Form **990** Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 **2000** Open to Public Inspection

A For the 2000 calendar year, OR tax year period beginning SEP 1, 2000 and ending AUG 31, 2001

B Check if applicable: ☐ Change of address ☐ Change of name ☐ Initial return ☐ Final return ☐ Amended return (use also for state reporting)

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: L.S.B. LEAKEY FDTN. FOR RESEARCH RELATED TO HUMAN ORIGINS, BEHAVIOR AND SURVIVAL

Number and street (or P O box if mail is not delivered to street address): P.O.BOX 29346 PRESIDIO BLDG 1002A O'REIL | Room/suite

City or town, state or country, and ZIP: SAN FRANCISCO, CA 94129

D Employer identification number: 95-2536475

E Telephone number: (510) 834-3636

F Check ▶ ☐ if application pending

G Organization type (check only one) ▶ [X] 501(c) (3) ◀ (insert no) ☐ 527 OR ☐ 4947(a)(1)

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)**

(H and I are not applicable to section 527 orgs)

H(a) Is this a group return for affiliates? ☐ Yes [X] No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes [X] No

I Enter 4 digit group exemption no (GEN) ▶

J Accounting method ☐ Cash [X] Accrual ☐ Other (specify) ▶

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data **Some states require a complete return**

L Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ) ▶ ☐

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received			
	a	Direct public support	1a	485,362.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	**Total** (add lines 1a through 1c) (cash $ 485,362. noncash $)		1d	485,362.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	
	3	Membership dues and assessments		3	32,396.
	4	Interest on savings and temporary cash investments		4	
	5	Dividends and interest from securities		5	837,851.
	6a	Gross rents	6a		
	b	Less rental expenses	6b		
	c	Net rental income or (loss) (subtract line 6b from line 6a)		6c	
	7	Other investment income (describe ▶)		7	

	(A) Securities		(B) Other
8a Gross amount from sale of assets other than inventory	3,612,463.	8a	
b Less cost or other basis and sales expenses	3,333,865.	8b	
c Gain or (loss) (attach schedule)	278,598.	8c	
	STMT 1		STMT 2

	8d	Net gain or (loss) (combine line 8c, columns (A) and (B))		8d	278,598.
	9	Special events and activities (attach schedule)			
	a	Gross revenue (not including $ of contributions reported on line 1a)	9a		
	b	Less direct expenses other than fundraising expenses	9b		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)		9c	
	10a	Gross sales of inventory, less returns and allowances	10a		
	b	Less cost of goods sold	10b		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c	
	11	Other revenue (from Part VII, line 103)		11	35,216.
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	1,669,423.
Expenses	13	Program services (from line 44, column (B))		13	1,100,574.
	14	Management and general (from line 44, column (C))		14	317,797.
	15	Fundraising (from line 44, column (D))		15	
	16	Payments to affiliates (attach schedule)		16	
	17	**Total expenses** (add lines 16 and 44, column (A))		17	1,418,371.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)		18	251,052.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	17,584,215.
	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3		20	<2,841,483.>
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	14,993,784.

FILMED JAN 29 2002

RECEIVED JAN 6 2002 OGDEN, UT

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) cash $650,741. noncash $	22	650,741.	650,741.	STATEMENT 7	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24	9,396.	9,396.	STATEMENT 8	
25 Compensation of officers, directors, etc	25	118,458.	75,610.	42,848.	0.
26 Other salaries and wages	26	87,196.	55,656.	31,540.	
27 Pension plan contributions	27				
28 Other employee benefits	28	14,108.	5,092.	9,016.	
29 Payroll taxes	29	16,191.	10,349.	5,842.	
30 Professional fundraising fees	30				
31 Accounting fees	31	52,597.		52,597.	
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34	14,334.	9,981.	4,353.	
35 Postage and shipping	35				
36 Occupancy	36	81,447.	48,868.	32,579.	
37 Equipment rental and maintenance	37	16,641.	11,641.	5,000.	
38 Printing and publications	38	35,964.	28,772.	7,192.	
39 Travel	39	86,084.	40,149.	45,935.	
40 Conferences, conventions, and meetings	40				
41 Interest	41	2,955.	1,773.	1,182.	
42 Depreciation, depletion, etc (attach schedule)	42	17,224.	10,234.	6,990.	
43 Other expenses (itemize)					
a	43a				
b	43b				
c	43c				
d	43d				
e SEE STATEMENT 4	43e	215,035.	142,312.	72,723.	
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,418,371.	1,100,574.	317,797.	0.

