key employees of the organization SeeSchedule . D	15b	Х	100				
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)							
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X				
_	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b						
	ction C. Disclosure	-		C 250				
	List the states with which a copy of this Form 990 is required to be filed ► CA							
18	inspection. Indicate how you make these available. Check all that apply.		_					
	Own website X Another's website X Upon request X Other (explain in Schedule O) See		h. 0)				
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements availabeled the public during the tax year. See Schedule O	le to						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:							
	Jennifer Raiser 660 Alabama Street San Francisco CA 94110 415-865-3800							

Form 990 (2012)	Burning	Man	Prof	ect
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII.....

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

		3	(0		,		a any current officer, director, or trustee.				
(A) Name and Title	(B) Average hours per	er Officer and a director/busines						(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other	
	hours per week (list any hours for related organiza- tions below dotted line)	k (list carried and carried an		Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations			
(1) Harley K. Dubois	_ 25 _										
Director	0	X						0.	0.	0.	
(2) Marian Goodell	30_									· · · · · · · · · · · · · · · · · · ·	
Director	0	X						0.	0.	0.	
(3) Larry Harvey	25	1						•			
President	00	X	Ш	X				0.	0.	0.	
(4) Michael Mikel	16_	ļ									
Director	0	<u>X</u>						0.	0.	0.	
(5) Will Roger Peterson	_16_	ļ									
Chair of Board	0	Х	Ш	Х				0.	0.	0.	
(6) Nanci O. Peterson	20_										
Secretary	0	Х	Ш	Х	_			0.	0.	0.	
(7) Christopher Bently	1										
Director	0	X						0.	0.	0.	
(8) Stephen Townsend Conley	0.25										
Director	0	Х		_				0.	0.	0.	
(9) Mike Farrah	0.25	.									
Director	0	Х	Ц		_			0.	0.	0.	
(10) Terry Gross	12_	.									
Director	0	X	\Box	_	_		_	0.	0.	0.	
(11) Kay Morrison	2	.			- 1						
Director	0	<u>X</u>	_	_	_		_	0.	0.	0.	
(12) Jennifer Raiser	_12_	.	- 1		Ī						
Treasurer	0	<u>X</u>		X	_		\dashv	10,000.	0.	0.	
(13) Rae Richman	0.25						- [
Director	0	Х	_	_	_			0.	0.	0.	
(14) Leo Villareal	0.25										
Director	0	X		_				0.	0.	0.	

Part VII Section A. Officers, Directors, Trus		Key	En			es,	and	d Highest Con	pensated Emp	oyees (cont)
	(B)	(C) Position rage (do not check more than one								
(A) Name and litte	Average hours per	l box	. unie	ess na	erson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15) David Walker Director	0.2	х					_	0.	0.	0.
(16) Chris Weitz Director	0.2	х						0.	0.	0.
(17) Mercedes Martinez Director	0.2	Х						0.	0.	0.
(18)										
(19)									798. 2.52. 2.52.	
(20)									1909-02-02	F
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total							•	10,000.	0.	0.
c Total from continuation sheets to Part VII, Section								0.	0.	0.
d Total (add lines 1b and 1c)							Jad I	10,000.	0.	0.
from the organization • 0	i i i i i i i i i i i i i i i i i i i	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JD01		11101	CCCIT	rcu i	more than \$100,00	o or reportable comp	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it	r or trus individua	tee, l	key	emp	oloye	e, o	r hiç	ghest compensate	ed employee	Yes No
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater is such individual.	eportable than \$15	e con 50,00	npe 10?	nsat If 'Y	lion 'es' (and comp	othe elete	er compensation f Schedule J for	rom	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	compens complet	sation e Sc	n fro hed	om a lule .	iny i	unrel suc	ated h pe	d organization or	indívidual	5 X
1 Complete this table for your five highest compensar	ted inde	penc	lent	COL	trac	tors	that	received more th	an \$100,000 of	
compensation from the organization. Report compensation	tion for t	he ca	lend	lar y	ear	endir	ng w	ith or within the org	janization's tax year.	
(A) Name and business address Description of services Compensation										
None			500_	20.00	_		(2)			
a de la companya del companya de la companya de la companya del companya de la companya del companya de la companya de la companya de la companya de la companya del companya de la companya dela companya de la companya de la companya dela companya de la companya dela companya de la companya dela c			7				Ţ		10 TO	= 30° 1440 30°74
				_						
2 Total number of independent contractors (including but \$100,000 in compensation from the organization ▶		ed to	thos	se lis	sted	abov	e) w	vho received more	than	

