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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Inspection and ending A For the 2023 calendar year, or tax year beginning D Employer identification number Check if applicable: C Name of organization **METAFOUNDATION** Address change DBA POST CARBON INSTITUTE Name change 65-1208462 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Final return/ PO BOX 1143 541-566-8700 termin-ated 1,451,195. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended CORVALLIS, OR 97339 H(a) Is this a group return Applica-F Name and address of principal officer: PHILIP Yes X No for subordinates? pending PO BOX 1143, CORVALLIS, OR 97339 **H(b)** Are all subordinates included? Tax-exempt status: X = 501(c)(3) = 501(c)(insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.POSTCARBON.ORG H(c) Group exemption number **K** Form of organization: **X** Corporation Association L Year of formation: 2003 M State of legal domicile: OR Part I Summary Briefly describe the organization's mission or most significant activities: POST CARBON INSTITUTE LEADS THE Activities & Governance TRANSITION TO A MORE SUSTAINABLE, RESILIENT, AND EQUITABLE WORLD. oxdot if the organization discontinued its operations or disposed of more than 25% of its net assets. 8 Number of voting members of the governing body (Part VI, line 1a) 8 Number of independent voting members of the governing body (Part VI, line 1b) 4 8 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b Current Year 648,472. 1,419,521. Contributions and grants (Part VIII, line 1h) Revenue 0. 0. Program service revenue (Part VIII, line 2g) 1,139.5,848. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 14,193. 25,826. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 663,804 1,451,195. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 74,980. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 688,153. $70\overline{7,240}$ Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 215,985. 265,803. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,048,023. 904,138. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -240,334. 403,172. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 742,086. 1,156,393. 20 Total assets (Part X, line 16) 29,517. 40,652. 21 Total liabilities (Part X, line 26) 712,569. 115,741. Net assets or fund balances. Subtract line 21 from line 20. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign PHILIP JENSEN, CHIEF FINANCIAL OFFICER Here Type or print name and title Date PTIN Check X Print/Type preparer's name Preparer's signature if self-employed Paid KRISTEN GOSE, CPA 04/26/24 P00037098 ANDERSON GROUP CPAS, LLC Firm's EIN 93-1233035 Preparer Firm's name Use Only Firm's address 2165 NW PROFESSIONAL DR, STE 101

X Yes

Phone no. 541 - 757 - 2070

May the IRS discuss this return with the preparer shown above? See instructions

CORVALLIS, OR 97330

Form 990 (2023)

Par	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	POST CARBON INSTITUTE PROVIDES INDIVIDUALS, COMMUNITIES, BUSINESSES,
	AND GOVERNMENTS WITH THE RESOURCES NEEDED TO UNDERSTAND AND RESPOND TO
	THE INTERRELATED ECONOMIC, ENERGY, AND ENVIRONMENTAL CRISES THAT
	DEFINE THE 21ST CENTURY.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 623,420 • including grants of \$ 74,980 •) (Revenue \$)
	AWARENESS:
	THE AWARENESS PROGRAM AREA IS INTENDED TO REACH A BROAD AUDIENCE AND
	DELIVER FUNDAMENTAL INFORMATION PEOPLE NEED IN ORDER TO RECOGNIZE AND
	RESPOND TO THE INTERRELATED ENERGY, ENVIRONMENTAL, ECONOMIC, AND EQUITY
	CRISES OF MODERN TIMES. THIS PROGRAM AREA CONTAINS THE LARGEST
	COLLECTION OF PCI'S PROJECTS:
	- RESILIENCE.ORG IS THE LEADING ONLINE HUB FOR THE COMMUNITY
	RESILIENCE MOVEMENT, WHERE WE PUBLISH ORIGINAL ARTICLES AND REPUBLISH
	RELEVANT ARTICLES FROM OTHER SITES.
	- GENERAL COMMUNICATIONS IS OUR PROJECT TO DELIVER CONTENT TO OUR
	AUDIENCE THROUGH ONLINE EVENTS, SPEAKING ENGAGEMENTS, DISTRIBUTION OF
	NEWSLETTERS, SOCIAL MEDIA POSTS, MEDIA OUTREACH, AND RESPONSES TO
4b	(Code:) (Expenses \$ 247,248 • including grants of \$) (Revenue \$)
	UNDERSTANDING:
	THE UNDERSTANDING PROGRAM AREA IS INTENDED TO HELP THOSE WHO HAVE
	GAINED AWARENESS OF SUSTAINABILITY ISSUES TO ATTAIN MORE DEPTH OF
	KNOWLEDGE AND MORE CONFIDENCE IN WHAT THEY KNOW. PROJECTS INCLUDED IN
	THIS PROGRAM AREA:
	- LIMINALITY NETWORK IS A PROJECT THAT CONNECTS SELECTED INTERNATIONAL
	SUSTAINABILITY EXPERTS TO EXPLORE HOW HUMANITY CAN NAVIGATE THE
	INTERRELATED SOCIAL AND ECOLOGICAL CRISES DRIVEN BY ACCELERATING
	ENVIRONMENTAL AND SOCIAL BREAKDOWN OVER THE COMING DECADES.
	- PUBLICATIONS IS OUR PROJECT FOR PROVIDING WRITTEN MATERIAL IN
	FORMAL, IN-DEPTH FORMATS, SUCH AS BOOKS AND REPORTS.
	- THINK RESILIENCE IS PCI'S ONLINE COURSE AND FLAGSHIP RESOURCE FOR
4c	(Code:) (Expenses \$ 18,210 • including grants of \$) (Revenue \$
	ACTION:
	THE ACTION PROGRAM AREA IS ABOUT ENCOURAGING OUR CONSTITUENTS TO MOVE
	FROM THINKING AND LEARNING TO DOING. WE CURRENTLY HAVE ONE PROJECT IN
	THIS PROGRAM AREA:
	- THE TAKE ACTION SERIES IS OUR WEBINAR PROJECT WHICH PROVIDES
	INSPIRING EXAMPLES AND CONVERSATIONS ABOUT MEANINGFUL ACTIONS THAT CAN
	BE TAKEN TO ADDRESS THE E4 CRISES.
	HIGHLIGHTS OF THE ACTION PROGRAM AREA IN 2023 INCLUDE:
	- PRODUCTION OF TWO WEBINARS ABOUT (1) MOVING FROM WARNING ABOUT THE
	POLYCRISIS TO NAVIGATING IT AND (2) PROSPECTS FOR EMBRACING DEGROWTH AS
	AN ECONOMIC TRANSITION STRATEGY.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 888,878.
	Form 990 (2023)