Reporting of Joint Costs Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? ▶ ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs $ ________, (ii) the amount allocated to Program services $ ________, (iii) the amount allocated to Management and general $ ________, and (iv) the amount allocated to Fundraising $

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? ▶ SEE STATEMENT 5

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

		Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
a	SEE STATEMENT 6 (Grants and allocations $ 650,741.)	1,100,574.
b	(Grants and allocations $)	
c	(Grants and allocations $)	
d	(Grants and allocations $)	
e	Other program services (attach schedule) (Grants and allocations $)	
f	**Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	1,100,574.

Part IV Balance Sheets

Note *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only*

Section	Line	Description	Sub-line	Sub-amount	(A) Beginning of year	Line	(B) End of year
Assets	45	Cash - non-interest-bearing			209,109.	45	147,953.
	46	Savings and temporary cash investments				46	116,242.
	47 a	Accounts receivable	47a				
	b	Less allowance for doubtful accounts	47b			47c	
	48 a	Pledges receivable	48a				
	b	Less allowance for doubtful accounts	48b			48c	
	49	Grants receivable				49	
	50	Receivables from officers, directors, trustees, and key employees				50	
	51 a	Other notes and loans receivable	51a				
	b	Less allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use			6,908.	52	650.
	53	Prepaid expenses and deferred charges			10,486.	53	149,871.
	54	Investments - securities STMT 9 ▶ ☐ Cost ☒ FMV			17,422,697.	54	14,773,731.
	55 a	Investments - land, buildings, and equipment basis	55a				
	b	Less accumulated depreciation	55b			55c	
	56	Investments - other				56	
	57 a	Land, buildings, and equipment basis	57a	108,047.			
	b	Less accumulated depreciation STMT 10	57b	52,403.	43,068.	57c	55,644.
	58	Other assets (describe ▶ SEE STATEMENT 11)			19,202.	58	175,846.
	59	**Total assets** (add lines 45 through 58) (must equal line 74)			17,711,470.	59	15,419,937.
Liabilities	60	Accounts payable and accrued expenses			3,674.	60	16,898.
	61	Grants payable			109,468.	61	44,670.
	62	Deferred revenue				62	
	63	Loans from officers, directors, trustees, and key employees				63	
	64 a	Tax-exempt bond liabilities				64a	
	b	Mortgages and other notes payable STMT 12				64b	136,688.
	65	Other liabilities (describe ▶ DEPOSITS)			14,113.	65	227,897.
	66	**Total liabilities** (add lines 60 through 65)			127,255.	66	426,153.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted			4,035,565.	67	3,522,617.
	68	Temporarily restricted			5,857,207.	68	3,779,724.
	69	Permanently restricted			7,691,443.	69	7,691,443.
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	**Total net assets or fund balances** (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)			17,584,215.	73	14,993,784.
	74	**Total liabilities and net assets / fund balances** (add lines 66 and 73)			17,711,470.	74	15,419,937.

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements ▶	a	1,367,504.
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments $		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify) $		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	1,367,504.
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) STMT 13 $ 301,919.		
	Add amounts on lines (1) and (2) ▶	d	301,919.
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	1,669,423.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements ▶	a	1,418,371.
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify) $		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	1,418,371.
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	1,418,371.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 14		118,458.	9,396.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? If "Yes," attach schedule ▶ ☐ Yes ☒ No

Part VI Other Information

			N/A	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		77		X
78 a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?		80a		X
b	If "Yes," enter the name of the organization ▶ ______ and check whether it is ☐ exempt OR ☐ nonexempt				
81 a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81	81a 0.			
b	Did the organization file Form 1120-POL for this year?		81b		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		82a		X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions for reporting in Part III)	82b N/A			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	83b		
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	N/A	84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	84b		
85	*501(c)(4), (5), or (6) organizations* a Were substantially all dues nondeductible by members?	N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	N/A	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year				
c	Dues, assessments, and similar amounts from members	85c N/A			
d	Section 162(e) lobbying and political expenditures	85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	N/A	85g		
h	If section 6033(e)(1)(A) dues notice were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	85h		
86	*501(c)(7) organizations* Enter a Initiation fees and capital contributions included on line 12	86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities	86b N/A			
87	*501(c)(12) organizations* Enter a Gross income from members or shareholders	87a N/A			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX		88		X
89 a	*501(c)(3) organizations* Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0. , section 4912 ▶ 0. , section 4955 ▶ 0.				
b	*501(c)(3) and 501(c)(4) organizations* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		89b		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	▶ 0.			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization	▶ 0.			