	Check if Schedule O contains a res	onse to any question	on in this Part VIII.			[
	(A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	E William Form	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMI AR AMOUNTS	1 a Federated campaigns 1 a b Membership dues 1 b c Fundraising events 1 c d Related organizations 1 d e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above 1 f	539,959.				
8 8	g Noncash contributions included in Ins 1a-1f: \$	339,939.		Property of	**************************************	是数数数数数
			539,959.			
哥		Business Code				
PROGRAM SERVICE REVENUE	b Program event revenue c	541900 541900	51,000. 680.	51,000. 680.		
GRAM SE	e f All other program service revenue					
폱	g Total. Add lines 2a-2f	<u> </u>	51,680.		The same state of the same state of	Grislen Mark
	Investment income (including dividend other similar amounts). Income from investment of tax-exempt Royalties.	s, interest and bond proceeds.	33.	e e e e e e e e e e e e e e e e e e e		33.
	6 a Gross rents b Less: rental expenses c Rental income or (loss)	(ii) Personal				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory. (i) Securities (i) Securities	(ii) Other				
	and sales expenses c Gain or (loss) d Net gain or (loss)					
VENUE	8 a Gross income from fundraising events (not including, \$_of contributions reported on line 1c).					
OTHER REVENUE	See Part IV, line 18	·				
	9a Gross income from gaming activities. See Part IV, line 19	ı				
	b Less: direct expenses					
	10a Gross sales of inventory, less returns and allowances			1 64		
	c Net income or (loss) from sales of inve					
	Miscellaneous Revenue 11 a b	Business Code				
	d All other revenuee Total. Add lines 11a-11d.					
	12 Total revenue. See instructions		591,672.	51,680.	0.	33.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Sec	ion 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a r	plete all columns. All oth	ner organizations must co	mplete column (A).	X
		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				3.11
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	20,000.	0.	0.	20,000.
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
	in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	18,245.	10,291.	7,954.	
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions).				
9	Other employee benefits		070		
10	Payroll taxes	1,851.	870.	981.	
11	Fees for services (non-employees):				0.054
	Management	85,140.	56,186.	19,100.	9,854.
	Legal	34,719.	20,607.	14,112.	
	: Accounting	990.		990.	
	Lobbying		OF RESIDENCE PROPERTY AND ADDRESS OF THE PARTY	And the Charles and London Company Command Co.	
•	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
5	Other. (If line 11g amt exceeds 10% of line 25, col- umn (A) amt, list line 11g expenses on Sch 0) S.ch . (41,620.	20,066.		21,554.
12		1,997.	1,997.		
13	Office expenses	9,497.	5,981.	2,742.	774.
14	Information technology	310.	15.	250.	45.
15	Royalties				
16	Occupancy	5,500.	5,500.		
17	Travel	12,067.	9,340.	20.	2,707.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	9,358.	5,175.	4,183.	of an internal control of the second
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.)			19714	
	. '	10,957.	10,863.	94.	American rescondental and the second of the second
	Equipment rental (Sandy relief)	3,258.	2,722.	38.	498.
	Supplies	3,258. 1,766.	1,766.		
	Equipment fuel (Sandy relief)	1,786.	1,334.		
	Food for meetings & voluntee	1,334.	408.	823.	85.
	All other expenses	259,925.	153,121.	51,287.	55,517.
25	Total functional expenses. Add lines 1 through 24e	253,345.	133,121.	31,201.	30,02,
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 if following SOP 98-2 (ASC 958-720)			91	
DA		755401101 10	210/10		Form 990 (2012)

Form 990 (2012)

Part X Balance Sheet

BAA

(A) Beginning of year (B) End of year 1 360,836. Cash — non-interest-bearing.... 2 2 Savings and temporary cash investments..... Pledges and grants receivable, net..... 3 Accounts receivable, net..... 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L . . Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L..... 6 7 ASSETS Notes and loans receivable, net..... Inventories for sale or use 8 9 5,413. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis.