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Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		х
_	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	- '-		
Ū	Schedule D, Part III	8		Х
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		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
	domestic government on rate ix, column (xy, into 1: " 100, complete contedito i, rate rand ii internationalistic			

Form 990 (2023)

Part IV	Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			Х
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
d	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?//f	200		
_	"Yes, " complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
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			7,7
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35.2		35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
-	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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
De	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			NI.
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

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Form **990** (2023)

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No					
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 8								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b							
	At any time during the calendar year, did the organization have an interest in, or a signature or other									
	financial account in a foreign country (such as a bank account, securities account, or other financial		4a		Х					
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х					
b										
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the									
	any contributions that were not tax deductible as charitable contributions?		6a		Х					
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts								
	were not tax deductible?		6b							
7	Organizations that may receive deductible contributions under section 170(c).									
а	$ Did the organization \ receive \ a payment \ in \ excess \ of \$75 \ made \ partly \ as \ a \ contribution \ and \ partly \ for \ goods \ and \ sense \ for \ goods $	vices provided to the payor?	7a		X					
b	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									
	to file Form 8282?	I .	7с		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control		7f		Х					
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained									
_	sponsoring organization have excess business holdings at any time during the year?		8							
9	Sponsoring organizations maintaining donor advised funds.		00							
a			9a 9b							
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:		90							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter:	100								
	Gross income from members or shareholders	11a								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	110								
-	amounts due or received from them.)	11b								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	•								
а	Is the organization licensed to issue qualified health plans in more than one state?		13a							
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	13b								
С	Enter the amount of reserves on hand	13c								
14a			14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune									
	excess parachute payment(s) during the year?		15		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		X					
_	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
	If "Yes," complete Form 6069.									

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Form 990 (2023)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	8								
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent 1b	8								
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?									
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х						
6	Did the organization have members or stockholders?	6		Х						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а		8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b		Х						
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 on Schedule O	9		Х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
	,		Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
12a	The state of the s	12a	Х							
b		12b	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	on Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
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?									
а	The organization's CEO, Executive Director, or top management official	15a	Х							
	Other officers or key employees of the organization	15b		Х						
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		İ							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		Х						
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 take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure		•	•						
17	List the states with which a copy of this Form 990 is required to be filed CA, OR									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c))	3)s onl	y) avail	able						
	for public inspection. Indicate how you made these available. Check all that apply.									
	X Own website X Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	and fina	ncial							
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records									
	THE ORGANIZATION - 541-566-8700									
	DO DOV 11/2 CODVATITE OD 07220		_							

Form **990** (2023)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

Check this box if neither the organization r	(B)				C)			(D)	(E)	(F)
Name and title	Average	/		Pos	itior			Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	than	h an	compensation	compensation	amount of
	week		cer an	d a d	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or di	# 왕			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		e e	ubeus		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	organizations below	ual tr	ional		yoldı	t con	L	1099-NEC)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organization o
(1) ASHER MILLER	40.00	_	_		_					
EXECUTIVE DIRECTOR		Х						88,574.	0.	16,396
(2) RICHARD HEINBERG	40.00							-		-
SECRETARY		Х		Х				94,892.	0.	0
(3) JASON BRADFORD	1.00									
PRESIDENT		Х		Х				0.	0.	0
(4) PHILIP JENSEN	1.00									
CHIEF FINANCIAL OFFICER		Х		Х				0.	0.	0
(5) CHUCK COLLINS	1.00									
DIRECTOR		Х						0.	0.	0
(6) JONI PRADED	1.00									
DIRECTOR		Х						0.	0.	0
(7) DAVID BLITTERSDORF	1.00							_	_	_
DIRECTOR		Х						0.	0.	0
(8) VICKI ROBIN	1.00							_	_	_
DIRECTOR		Х						0.	0.	0
(9) SHERRI MITCHELL	1.00									
DIRECTOR		Х						0.	0.	0
			_	\vdash		_	_			
		ł								
						\vdash				
		ł								
				\vdash		-	\vdash			
	1	ı	I	ı	I	1	ı	I		

Form 990 (2023)