90 a List the states with which a copy of this return is filed ▶ CALIFORNIA

b Number of employees employed in the pay period that includes March 12, 2000 | 90b | 4

91 The books are in care of ▶ L.S.B. LEAKEY FDN FOR RESEARCH Telephone no ▶ 415-561-4646

Located at ▶ P.O. BOX 29346 PRESIDIO BLDG 1002A, SF, CA ZIP code ▶ 94129-1199

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* Form 1041- Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the tax year ▶ | 92 | N/A

Part VII Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income (A) Business code	(B) Amount	Excluded by section 512, 513 or 514 (C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					32,396.
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	837,851.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			19	278,598.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a FACILITIES LEASE			17	33,958.	
b MISCELLANEOUS			12	1,258.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		1,151,665.	32,396.
105 Total (add line 104, columns (B), (D), and (E)) ▶					1,184,061.

Note *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes

Line No ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
94 & 103	THE RELATED FUNCTION INCOME FROM DUES AND MISCELLANEOUS REVENUE CONTRIBUTES TO THE DISSEMINATION OF INFORMATION ABOUT THE FOUNDATION'S CHARITABLE AND GRANT ACTIVITIES.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
N/A	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

[redacted] mpanying schedules and statements, and to the best of my knowledge and belief it is true
mation of which preparer has any knowledge (Important See General Instruction W)

0/02 ▶ Robert Lasher /Executive Director

Type or print name and title

[redacted]

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information

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

OMB No 1545-0047

2000

Name of the organization L.S.B. LEAKEY FDTN. FOR RESEARCH RELATED TO HUMAN ORIGINS, BEHAVIOR AND SURVIVAL

Employer identification number 95 2536475

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over $50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services ▶ 0		

LHA For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ

023101
12-09-00

Part III **Statements About Activities**

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum?	1		X
	If "Yes," enter the total expenses paid or incurred in connection with the lobbying activites ▶ $			
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d	X	
e	Transfer of any part of its income or assets?	2e		X
	If the answer to any question is "Yes," attach a detailed statement explaining the transactions SEE STATEMENT 15			
3	Does the organization make grants for scholarships, fellowships, student loans, etc ?	3		X
4 a	Do you have a section 403(b) annuity plan for your employees?	4a		X
b	Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments (See page 2 of the instructions) SEE STATEMENT 16			

Part IV **Reason for Non-Private Foundation Status** (See pages 2 through 5 of the instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V, page 5)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A.)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV A.)

12 ☐ An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A **Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting**
Note *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting*

Calendar year (or fiscal year beginning in) ▶	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	733,722.	561,654.	470,206.	391,292.	2,156,874.
16 Membership fees received	35,386.	20,446.	19,528.	50,637.	125,997.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc , purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	758,374.	687,885.	790,136.	554,860.	2,791,255.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	534.	4,665.	SEE STATEMENT 17 1,698.	8,902.	15,799.
23 Total of lines 15 through 22	1,528,016.	1,274,650.	1,281,568.	1,005,691.	5,089,925.
24 Line 23 minus line 17	1,528,016.	1,274,650.	1,281,568.	1,005,691.	5,089,925.
25 Enter 1% of line 23	15,280.	12,747.	12,816.	10,057.	

26 **Organizations described on lines 10 or 11** **a** Enter 2% of amount in column (e), line 24 ▶ **26a** 101,799.

b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts ▶ **26b** 0.

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ **26c** 5,089,925.

d Add Amounts from column (e) for lines 18 2,791,255. 19 ______ 22 15,799. 26b ______ ▶ **26d** 2,807,054.

e Public support (line 26c minus line 26d total) ▶ **26e** 2,282,871.