Complete Part VI of Schedule D...... 10a 100 11 Investments - publicly traded securities..... 12 Investments - other securities. See Part IV, line 11..... 12 Investments - program-related. See Part IV, line 11..... 13 13 14 Intangible assets..... 14 Other assets. See Part IV, line 11..... 15 2,000. 15 368,249. 31,502. 16 Total assets. Add lines 1 through 15 (must equal line 34)..... 0 16 17 17 18 18 19 Deferred revenue..... 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L..... 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 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 5,000. 26 36,502. 0. Total liabilities. Add lines 17 through 25..... 26 x and complete Organizations that follow SFAS 117 (ASC 958), check here > lines 27 through 29, and lines 33 and 34. 27 160,176. 人のとと 27 Unrestricted net assets..... 28 171,571. 28 Temporarily restricted net assets..... 29 Permanently restricted net assets 29 R Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. POZO 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund BALAZOW 32 Retained earnings, endowment, accumulated income, or other funds 32 0 33 331,747. Total net assets or fund balances 33 34 368,249. 0. Total liabilities and net assets/fund balances..... 34

_		45-263827	3	Pa	age 12
Pa	t XI Reconciliation of Net Assets				120
	Check if Schedule O contains a response to any question in this Part XI				П
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5	91.	672.
2	Total expenses (must equal Part IX, column (A), line 25)	2			925.
3	Revenue less expenses. Subtract line 2 from line 1	3			747.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0.
5	Net unrealized gains (tosses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B)).	10	3	31,	<u>747.</u>
Pai	t XIII Financial Statements and Reporting				
140	Check if Schedule O contains a response to any question in this Part XII				П
			7.	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				1
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
	in Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev separate basis, consolidated basis, or both:	iewed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
F	Were the organization's financial statements audited by an independent accountant?		. 2b		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se		93833	Para Car	SERVICE SERVICE
	basis, consolidated basis, or both:	parate		1946	
	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 oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	udit,	. 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	le ••••••••••••••••••••••••••••••••••••	. 3a		х
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit	. 3b		0,000,000
BAA			Form	990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2012

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Total

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.

Name of the organization Employer identification number 45-2638273 Burning Man Project Part1 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(bX1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities 9 related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly 11 supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type II c | Type III — Functionally integrated d | Type III - Non-functionally integrated a | Type i By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? a Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) 11 g (i) below, the governing body of the supported organization?..... A family member of a person described in (i) above?..... 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?..... 11 a (iii) h Provide the following information about the supported organization(s). (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (iv) Is the organization in column (i) listed in (vi) Is the organization in column (i) (i) Name of supported organization (v) Did you notify the organization in (vii) Amount of monetary the organization in column (i) of your support organized in the U.S.? your governing document? (see instructions)) support? Yes No Yes No Yes No (A) **(B)** (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2012

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

Sec	ction A. Public Support						
beg	endar year (or fiscal year inning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')					539,959.	539,959.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge					W 768 CDC - 700 C	0.
4	Total. Add lines 1 through 3	0.	0.	0.	0.	539,959.	539,959.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						165,800.
6	Public support. Subtract line 5 from line 4						374,159.
Sec	tion B. Total Support						
Cale beg	endar year (or fiscal year inning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	0.	0.	0.	0.	539,959.	539,959.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					33.	33.
9	Net income from unrelated business activities, whether or not the business is regularly carried on					-	0.
10	Other income, Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11	Total support. Add lines 7 through 10						539, 992.
12	Gross receipts from related activ	ities, etc (see inst	ructions)			12	0.
	First five years. If the Form 990 is organization, check this box and	stop here		d, fourth, or fifth ta	ax year as a section	n 501(c)(3)	► 🛚
Sec	tion C. Computation of Pul	blic Support P	ercentage				
14	Public support percentage for 20 Public support percentage from 2	12 (line 6, column	(f) divided by line	e 11, column (f)).			<u>%</u>
	33-1/3% support test - 2012. If and stop here. The organization	qualities as a pub	licly supported or	ganization			
ŧ	33-1/3% support test — 2011. If t and stop here. The organization	he organization di qualifies as a put	d not check a box licly supported or	on line 13 or 16a ganization	a, and line 15 is 3	3-1/3% or more,	check this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	st 2012. If the omeets the 'facts-a -and-circumstance	rganization did no nd-circumstances es' test. The organ	ot check a box on test, check this b dization qualifies a	line 13, 16a, or 1 box and stop her as a publicly supp	6b, and line 14 is e. Explain in Part ported organization	10% IV how n ▶ □
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	nd-circumstances est. The organizal	test, check this to tion qualifies as a	oox and stop her publicly supporte	e. Explain in Part ed organization	IV how the □
18	Private foundation. If the organiz	zation did not ched	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see ins	tructions 🟲 🔲