	990 (2023) DBA POST									65-120	846	2 F	age 8
Pai	t VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	, and	d Hi	ghe	st C	ompensated Employe	es (continued)			
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below	box,	not cl unle	ss pe	ition more rson i irecto	Highest compensated self-	n an	(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	co oi a	(F) Estimat amount other mpens from th rganiza nd rela ganizat	ation ne tion ted
		line)	pul	Inst	0#fi	Key	Hig em	젼					
	Subtotal								183,466.	0	•	16,3	96.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A							0. 183,466.	0	•	16,3	0.
2	Total number of individuals (including but n compensation from the organization								<u> </u>	,000 of reportable			0
3	Did the organization list any former officer,	director trust	20 k	/OV 6	mnl	lovo	0 Or	hio	shoet componented omr	alovoo on		Yes	No
	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	uch individual									. 3		Х
4	and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	for such individual		. 4		х
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com					-		elat	ed organization or indiv	dual for services	. 5		Х
1	tion B. Independent Contractors Complete this table for your five highest co	•	-								nsatior	n from	
	the organization. Report compensation for (A)					vith (or w	ithir	(B)			(C)	
	Name and business	address	NC	ONE	<u> </u>				Description of s	ervices	Comp	ensatio	on
								\dashv					
								\dashv					
								\dashv					
2	Total number of independent contractors (i	-	ot lir	nite	d to	_	_	sted	d above) who received m	nore than			
	\$100,000 of compensation from the organiz	zation)				Forn	n 990	(2023)

Form	า 99	90 (:		A POST			N ON INSTI	TUTE		65-1208	462 Page 9
Pa											<u> </u>
			Check if Schedule O	contains a	respo	nse	or note to anv li	ne in this Part VIII			
			Check if Schedule O		·		,	(A) Total revenue	(B) Related or exempt function revenue	Unrelated	Révenue excluded
nts nts	1	а	Federated campaigns		1a						
ar our			Membership dues		1b						
s, (Am		С	Fundraising events		1c						
Giff		d	Related organizations		1d						
JS,		е	Government grants (contr	ributions)	1e						
er S		f	All other contributions, gifts,			_	440 504				
듗된			similar amounts not included		-		419,521.				
Contributions, Gifts, Grants and Other Similar Amounts		_	Noncash contributions included in		1g \$			1 410 501			
a C		h	Total. Add lines 1a-1f					1,419,521.			
•	١.						Business Code				
vice	2	a				_					
Ser		b				_					
an Ve		d									
Program Service Revenue		e				_					
Pro		f	All other program service	revenue		_					
			Total. Add lines 2a-2f								
	3		Investment income (include								
			other similar amounts)					5,848.			5,848.
	4	ļ	Income from investment of	of tax-exen	npt bo	nd p	roceeds				
	5	,	Royalties								
				I	i) Real		(ii) Personal				
	6		Gross rents								
			Less: rental expenses	6b							
			Rental income or (loss)	[6c]							
	၂ ,		Net rental income or (loss Gross amount from sales of		ecuriti		(ii) Other				
	'	а	assets other than inventory	7a	Count		(ii) Othor				
		h	Less: cost or other basis								
ne		-	and sales expenses	7b							
venue		С	Gain or (loss)	7c							
æ			Net gain or (loss)								
Other Re	8	а	Gross income from fundraisi	ng events (r	not						
ŏ			including \$		of						
			contributions reported on	•							
			Part IV, line 18			8a					
			Less: direct expenses			8b					
	١.		Net income or (loss) from				 I				
	9	а	Gross income from gamin	-		l					
		L	Part IV, line 19			9a 9b		1			
			Less: direct expenses Net income or (loss) from								
	10		Gross sales of inventory,			<u>`</u>	<u> </u>				
	.	•	and allowances			10a					
		b	Less: cost of goods sold			10b					
			Net income or (loss) from								
<u>s</u>							Business Code				
eor re	11	а	APPEARANCE AN			S	900009	22,773.			
Miscellaneous Revenue		b	PUBLISHING AC	LIATL	. Y	_	511199	3,053.	3,053.		
Sce Re		С	All II			_					
₩		d	All other revenue								

25,826. 1,451,195.

e Total. Add lines 11a-11d

25,826.

Form 990 (2023)

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons				<u>X</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	74 000	- 4 000		
	individuals. See Part IV, lines 15 and 16	74,980.	74,980.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	100 000	4.55 004	4.5.005	45.004
	persons described in section 4958(c)(3)(B)	199,862.	167,331.	17,307.	15,224 33,591
7	Other salaries and wages	442,514.	353,707.	55,216.	33,591
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	14 005	14 004	224	
9	Other employee benefits	14,895.	14,094.	801.	2 600
10	Payroll taxes	49,969.	40,781.	5,496.	3,692
11	Fees for services (nonemployees):				
а	Management				
b	Legal	10 500		10 500	
	Accounting	12,500.		12,500.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	100 510	105 206	1 205	026
	column (A), amount, list line 11g expenses on Sch 0.)	197,517.	195,386.	1,295.	836
12	Advertising and promotion	900.	900.	7 000	<u></u>
13	Office expenses	8,225.	1,154.	7,002.	69
14	Information technology	3,466.	2,898.	343.	225
15	Royalties	2 006	2 575	207	204
16	Occupancy	3,086.	2,575. 11,523.	307.	204
17	Travel	13,247.	11,523.	788.	936
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	709.	709.		
19	Conferences, conventions, and meetings	709.	709.		
20	Interest				
21	Payments to affiliates	1,235.	1,031.	132.	72
22	Depreciation, depletion, and amortization	5,413.	4,518.	545.	350
23	Insurance	5,413.	4,318.	343.	330
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.) SUPPLIES	19,505.	17,291.	1,280.	934
a	ольттер	19,303.	11,491.	1,200.	334
b					
C					
d	All sales a superior				
	All other expenses	1,048,023.	888,878.	103,012.	56,133
25	Total functional expenses. Add lines 1 through 24e	1,040,043.	000,0/0.	103,012.	30,133
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)				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2023)