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ **26f** 44.8508%

27 **Organizations described on line 12** **a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person" Enter the sum of such amounts for each year

(1999) N/A (1998) (1997) (1996)

b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year N/A

(1999) (1998) (1997) (1996)

c Add Amounts from column (e) for lines 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ **27c** N/A

d Add Line 27a total ______ and line 27b total ______ ▶ **27d** N/A

e Public support (line 27c total minus line 27d total) ▶ **27e** N/A

f Total support for section 509(a)(2) test Enter amount on line 23, column (e) ▶ **27f** N/A

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ **27g** N/A %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ **27h** N/A %

28 **Unusual Grants** For an organization described in line 10, 11, or 12, that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not include these grants in line 15 (See page 5 of the instructions)

NONE

Part V **Private School Questionnaire**
(To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.)	31		
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)	32d		
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)	33h		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

023131
12-09-00

Part VI-A Lobbying Expenditures by Electing Public Charities

(To be completed ONLY by an eligible organization that filed Form 5768) N/A

Check here ▶ ☐ If the organization belongs to an affiliated group

Check here ▶ ☐ If you checked "a" above and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -	41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is -	The lobbying nontaxable amount is -
Not over $500 000	20% of the amount on line 40
Over $500 000 but not over $1 000,000	$100 000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1 500 000	$175 000 plus 10% of the excess over $1 000 000
Over $1,500 000 but not over $17 000 000	$225 000 plus 5% of the excess over $1,500 000
Over $17 000 000	$1 000 000

Caution *If there is an amount on either line 43 or line 44, you must file Form 4720*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 9 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				N/A
Calendar year (or fiscal year beginning in) ▶	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

			Yes	No
a	Transfers from the reporting organization to a noncharitable exempt organization of			
	(i) Cash	51a(i)		X
	(ii) Other assets	a(ii)		X
b	Other transactions			
	(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
	(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
	(iii) Rental of facilities, equipment, or other assets	b(iii)		X
	(iv) Reimbursement arrangements	b(iv)		X
	(v) Loans or loan guarantees	b(v)		X
	(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received N/A

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule N/A

(a) Name of organization	(b) Type of organization	(c) Description of relationship

023151 12-09-00

Schedule B (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Schedule of Contributors Supplementary Information for line 1d of Form 990 or line 1 of Form 990-EZ (see instructions)	OMB No 1545-0047 2000

Name of organization L.S.B. LEAKEY FDTN. FOR RESEARCH RELATED TO HUMAN ORIGINS, BEHAVIOR AND SURVIVAL

Employer identification number 95-2536475

Organization type (check one)-Section [X] 501(c)(3) ◀ (enter number) [ ] 527 or [ ] 4947(a)(1) nonexempt charitable trust

A Section 501(c)(7), (8), or (10) organizations-

Check this box if the organization had no charitable contributors who contributed more than $1,000 during the year (But see General rule below) ▶ [ ]

Enter here the total gifts received during the year for a religious, charitable, etc , purpose ▶ $

Note: This form is generally not open to public inspection except for section 527 organizations.

General Instructions

Purpose of Form

Schedule B (Form 990 or 990-EZ) is used by organizations required to file **Form 990**, Return of Organization Exempt From Income Tax, or **Form 990-EZ**, Short Form Return of Organization Exempt From Income tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ)

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization

Who Must File Schedule B (Form 990 or 990-EZ)

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 9090-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ

Caution *Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ)*

Public Inspection

Schedule B (Form 990 or 990 EZ) is

- Open to public inspection for a section 527 political organization
- Generally not open to public inspection for the other organizations that must file this form

If a non-section 527 organization files a copy of Form 990, or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state unless a schedule of contributors is specifically required by the state States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ

See the Instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ)

Contributors Required To Be Listed On Part I

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations

General rule Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling $5,000 or more for the year Also complete Part II for a noncash contribution In determining the $5,000 amount, total all of the contributor's gifts of $1,000 or more for the year

Section 501(c)(3) organizations For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the Regulations under sections 509(a)(1)/170(b)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))-

List in Part I only those contributors whose contribution of $5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1 6033-2(a)(2)(iii)(a))

Example A section 501(c)(3) organization, of the type described above, reported $700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990 The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the greater of $5,000 or $14,000 (2% of $700,000) Thus, a contributor who gave a total of $11,000 would not be reported in Parts I and II for this section 501(c)(3) organization Even though the $11,000 contribution to the organization exceeded $5,000, it did not exceed $14,000