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.)

	tion A. Public Support						
Calen 1	dar year (or fiscal yr beginning in) > Gifts, grants, contributions and membership fees received, (Do not include any 'unusual grants.')	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons				2-		
ь	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	3 2 3 2 3 2 2					
C	Add lines 7a and 7b						
_	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support			4) 2212			(D.T-4-1
	dar year (or fiscal yr beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	taxes) from businesses acquired after June 30, 1975						
_	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add ins 9, 10c, 11, and 12.)	-					
14	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, c	r fifth tax year as	a section 501(c)(3) ► 🗍
Sec	tion C. Computation of Pul	blic Support P	ercentage	12 1 (0)		1 45	Q.
	Public support percentage for 20						
	Public support percentage from 2				. 49	16	8
	tion D. Computation of Inv				(0)		
	Investment income percentage for						
18	Investment income percentage for	rom 20 11 Schedu	ie A, Part III, line	1/		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	33-1/3% support tests — 2012. If is not more than 33-1/3%, check	this box and sto j	o here. The organ	ization qualifies a	as a publicly supp	ortea organization	
0	33-1/3% support tests - 2011. If line 18 is not more than 33-1/3%	the organization, check this box a	and stop here. Th	e organization qu	alifies as a public	ly supported organ	ization ►
20	Private foundation. If the organization	zation did not che	ck a box on line	14, 19a, or 19b, c	heck this box and	see instructions	▶ []

	(Form 990 or 990-EZ) 2		ng Man Proje	ect		45-2638273	Page 4
Par IV	Supplemental Int Part II, line 17a of (See instructions)	f ormation. Col or 17b; and Par o).	nplete this par t III, line 12. A	t to provide the elso complete this	explanations requ s part for any add	ired by Part II, line itional information.	10;
			· 				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions. OMB No. 1545-0047

2012

Open to Public Inspection
Employer identification number

Burning Man Project	45-2638273
Part Organizations Maintaining Donor Advised Funds or Other Similar	
the organization answered 'Yes' to Form 990, Part IV, line 6.	·
(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	
2 Aggregate contributions to (during year)	
3 Aggregate grants from (during year)	
4 Aggregate value at end of year	
5 Did the organization inform all donors and donor advisors in writing that the assets held are the organization's property, subject to the organization's exclusive legal control?	in donor advised funds Yes No
6 Did the organization inform all grantees, donors, and donor advisors in writing that gran for charitable purposes and not for the benefit of the donor or donor advisor, or for any impermissible private benefit?	t funds can be used only other purpose conferring Yes No
Conservation Easements. Complete if the organization answered "	
1 Purpose(s) of conservation easements held by the organization (check all that apply).	
	tion of an historically important land area tion of a certified historic structure
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the last day of the tax year.	e form of a conservation easement on the
	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a	historic
structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated tax year ►	d by the organization during the
4 Number of states where property subject to conservation easement is located ▶	
5 Does the organization have a written policy regarding the periodic monitoring, inspection and enforcement of the conservation easements it holds?	n, handling of violations, Yes No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easem	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements >\$	during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements and section 170(h)(4)(B)(ii)?	of section 170(h)(4)(B)(i) Yes No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and einclude, if applicable, the text of the footnote to the organization's financial statements transfer or conservation easements.	that describes the organization's accounting for
Organizations Maintaining Collections of Art, Historical Treasures Complete if the organization answered 'Yes' to Form 990, Part IV, I	s, or Other Similar Assets. ine 8.
1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its art, historical treasures, or other similar assets held for public exhibition, education, or research in Part XIII, the text of the footnote to its financial statements that describes these items	revenue statement and balance sheet works of n in furtherance of public service, provide, s.
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenishmental treasures, or other similar assets held for public exhibition, education, or research in following amounts relating to these items:	furtherance of public service, provide the
(i) Revenues included in Form 990, Part VIII, line 1	
(ii) Assets included in Form 990, Part X	
2 If the organization received or held works of art, historical treasures, or other similar assets for amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
a Revenues included in Form 990, Part VIII, line 1	
b Assets included in Form 990, Part X	