Part X | Balance Sheet

Part X	Balance Sheet					
	Check if Schedule O contains a response or	note to any lir	ne in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			118,580.	1	193,275
2				483,547.	2	437,823
3	Pledges and grants receivable, net		129,469.	3	510,756	
4	Accounts receivable, net		4			
5	Loans and other receivables from any currer					
	trustee, key employee, creator or founder, su					
	controlled entity or family member of any of		5			
6	Loans and other receivables from other disq					
	under section 4958(f)(1)), and persons descr	bed in section	n 4958(c)(3)(B)		6	
2 7	Notes and loans receivable, net			7		
Assets 4 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Inventories for sale or use				8	
ž 9				8,490.	9	10,104
10 8	a Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D	10a	17,414.			
l t	b Less: accumulated depreciation		12,979.	1,000.	10c	4,435
11	Investments - publicly traded securities			11		
12	Investments - other securities. See Part IV, li		12			
13	Investments - program-related. See Part IV, I		13			
14	Intangible assets		14			
15	Other assets. See Part IV, line 11			1,000.	15	(
16	Total assets. Add lines 1 through 15 (must e			742,086.	16	1,156,393
17	Accounts payable and accrued expenses		29,517.	17	40,652	
18	Grants payable		18			
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Comple	te Part IV of S	Schedule D		21	
ദ്ര 22	Loans and other payables to any current or	ormer officer,	director,			
	trustee, key employee, creator or founder, su	bstantial con	tributor, or 35%			
	controlled entity or family member of any of	hese persons			22	
23	Secured mortgages and notes payable to ur	related third p	oarties		23	
24	Unsecured notes and loans payable to unrel	ated third part	ties		24	
25	Other liabilities (including federal income tax	payables to r	elated third			
	parties, and other liabilities not included on l	nes 17-24). Co	omplete Part X			
	of Schedule D				25	
26	Total liabilities. Add lines 17 through 25			29,517.	26	40,652
ر ا	Organizations that follow FASB ASC 958,	check here	X			
<u> </u>	and complete lines 27, 28, 32, and 33.					
27				586,703.	27	499,644
28	Net assets with donor restrictions			125,866.	28	616,097
Ĭ	Organizations that do not follow FASB AS	C 958, check	here			
-	and complete lines 29 through 33.					
29	Capital stock or trust principal, or current fur				29	
30	Paid-in or capital surplus, or land, building, o				30	
27 28 29 20 27 28 29 30 31 32 32	Retained earnings, endowment, accumulate	d income, or c	other funds		31	
32	Total net assets or fund balances			712,569.	32	1,115,741
33	Total liabilities and net assets/fund balances			742,086.	33	1,156,393

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Form 990 (2023)

METAFOUNDATION
DBA POST CARBON INSTITUTE

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		1,45		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,04		
3	Revenue less expenses. Subtract line 2 from line 1	3			72.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	71	2,5	69.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,11	5,7	41.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	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 reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	iedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2023)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

METAFOUNDATION Name of the organization

DBA POST CARBON INSTITUTE

Employer identification number

65-1208462 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 12, 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 (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(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 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). 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 agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	
	organization, check this box and stop						<u></u>
	ction C. Computation of Publ						
	Public support percentage for 2023 (I					14	<u>%</u>
	Public support percentage from 2022					15	<u>%</u>
16a	33 1/3% support test - 2023. If the o	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the o						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact		·	•	•	· ·	
	meets the facts-and-circumstances te	-		*	-	47	
b	10% -facts-and-circumstances test	_				•	10% or
	more, and if the organization meets the						
40	organization meets the facts-and-circu						
18	Private foundation. If the organization	n aid not check a	box on line 13, 16	a, 16b, 1/a, or 17	D, CNECK this box a		S