Section 501(c)(7), (8), or (10) organizations For *noncharitable* contributions to one of these organizations, list in Part I contributors who gave $5,000 or more as described in the **General rule** discussed above

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc , purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))-

List in Part I each contributor whose contributions total more than $1,000 during the year that were for a religious, charitable, etc , purpose To determine the $1,000, aggregate all of a contributor's gifts for the year (regardless of amount) For a noncash contribution, complete Part II

All section 501(c)(7), (8), or (10) organizations that received **any** charitable contributions and listed **any** charitable contributors on Part I must also complete Part III

If section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list **any** charitable contributors on Part I, check the box on line **A** at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided The organization need not complete and attach Part III

Specific Instructions

Note *You may duplicate Parts I, II, and III if more copies are needed Number each page of each Part*

Part I In column **(a)**, identify the first contributor listed as no 1 and the second contributor as no 2, etc Number consecutively Show the contributor's name, address, aggregate contributions for the year, and the type of contribution (e g , whether an individual, payroll, or noncash contribution) Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually)

Part II In column **(a)**, show the number that corresponds to the contributor's number in Part I Describe the noncash contribution fully Report on property with readily determinable market value (i e , market quotations for securities) by listing its fair market value (FMV) For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date See Regulations section 20 2031-2 to determine the value of contributed stocks and bonds When market value cannot be readily determined, use an appraised or estimated value To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value

Part III Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc , purposes, must complete Parts I through III for those persons whose gifts totaled more than $1,000 during the year Show also, in the heading of Part III, total gifts that were $1,000 or less and were for a religious, charitable, etc , purpose *Complete this information only on the first Part III page*

If an amount is set aside for a religious, charitable, etc , purpose, show in column **(d)** how the amount is held (e g , whether it is mingled with amounts held for other purposes) If the organization transferred the gift to another organization, show the name and address of the transferee organization in column **(e)** and explain the relationship between the two organizations

023451 12-19-00

Name of organization
L.S.B. LEAKEY FDTN. FOR RESEARCH RELATED
TO HUMAN ORIGINS, BEHAVIOR AND SURVIVAL

Employer identification number
95-2536475

Part I Contributors

(a) No	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
1	SEE ATTACHED SCHEDULE	$ 424,058.	Individual [X] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
2		$	Individual [ ] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
3		$	Individual [ ] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
4		$	Individual [ ] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
5		$	Individual [ ] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)
6		$	Individual [ ] Payroll [ ] Noncash [ ] (Complete Part II if a noncash contribution)

The Leakey Foundation
$5,000 and Above Donations
9/1/00 - 8/31/01

Name	Amount
	$10,368 28
	11,003 84
	23,500 00
	11,100 00
	10,000 00
	111,500 00
	6,500.00

The Leakey Foundation
$5,000 and Above Donations
9/1/00 - 8/31/01

Name	Amount
	14,835.00
	7,500 00
	7,500 00
	25,000 00
	11,000 00
	6,000 00
	7,000 00
	7,000 00

The Leakey Foundation
$5,000 and Above Donations
9/1/00 - 8/31/01

Name	Amount
	20,000.00
	10,391.36
	6,000 00
	50,000 00
	8,000 00
	12,500 00
	5,000 00
	6,900 00
	35,459 33
Total	$424,057 81

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
BERNSTEIN INTERMEDIATE DURATION PORTFOLIO	960,000.	996,338.	0.	<36,338.>
BERNSTEIN U.S. EQUITIES	295,632.	229,327.	0.	66,305.
GEO CAPITAL LLC SECURITIES	349,739.	364,668.	0.	<14,929.>
W.P. STEWART SECURITIES	2,007,092.	1,743,532.	0.	263,560.
TO FORM 990, PART I, LINE 8	3,612,463.	3,333,865.	0.	278,598.