Schedule D (Form 990) 2012 Burning Man	Project		45-263	
Organizations Maintaining Col	lections of Art, His	storical Treasures, c	or Other Similar Ass	iets (continuea)
3 Using the organization's acquisition, accession, items (check all that apply):	, and other records, check	k any of the following that	are a significant use of its	collection
a Public exhibition	d 🗍 Loa	in or exchange programs	;	
b Scholarly research	e 🗆 Oth	ier		
c Preservation for future generations			·	
4 Provide a description of the organization's colle Part XIII.	ections and explain how I	hey further the organization	n's exempt purpose in	
5 During the year, did the organization solicit to be sold to raise funds rather than to be n	or receive donations of naintained as part of th	art, historical treasures, e organization's collectio	or other similar assets	Yes No
Part IV Escrow and Custodial Arrangements reported an amount on Form 9	 Complete if the organ 	nization answered 'Yes'	to Form 990, Part IV, lir	ne 9, or
1 a Is the organization an agent, trustee, custoo	200	.	ther assets not included	
on Form 990, Part X?				Yes No
b If 'Yes,' explain the arrangement in Part XII	I and complete the folio	owing table:		Americal
				Amount
c Beginning balance				
d Additions during the year				
e Distributions during the year				
f Ending balance				
2a Did the organization include an amount on I				
b If 'Yes,' explain the arrangement in Part XII	I. Check here if the exp	lantion has been provide	ed in Part XIII	
		V000		
Part V Endowment Funds. Complete	if the organization	answered 'Yes' to Fo	orm 990, Part IV, lin	e 10.
(a) Curi			(d) Three years	(e) Four years
1 a Beginning of year balance				
b Contributions				
			7 - 120-12 12	A
c Net investment earnings, gains, and losses				
d Grants or scholarships				
e Other expenditures for facilities and programs				24-7
f Administrative expenses				
g End of year balance				
2 Provide the estimated percentage of the cur	rrent year end balance	(line 1g, column (a)) held	d as:	
a Board designated or quasi-endowment	%			
b Permanent endowment ►	8			
c Temporarily restricted endowment	- %			
The percentages in lines 2a, 2b, and 2c sho	ould equal 100%.			
3a Are there endowment funds not in the possessi organization by:				Yes No
(i) unrelated organizations				. 3a(i)
(ii) related organizations	,			. [3a(ii)]
b If 'Yes' to 3a(ii), are the related organization	ns listed as required on	Schedule R?		. 3b
4 Describe in Part XIII the intended uses of the				
Part VI Land, Buildings, and Equipme			1000_20 V-XI	
Description of property	(a) Cost or other bas (investment)		(c) Accumulated depreciation	(d) Book value
1 a Land				mukimen -
b Buildings				
c Leasehold improvements			-	
d Equipment		· · · · · ·	 	
e Other.		V notions (B) II-s 10(-)	V 2002 - 1000 - 1000	0
Total. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part 7	, coluini (b), line 10(c).		0.

Investments - Other Securities. See F	form 990, Part X,	line 12. N/A
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or
		end-of-year market value
(1) Financial derivatives		
(3) Other		
(A)		
(B)		
(C)		
(0)		
(E)		1
(F)		10 544 N 5-1 Princip 44 (3-1
(G)		
(H)		
(1)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶		
Investments - Program Related. See F		
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or
(1)		end-of-year market value
(2)		
(3)	 .	200
(4)		
(5)		
(6)		
(7)		
(8)		A CONTRACTOR OF THE PROPERTY O
(9)		300
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.).		
Other Assets. See Form 990, Part X, lir		
(a) Desc		(b) Book value
(a) Desc		
(a) Desc (1) (2)		
(a) Desc (1) (2) (3)		
(a) Desc (1) (2) (3) (4)		
(a) Desc (1) (2) (3) (4) (5)		
(a) Desc (1) (2) (3) (4) (5) (6)		
(a) Desc (1) (2) (3) (4) (5)		
(a) Desc (1) (2) (3) (4) (5) (6) (7)		
(a) Desc (1) (2) (3) (4) (5) (6) (7) (8)		
(a) Desc (1) (2) (3) (4) (5) (6) (7) (8) (9)	críption	(b) Book value
(a) Desc (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B)	, line 15.)	(b) Book value
(a) Description of liability (a) Description of liability	ription	(b) Book value
(a) Description of liability (1) Federal income taxes	, line 15.) Line 25. (b) Book value	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded	, line 15.)	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3)	, line 15.) Line 25. (b) Book value	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) (a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4)	, line 15.) Line 25. (b) Book value	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5)	, line 15.) Line 25. (b) Book value	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) (a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6)	, line 15.) Line 25. (b) Book value	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) (a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7)	, line 15.) Line 25. (b) Book value	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) (a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8)	, line 15.) Line 25. (b) Book value	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) (a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9)	, line 15.) Line 25. (b) Book value	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) an X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10)	, line 15.) Line 25. (b) Book value	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) Part X Other Liabilities. See Form 990, Part X, (a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) (11)	, line 15.)	(b) Book value
(a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) An An Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Duplicated donation to be refunded (3) (4) (5) (6) (7) (8) (9) (10) (11)	, line 15.)	(b) Book value