Schedule A (Form 990) 2023

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	qualify under the tests listed b	elow, please comp	piete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(a) 2021	(d) 2022	(a) 2022	(f) Total
	Gifts, grants, contributions, and	(a) 2019	(D) 2020	(c) 2021	(a) 2022	(e) 2023	(I) Total
'	membership fees received. (Do not						
	include any "unusual grants.")	838,791.	927,606.	1120399.	648,472.	1419521.	4954789.
•		030,731.	J21,000.	1120377.	040,472.	1417521.	40047001
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	838,791.	927,606.	1120399.	648,472.	1419521.	4954789.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons		106,005.	139,254.	94,998.		340,257.
k	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						0.
	Add lines 7a and 7b		106,005.	139,254.	94,998.		340,257.
	Public support. (Subtract line 7c from line 6.)						4614532.
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(a) 2019 838, 791.	(b) 2020 927,606.	(c) 2021 1120399.	648,472.	(e) 2023 1419521.	4954789.
	Gross income from interest,	-	-		-		
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources	2,074.	1,450.	648.	1,139.	5,848.	11,159.
Ł	Unrelated business taxable income	,	, , , , , , , , , , , , , , , , , , ,		,	·	
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b	2,074.	1,450.	648.	1,139.	5,848.	11,159.
	Net income from unrelated business	,	,		,	·	<u> </u>
	activities not included on 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						
10	assets (Explain in Part VI.)	840,865.	929,056.	1121047.	649,611.	1425369.	4965948.
							·
14	First 5 years. If the Form 990 is for the	ie organization s til				. , . , .	ion,
<u>S</u>	check this box and stop here ction C. Computation of Publ	ic Support Pe					<u></u>
	-			actumen (f))		15	92.92 %
	Public support percentage for 2023 (I Public support percentage from 2022					16	00 56
	ction D. Computation of Inves					16	88.56 %
	<u> </u>			no 10 polymn (f)		17	.22 %
17							40
18	Investment income percentage from 2					18	
198	a 33 1/3% support tests - 2023. If the						X
k	more than 33 1/3%, check this box as 33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

1		Yes	No
	1		
	_		
	2		
	3a		
	01		
	3b		
	3с		
	4a		
	44		
	4b		
	4c		
	5a		
	5b		
	5c		
	5C		
	_		
	6		
	7		
	0		
	8		
	9a		
	9b		
	an		
	9с		
	10a		
	iva		
	10b		
dule	A (Forr	n 990)	2023

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

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust or	n Nov. 20, 1970 (explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complet	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functions	ally integra	ted Type III supporting org	anization (see

Schedule A (Form 990) 2023

instructions).

Schedule A (Form 990) 2023

Par	t V	Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _{(continu}	ued)	
Section	on D -	- Distributions		·		Current Year
1	Amou	unts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amou	unts paid to perform activity that directly furthers exemp				
	organ	izations, in excess of income from activity		2		
3	Admii	nistrative expenses paid to accomplish exempt purpose	ns	3		
4	Amou	ints paid to acquire exempt-use assets			4	
5	Qualit	fied set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
		distributions (describe in Part VI). See instructions.	·		6	
7	Total	annual distributions. Add lines 1 through 6.			7	
8	Distril	butions to attentive supported organizations to which the	he organization is responsiv	e		
	(provi	de details in Part VI). See instructions.			8	
9	Distril	butable amount for 2023 from Section C, line 6			9	
10	Line 8	3 amount divided by line 9 amount			10	
		-	(i)	(ii)		(iii)
Section	on E -	Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	ns	Distributable Amount for 2023
1	Distril	outable amount for 2023 from Section C, line 6				
2	Unde	rdistributions, if any, for years prior to 2023 (reason-				
	able o	cause required - explain in Part VI). See instructions.				
3	Exces	ss distributions carryover, if any, to 2023				
а	From	2018				
b	From	2019				
С	From	2020				
d	From	2021				
е	From	2022				
f	Total	of lines 3a through 3e				
g	Applie	ed to underdistributions of prior years				
h	Applie	ed to 2023 distributable amount				
i_	Carry	over from 2018 not applied (see instructions)				
j	Rema	ainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distril	outions for 2023 from Section D,				
	line 7	: \$				
а	Applie	ed to underdistributions of prior years				
b	Applie	ed to 2023 distributable amount				
С	Rema	ainder. Subtract lines 4a and 4b from line 4.				
5	Rema	aining underdistributions for years prior to 2023, if				
	any. S	Subtract lines 3g and 4a from line 2. For result greater				
	than z	zero, explain in Part VI. See instructions.				
6	Rema	aining underdistributions for 2023. Subtract lines 3h				
	and 4	b from line 1. For result greater than zero, explain in				
	Part \	VI. See instructions.				
7	Exce	ss distributions carryover to 2024. Add lines 3j				
	and 4	c.				
8	Break	down of line 7:				
а	Exces	ss from 2019				
b	Exces	ss from 2020				
С	Exces	ss from 2021				
d	Exces	ss from 2022				
	Гист	oo from 2002				

Schedule A (Form 990) 2023

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A

Payments from Disqualified Persons Included on Part III, Line 7a

2023

** Do Not File **

*** Not Open to Public Inspection ***

Payer's Name	2019 Amount	2020 Amount	2021 Amount	2022 Amount	2023 Amount
PHILIP JENSEN	0.	106,005.	139,254.	94,998.	0.
	+				
	+				
Total to Schedule A, Part III, Line 7a		106,005.	139,254.	94,998.	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Inspection

Name of the organization

METAFOUNDATION

DBA POST CARBON INSTITUTE

Employer identification number 65-1208462

Par			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(1) 201101 1111001 1111111	(2) - 2.122 2.12 2.12
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	L	ed funds
3	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
Ü	for charitable purposes and not for the benefit of the donor of		
Par			
1	Purpose(s) of conservation easements held by the organizat		
·	Preservation of land for public use (for example, recrea		a historically important land area
	Protection of natural habitat		a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic str		
	Number of conservation easements included on line 2c acqu		
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year	, , ,	
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easements during the year
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	ion easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footi	note to the organization's financial stateme	ents that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections o		ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement a	ind balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in fu	rtherance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these item	ns.
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and I	palance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
			_
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		\$
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2023