FORM 990 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 2

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
OFFICE EQUIPMENT	VARIOUS	08/31/01	PURCHASED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
NONE	0.	67,135.	0.	67,135.	0.
TO FM 990, PART I, LN 8		67,135.	0.	67,135.	0.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 3

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS-UNRESTRICTED	<940,109.>
UNREALIZED GAIN ON INVESTMENTS-TEMP. RESTRICTED	<1,901,374.>
TOTAL TO FORM 990, PART I, LINE 20	<2,841,483.>

FORM 990 OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
CONSULTING EXPENSE	13,839.	6,403.	7,436.	
DEVELOPMENT EXPENSE	16,916.	8,458.	8,458.	
EVENTS AND PROGRAMS	58,626.	58,430.	196.	
OFFICE EXPENSE	36,084.	19,302.	16,782.	
PROFESSIONAL DEVELOPMENT	2,480.	1,099.	1,381.	
PROFESSIONAL FEES	16,288.		16,288.	
PUBLIC RELATIONS	10,025.		10,025.	
WEBSITE EXPENSE	60,777.	48,620.	12,157.	
TOTAL TO FM 990, LN 43	215,035.	142,312.	72,723.	

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 5
PART III

EXPLANATION

TO PROMOTE EDUCATION ABOUT AND RESEARCH INTO THE ORIGINS OF THE HUMAN RACE.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 6

DESCRIPTION OF PROGRAM SERVICE ONE

$602,031 IN RESEARCH GRANTS AND $48,710 IN BALDWIN FELLOSHIPS WERE AWARDED TO 60 STUDENTS, PHYSICIANS, SCIENTISTS AND RESEARCHERS TO PROMOTE FURTHER STUDY AND RESEARCH RELATED TO HUMAN ORIGINS, BEHAVIOR AND SURVIVAL.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	650,741.	1,100,574.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 7

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
RESEARCH GRANTS	VARIOUS	VARIOUS	NONE	650,741.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				650,741.

FORM 990 BENEFITS PAID TO OR FOR MEMBERS STATEMENT 8

DESCRIPTION	AMOUNT
PENSION PLAN	6,625.
HEALTH INSURANCE	2,771.
TOTAL TO FORM 990, PART II, LINE 24	9,396.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 9

DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
CORPORATE SECURITIES	4,916,729.				4,916,729.
MUTUAL FUNDS				9,700,771.	9,700,771.
MONEY MARKET ACCOUNTS				156,231.	156,231.
TO FM 990, LN 54 COL B	4,916,729.			9,857,002.	14773731.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 10

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
OFFICE EQUIPMENT	1,563.	1,563.	0.
FURNITURE	448.	448.	0.
FURNITURE	306.	306.	0.
OFFICE EQUIPMENT	514.	514.	0.
OFFICE EQUIPMENT	545.	544.	1.
OFFICE EQUIPMENT	209.	209.	0.
OFFICE EQUIPMENT	401.	401.	0.
OFFICE EQUIPMENT	313.	313.	0.
COMPUTER	3,094.	3,094.	0.
COMPUTER	300.	300.	0.
COMPUTER	2,924.	2,729.	195.
COMPUTER	2,374.	2,216.	158.
COMPUTER	2,374.	2,216.	158.
OFFICE EQUIPMENT	215.	172.	43.
OFFICE EQUIPMENT	579.	464.	115.
COMPUTER	1,027.	770.	257.
COMPUTER	2,138.	1,604.	534.
OFFICE EQUIPMENT	1,510.	1,132.	378.
OFFICE EQUIPMENT	7,279.	5,460.	1,819.
OFFICE EQUIPMENT	3,260.	2,445.	815.
OFFICE EQUIPMENT	2,261.	1,545.	716.
OFFICE EQUIPMENT	2,479.	1,653.	826.
OFFICE EQUIPMENT	693.	485.	208.
FURNITURE - DONATED	563.	404.	159.
FURNITURE- DONATED	2,202.	1,578.	624.
FURNITURE- DONATED	750.	537.	213.
FURNITURE- DONATED	200.	143.	57.
OFFICE EQUIPMENT	226.	98.	128.
COMPUTER	2,484.	745.	1,739.
FURNITURE	1,369.	411.	958.