Schedule D (Form 990) 2012 Burning Man Project	45-263	3273	Page 4
Part XIII- Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	N/A	
1 Total revenue, gains, and other support per audited financial statements	1		
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	#1000E0		
a Net unrealized gains on investments			
b Donated services and use of facilities	1534		
c Recoveries of prior year grants			
d Other (Describe in Part XIII.)	1000		
e Add lines 2a through 2d	2e		
3 Subtract line 2e from line 1			
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	1000		
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b.	4c		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p		2 NT/A	
1 Total expenses and losses per audited financial statements		I N/A	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	2000000		
a 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	20		
3 Subtract line 2e from line 1			
	3		
4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b			
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b.	4c		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		2.2	
Part XIII Supplemental Information			
	A D.A. Company	h I Ob. C	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	anv additio	o and 20; F nal informa	art v, tion.
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BAA	Schedul	e D (Form 9	90) 2012

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

Department of the Treasury Internal Revenue Service

Name of the organization

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

2012

Spen to Public Inspection

Employer identification number

Burning Man Project	45-2638273
Form 990, Part III, Line 4d - Other Program Services Description	
Cultivated and expanded a global network of communities that a	re committed to
applying the Ten Principles of Burning Man.	
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Director	rs, Etc.
Board members Will Roger Peterson and Nanci O. Peterson are a	married couple.
Board members Mercedes Martinez and Chris Weitz are a married	couple.
Form 990, Part VI, Line 11b - Form 990 Review Process	
Board members are provided an electronic "PDF" copy of the 990	for review and
comment prior to the board meeting when the Board votes about	approval of the
filing. The Form 990 was also reviewed by the non profit's le	gal counsel.
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Con	nflicts
Annual questionnaire of Board members, and inquiry as needed a	bout potential
conflicts of interest when new projects are approved by the Bo	ard.
Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top	Management
There is no CEO or Executive Director. The Board's Senior Execu	utive Committee, all
volunteers, has managed the organization during this year, the	Organization's first
year of operation. The Board will implement policies about con	mpensation of the CEO
and top management at the time the policies are needed.	·
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers &	& Key Employees
The Treasurer has been hired under an independent contractor ac	greement. Her
compensation is below that set for "key employees."	
None of the other employees have sufficient compensation to mee	et the definition of
"key employee." The Board will implement policies about comper	sation of key
employees at the time the policies are needed.	

2012 S	chedule C	) - Suppleme	ental Informa	ation	Page 1
lient BURNINGM	· · · · · · · · · · · · · · · · · · ·	Burning Man P	roject		45-263827
Form 990, Part IX, Line 11g Other Fees For Services					
		(A) <u>Total</u>	(B) Program <u>Services</u>	(C) Management & General	(D) Fund- raising
Consulting services Development consultan Event production	t	20,066. 20,000. 1,554. \$ 41,620.	20,066.		20,000. 1,554.
-	Total	\$ 41,620.	\$ 20,066.	\$ 0.	\$ 21,554.
				68	

2012	Federal Supporting Detail	Page 1
Client BURNINGM	Burning Man Project	45-263827
Board donations-unreaduriness donations-un- Foundations and other Board members - restrandividual gifts - refoundation grants - refoundations from busing Other public support-In-kind goods donated Trsfr-former fiscal	grants, etcunrestricted stricted restricted rs-unrestricted ricted estricted restricted restricted restricted for events(food/bvg) spons spon	\$ 69,123. 5,000. 122,475. 6,500. 5,000. 72,040. 15,500. 3,355. 100. 786. 181,510. 58,570.
	Total	