332051 09-28-23

Schedule D (Form 990) 202

	t III Organizations Maintaining C	Collections of A			easures.	or Othe	er Simil	ar Asse	ts (contin		age Z
3	Using the organization's acquisition, accessi								•	/	
_	collection items (check all that apply).	o., a o o	,								
а	Public exhibition d Loan or exchange program										
b	Scholarly research			Other	nango progn	u					
c	Preservation for future generations	`									
4	Provide a description of the organization's co	ollections and expla	in how th	nev further t	he organizati	ion's exe	mpt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit of										
_	to be sold to raise funds rather than to be many								Yes		No
Par	t IV Escrow and Custodial Arran										
	reported an amount on Form 990, Pa			Ü				,	,		
1a	Is the organization an agent, trustee, custod	ian, or other interme	ediary for	contribution	ns or other a	ssets not	t included	t			
	on Form 990, Part X?		-						Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able:							
	-	•							Amount		
С	Beginning balance						1c				,
	Additions during the year										,
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F							<u></u>	Yes		No
	If "Yes," explain the arrangement in Part XIII.	Check here if the e	xplanatio	n has been	provided in	Part XIII					
Par	t V Endowment Funds Complete if		swered "	Yes" on Fo							
		(a) Current year	(b) P	rior year	(c) Two yea	rs back	(d) Three	years back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С		%									
	The percentages on lines 2a, 2b, and 2c sho	•									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administe	ered for t	he		г	V I	N.
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)	-	
	(ii) Related organizations?										
b	If "Yes" on line 3a(ii), are the related organiza								3b		
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owment	runas.							
rai	Complete if the organization answere		O Part IV	/ lina 11a 9	Saa Form 991) Dart Y	lina 10				
	<u>-</u>			•				-d	(d) Dool	. volu	
	Description of property	(a) Cost or o			or other (other)		ccumulate preciation		(d) Book	value	5
10	Land	<u> </u>		Dasis	(501101)	ue,	J. COIALIOI				
	Land										
	Buildings Leasehold improvements										
				1	7,414.		12,9	79.		. 4	35.
	Equipment Other				. ,		,_			- , -	
е	Other	[I			

Schedule D (Form 990) 2023

4,435.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

METAFOUNDATION

	RBON INSTITUT	'E 6:	o-1208462 _{Page} 3
Part VII Investments - Other Securities	5 000 D 1 11 / 11		
Complete if the organization answered "Yes"		•	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1)	·		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	o/ (D)\		
Total. (Column (b) must equal Form 990, Part X, line 15, column Y Other Liabilities)I. (Б))		
	on Form 000 Dort IV line	11 av 11f Can Form 000 Dort V line 0	ıE
Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, line	The of Th. See Form 990, Part X, line 2	
"			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, co	ol. (B))		

Schedule D (Form 990) 2023

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

	rt XI Reconciliation of Revenue per Audited Financia	ii Otateilleilts With Neven	•	
	Complete if the organization answered "Yes" on Form 990, Part	t IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statemen	ts	1	1,451,195.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	5			
b	Donated services and use of facilities	2b		
С	1 7 0			
d	Other (Describe in Part XIII.)	2d		
е	• • • • • • • • • • • • • • • • • • • •			0.
3	Subtract line 2e from line 1		3	1,451,195.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	, , , ,			
b	Other (Describe in Part XIII.)	4b		•
С	Add lines 4a and 4b			0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			1,451,195.
Pai	rt XII Reconciliation of Expenses per Audited Financi	-	ises per Retu	rn
	Complete if the organization answered "Yes" on Form 990, Part			1 040 000
1	Total expenses and losses per audited financial statements		1	1,048,023.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а				
b				
С				
d	(,	•		0
_	• • • • • • • • • • • • • • • • • • • •			0. 1,048,023.
3	Subtract line 2e from line 1		3	1,040,023.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1		
a	, , , ,			
b	A 11P 4 14I		4-	0.
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I,			1,048,023.
		IIIIe 10.)		1,040,023
	rt XIIII Supplemental Information		<u> </u>	
	rt XIII Supplemental Information	a and 1: Part IV lines 1h and 2h: E		Y line 2: Part YI
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi				X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1			X, line 2; Part XI,

Schedule D (Form 990) 2023

SCHEDULE F (Form 990)

Name of the organization

METAFOUNDATION

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

2023

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Forms

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number

DB.	A POST CARBON	INSTITU	TE			65-120846	2
Pa	rt I General Info	rmation on A	ctivities Ou	tside the United States. Comple	ete if the organ	nization answered "Y	es" on
	Form 990, Part I\	/, line 14b.					
1	For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gra	ants and other	assistance,	
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	e grants or ass	istance?	Yes X No
2	For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of it	s grants and o	ther assistance outs	side the
	United States.			· ·	· ·		
3		he following Parl	I. line 3 table ca	an be duplicated if additional space is i	needed.)		
	(a) Region			(d) Activities conducted in the region		vity listed in (d)	(f) Total
		offices	emplovees.	(by type) (such as, fundraising, pro-		gram service,	expenditures
		in the region	agents, and independent	gram services, investments, grants to		e specific type	for and
			contractors	recipients located in the region)		(s) in the region	investments in the region
			in the region				in the region
	OPE (INCLUDING						
ICE:	LAND & GREENLAND)	0	0				74,980.
<u> </u>	Cultitatal	0	0				74,980.
	Subtotal		<u> </u>				/4,980.
b	Total from continuation		_				_
	sheets to Part I	0	0				0.
С	Totals (add lines 3a	_	_				74 090