COMPUTER	1,943.	583.	1,360.
COMPUTER	1,857.	557.	1,300.
COMPUTER	1,771.	531.	1,240.
OFFICE EQUIPMENT	584.	78.	506.
COMPUTER	1,875.	188.	1,687.
SOFTWARE	97.	97.	0.
SOFTWARE	1,180.	1,180.	0.
SOFTWARE	628.	628.	0.
SOFTWARE	496.	413.	83.
SOFTWARE	3,085.	1,542.	1,543.
SOFTWARE	1,336.	371.	965.
L/H IMPROVEMENTS	5,670.	2,970.	2,700.
L/H IMPROVEMENTS	730.	365.	365.
L/H IMPROVEMENTS	3,318.	1,659.	1,659.
L/H IMPROVEMENTS	4,375.	2,188.	2,187.
L/H IMPROVEMENTS	478.	227.	251.
L/H IMPROVEMENTS	225.	102.	123.
EQUIPMENT - LEASED	33,799.	4,225.	29,574.
TOTAL TO FORM 990, PART IV, LN 57	108,047.	52,403.	55,644.

FORM 990 OTHER ASSETS STATEMENT 11

DESCRIPTION	AMOUNT
ACCRUED INTEREST RECEIVABLE	4,756.
DEPOSITS	6,090.
WEBSITE DEVELOPMENT	165,000.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	175,846.

FORM 990 OTHER NOTES AND LOANS PAYABLE STATEMENT 12

LENDER'S NAME		TERMS OF REPAYMENT	
WELLS FARGO BANK		INTEREST ONLY	

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
12/01/00	06/10/02	100,000.	6.50%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
PERSONAL PROPERTY	OPERATING EXPENSES

RELATIONSHIP OF LENDER
NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	100,000.

LENDER'S NAME		TERMS OF REPAYMENT	
SAVIN CO.		MONTHLY	

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
01/15/01	02/15/06	39,500.	10.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
EQUIPMENT	CAPITAL LEASE

RELATIONSHIP OF LENDER
NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	36,688.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B 136,688.

FORM 990 OTHER REVENUE INCLUDED ON FORM 990 STATEMENT 13

DESCRIPTION	AMOUNT
RETURN ON INVESTMENT IN EXCESS OF AMTS DESIGNATED FOR OPERATIONS	301,919.
TOTAL TO FORM 990, PART IV-A	301,919.

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 14

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
GORDON P. GETTY 2880 BROADWAY SAN FRANCISCO, CA 94115	CHAIRMAN OF THE BOARD 1+	0.	0.	0.
KAY WOODS 3570 JACKSON STREET SAN FRANCISCO, CA 94118	PRESIDENT 1+	0.	0.	0.
A. WATSON ARMOUR 11 WEST CHEYENNE MOUNTAIN BLVD. COLARADO SPRING, CO 80906	VICE-PRESIDENT 1+	0.	0.	0.
BARRY H. STERLING 9786 ROSS STATION ROAD SEBASTOPOL, CA 95472	VICE PRESIDENT 1+	0.	0.	0.
FRANK M. WOODS 600 MONTGOMERY STREET, SUITE 2701 SAN FRANCISCO, CA 94111	VICE PRESIDENT 1+	0.	0.	0.
WILLIAM P. RICHARDS 100 WILSHIRE BLVD., SUITE 600 SANTA MONICA, CA 90401	TREASURY 1+	0.	0.	0.
OWEN P. O'DONNELL 705 SCOTT STREET SAN FRANCISCO, CA 94117	SECRETARY 1+	0.	0.	0.
JOHN L. BRADLEY 711 HAYNE ROAD HILLSBOROUGH, CA 94010	TRUSTEE 0	0.	0.	0.