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

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		UNITED KINGDOM		74,980.	WIRE TRANSFER	0.		FMV
				,				

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

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

METAFOUNDATION 65-1208462 DBA POST CARBON INSTITUTE

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

Part III can be duplicated if a	dditional space is need						
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
							lulo E (Eorm 990) 2023

Page 3

Schedule F (Form 990) 2023 I Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	☐ Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

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

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

METAFOUNDATION
DBA POST CARBON INSTITUTE

Employer identification number 65-1208462

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

- RESEARCH, REFLECTION, AND REPORTING (3R) IS OUR PROJECT TO PRODUCE

 AND PROMOTE ARTICLES THAT EXPRESS PCI'S VIEWS ON SUSTAINABILITY TOPICS,

 ENERGY, COMMUNITY RESILIENCE, AND CURRENT EVENTS. IT ALSO INCLUDES

 KEEPING OURSELVES INFORMED OF EMERGING CONCEPTS.
- PODCASTS IS OUR PROJECT FOR DELIVERING CONTENT DEVELOPED FOR
 LISTENERS. IN 2023 WE PRODUCED EPISODES FOR THREE PODCASTS: CRAZY TOWN,
 WHAT COULD POSSIBLY GO RIGHT?, AND HOLDING THE FIRE.

HIGHLIGHTS OF THE AWARENESS PROGRAM AREA IN 2023 INCLUDE:

- PUBLICATION OF APPROXIMATELY 28 ARTICLES PER WEEK ON RESILIENCE.ORG.
- PLANNING AND DEVELOPMENT WORK ON RESILIENCE+, A PROGRAM TO PROVIDE A

 DEEPER EXPERIENCE (UNDERSTANDING AND ACTION) FOR VISITORS TO

 RESILIENCE.ORG.
- RELEASE OF THE FIFTH SEASON (15 FULL EPISODES AND 10 BONUS EPISODES)

 OF THE CRAZY TOWN PODCAST, WITH OVER 407,000 TOTAL DOWNLOADS OF ALL

 EPISODES SINCE THE LAUNCH IN 2019, AND AN 11% INCREASE IN THE AVERAGE

 NUMBER OF EPISODE DOWNLOADS OVER THE FOURTH SEASON.
- RELEASE OF 12 EPISODES OF THE HOLDING THE FIRE: INDIGENOUS VOICES ON
 THE GREAT UNRAVELING PODCAST, WITH OVER 17,000 DOWNLOADS OF ALL
 EPISODES SINCE THE LAUNCH IN OCTOBER 2023.
- RELEASE OF 9 EPISODES OF THE WHAT COULD POSSIBLY GO RIGHT? PODCAST,
 WITH OVER 230,000 TOTAL DOWNLOADS SINCE ITS RELEASE IN 2020, AND A 4%
 INCREASE IN AVERAGE NUMBER OF EPISODE DOWNLOADS FROM 2022 TO 2023.
 - DELIVERY OF 22 PRESENTATIONS/INTERVIEWS BY PCI STAFF.

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

Schedule O (Form 990) 2023

Name of the organization METAFOUNDATION
DBA POST CARBON INSTITUTE

Employer identification number 65-1208462

- PUBLICATION OF 25 TOTAL ARTICLES BY PCI STAFF, WITH 15 PLACED IN

EXTERNAL MEDIA OUTLETS.

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

DEEP-DIVE EDUCATION.

HIGHLIGHTS OF THE UNDERSTANDING PROGRAM AREA IN 2023 INCLUDE:

- GROWTH OF THE LIMINALITY NETWORK TO 68 MEMBERS, CONSISTING OF

 DIVERSE THINKERS, PRACTITIONERS, AND INFLUENCERS (INCLUDING NGO AND

 GRASSROOTS LEADERS, AND CIVIL SERVICE, GOVERNMENT, AND ACADEMIC

 PROFESSIONALS), INCLUDING HOSTING FIVE ONLINE EVENTS AND ORGANIZING 3

 WORKING GROUPS.
- RELEASE OF THE REPORT WELCOME TO THE GREAT UNRAVELING: NAVIGATING
 THE POLYCRISIS OF ENVIRONMENTAL AND SOCIAL BREAKDOWN, WHICH ACCRUED
 OVER 9,000 DOWNLOADS.
- REGISTRATION OF 1,448 PARTICIPANTS IN THINK RESILIENCE.

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

- AVERAGE OF 560 REGISTRANTS PER WEBINAR.

FORM 990, PART VI, SECTION A, LINE 8B:

THE BOARD'S ACTIONS ARE DOCUMENTED AND THE MINUTES ARE APPROVED BY THE BOARD. NO OTHER COMMITTEE ACTS ON BEHALF OF THE BOARD.

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

THE 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND PROVIDED TO EACH BOARD MEMBER FOR THEIR REVIEW PRIOR TO THE FINAL REVIEW AND SIGNING BY THE CFO.

Schedule O (Form 990) 2023	Page 2
Name of the organization METAFOUNDATION DBA POST CARBON INSTITUTE	Employer identification number 65-1208462
FORM 990, PART VI, SECTION B, LINE 12C:	
BOTH BOARD MEMBERS AND STAFF ARE REQUIRED EACH YEAR TO RE	VIEW THE CONFLICT
OF INTEREST POLICY AND ATTEST THAT THEY ARE IN COMPLIANCE	I.
FORM 990, PART VI, SECTION B, LINE 15A:	
THE BOARD CONSIDERS COMPENSATION PAID BY ORGANIZATIONS OF	A SIMILAR SIZE
AND PURPOSE AND GEOGRAPHIC AREA. THEY MAY ALSO CONSIDER O	COMPENSATION
SURVEYS BY 3RD PARTIES. THE EXECUTIVE DIRECTOR'S COMPENSA	ATION WAS REVIEW IN
ACCORDANCE WITH THIS POLICY.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S FINANCIAL STATEMENTS AND 990 ARE POSTE	D ON ITS WEBSITE.
GOVERNING DOCUMENTS, INCLUDING THE CONFLICT OF INTEREST F	OLICY, ARE
AVAILABLE IN THE ORGANIZATION'S OFFICE.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
WEB PROGRAMING AND MAINTENANCE:	
PROGRAM SERVICE EXPENSES	20,367.
MANAGEMENT AND GENERAL EXPENSES	1,101.
FUNDRAISING EXPENSES	712.
TOTAL EXPENSES	22,180.
	_
CONTRACTED PROGRAM SERVICES:	
PROGRAM SERVICE EXPENSES	171,169.
MANAGEMENT AND GENERAL EXPENSES	194.
FUNDRAISING EXPENSES	124.
TOTAL EXPENSES	171,487.

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
1	THINK PAD L420	08/21/12	SL	3.00	:	16	629.				629.	629.		0.	629.
2	LENOVO	08/01/16	SL	3.00	:	16	584.				584.	584.		0.	584.
3	ASUS PRO	08/02/18	SL	3.00	:	16	903.				903.	903.		0.	903.
4	ASUS PRO	08/01/18	SL	3.00	:	16	860.				860.	860.		0.	860.
5	MACBOOK AIR	11/27/18	SL	3.00	:	16	1,242.				1,242.	1,242.		0.	1,242.
6	MACBOOK PRO	08/30/19	SL	3.00	í	16	1,500.				1,500.	4,500.		0.	4,500.
7	IPAD	08/21/21	SL	3.00	:	16	499.				499.	499.		0.	499.
8	ASUS ZENBOOK PRO	11/02/22	SL	3.00	:	16	1,200.				1,200.	200.		400.	600.
9	MACBOOK PRO	01/05/23	SL	3.00	:	16	1,529.				1,529.			510.	510.
10	MACBOOK PRO	09/13/23	SL	3.00	:	16	1,949.				1,949.			325.	325.
11	HP DRAGONFLY	12/22/23	SL	3.00	:	16	1,192.				1,192.			0.	
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						12,087.				12,087.	9,417.		1,235.	10,652.
	* GRAND TOTAL 990 PAGE 10 DEPR						12,087.				12,087.	9,417.		1,235.	10,652.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						7,417.			0.	7,417.	9,417.			9,817.
	ACQUISITIONS						4,670.			0.	4,670.	0.			835.

328111 04-01-23

⁽D) - Asset disposed

^{*} ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						12,087.			0.	12,087.	9,417.			10,652.
	ENDING ACCUM DEPR											10,652.			
	ENDING BOOK VALUE											1,435.			

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - METAFOUNDATION

DBA POST CARBON INSTITUTE

					-		DDA		CHILDON IN				
Asset No.	Description	Dat Acqui	e red	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	MACHINERY & EQUIPMENT												
1	THINK PAD L420	0821	12	SL	3.00	16	629.			629.	629.		0.
2	LENOVO	0801	16	SL	3.00	16	584.			584.	584.		0.
3	ASUS PRO	0802	2 18	SL	3.00	16	903.			903.	903.		0.
4	ASUS PRO	0801	18	SL	3.00	16	860.			860.	860.		0.
5	MACBOOK AIR	1127	7 18	SL	3.00	16	1,242.			1,242.	1,242.		0.
6	MACBOOK PRO	0830	19	SL	3.00	16	1,500.			1,500.	4,500.		0.
7	IPAD	0821	L 21	SL	3.00	16	499.			499.	499.		0.
8	ASUS ZENBOOK PRO	1102	222	SL	3.00	16	1,200.			1,200.	200.		400.
9	MACBOOK PRO	0105	23	SL	3.00	16	1,529.			1,529.			510.
10	MACBOOK PRO	0913	323	SL	3.00	16	1,949.			1,949.			325.
11		1222	223	SL	3.00	16	1,192.			1,192.			0.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPM						12,087.		0.	12,087.	9,417.		1,235.
	* GRAND TOTAL 990 PAGE 10 DEPR						12,087.		0.	12,087.	9,417.		1,235.
	CURRENT YEAR ACTIVITY												
	BEGINNING BALANCE						7,417.		0.	7,417.	9,417.		
	ACQUISITIONS						4,670.		0.	4,670.	0.		

328102 04-01-23

⁽D) - Asset disposed

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - METAFOUNDATION

DRA	POST	CARRON	TNSTTTUTE

	-						1001	CHRIDON IN				
Asset No.	Description	Date Acquire	d Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	DISPOSITIONS					0.		0.	0.	0.		
	ENDING BALANCE					12,087.		0.	12,087.	9,417.		
	11-23											