FRED L. CARROLL 3660 JACKSON STREET SAN FRANCISCO, CA 94118	TRUSTEE 0	0.	0.	0.
FLEUR COWLES A5, ALBANY, PICCADILLY, W1 LONDON, ENGLAND	TRUSTEE 0	0.	0.	0.
PETER H. DOMINICK, JR. 770 HIGH STREET DENVER, CO 80218	TRUSTEE 0	0.	0.	0.
JOAN DONNER 50 MARLAND ROAD COLORADO SPRINGS, CO 80906	TRUSTEE 0	0.	0.	0.
CAROLYN FARRIS 7404 HILLSIDE DRIVE LA JOLLA, CA 92037	TRUSTEE 0	0.	0.	0.
JOHN HEMINWAY SOUTH CROSS ROAD CHATHAM, NY 12037	TRUSTEE 0	0.	0.	0.
C. PAUL JOHNSON 5017 SILVERADO TRAIL NAPA, CA 94558	TRUSTEE 0	0.	0.	0.
GEORGE D. KIRKHAM 210 BAY LANE WATER MILL, NY 11976	TRUSTEE 0	0.	0.	0.
BARBARA NEWSON 1198 FILBERT STREET SAN FRANCISCO, CA 94109	TRUSTEE 0	0.	0.	0.
LAWRENCE BAKER, JR. P.O. BOX 1398 BURLINGAME, CA 94011-1398	LIFE TRUSTEE 0	0.	0.	0.
ROBERT M. BECK 3320 RECHE ROAD FALLBROOK, CA 92088-2890	LIFE TRUSTEE 0	0.	0.	0.
R. HUGH CALDWELL, JR. VILLA 313 CAROLINA MEADOWS CHAPEL HILL, NC 27514	LIFE TRUSTEE 0	0.	0.	0.
GEORGE D. JAGELS, SR. 301 NORTH LAKE AVENUE, APT. 10A PASADENA, CA 91101	LIFE TRUSTEE 0	0.	0.	0.

MAX K. JAMISON P.O. BOX 218 ANGELUS OAKS, CA 92305	LIFE TRUSTEE 0	0.	0.	0.
RICHARD E. LEAKEY P.O. BOX 24926 NAIROBI, KENYA	LIFE TRUSTEE 0	0.	0.	0.
GEORGE E. LINDSAY 88 BARBAREE WAY TIBURON, CA 94920	LIFE TRUSTEE 0	0.	0.	0.
EDWIN S. MUNGER MAIL CODE 228-77, CIT PASADENNA, CA 91125	LIFE TRUSTEE 0	0.	0.	0.
ARNOLD TRAVIS 727 HOLMBY AVENUE LOS ANGELES, CA 90024-3319	LIFE TRUSTEE 0	0.	0.	0.
ROBERT LASHER 3672 20TH STREET, #4 SAN FRANCISCO, CA 94110	EXECUTIVE DIRECTOR 40+	103,333.	9,396.	0.
ALAN J. ALMQUIST 6 ALICE WAY SAN ANSELMO, CA 94960	GRANT OFFICER 16+	15,125.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		118,458.	9,396.	0.

SCHEDULE A STATEMENT REGARDING ACTIVITIES WITH DIRECTORS, TRUSTEES, PRINCIPAL OFFICERS OR CREATOR PART III, LINE 2 — STATEMENT 15

SEE STATEMENT 14 RE FORM 990 PART V

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS PART III, LINE 4 — STATEMENT 16

THE INDIVIDUALS RECEIVING GRANTS FROM THE FOUNDATION ARE USING THE GRANTS FOR SCIENTIFIC RESEARCH. THE INDIVIDUALS SUBMIT APPLICATIONS EXPLAINING THE RESEARCH PROJECT TO BE WORKED ON. THESE APPLICATIONS ARE THEN REVIEWED TO DETERMINE IF THE PROJECTS FURTHER THE FOUNDATION'S RESEARCH RELATED TO HUMAN ORIGINS.

SCHEDULE A OTHER INCOME STATEMENT 17

DESCRIPTION	1999 AMOUNT	1998 AMOUNT	1997 AMOUNT	1996 AMOUNT
MISCELLANEOUS REVENUE	534.	4,665.	1,698.	8,902.
TOTAL TO SCHEDULE A, LINE 22	534.	4,665.	1,698.	8,902.

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property) 990

▶ See separate instructions ▶ Attach this form to your return.

OMB No 1545-0172

2000

Attachment Sequence No 67

Name(s) shown on return	Business or activity to which this form relates	Identifying number
L.S.B. LEAKEY FDTN. FOR RESEARCH RELATED TO HUMAN ORIGINS, BEHAVIOR AND SURVIVAL	FORM 990 PAGE 2	95-2536475

Part I Election To Expense Certain Tangible Property (Section 179) **Note** If you have any "listed property," complete Part V before you complete Part I)

1	Maximum dollar limitation If an enterprise zone business, see instructions	1	20,000.
2	Total cost of section 179 property placed in service See instructions	2	
3	Threshold cost of section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less enter -0- If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property Enter amount from line 27	7	

8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from 1999	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2001 Add lines 9 and 10, less line 12 ▶ 13		

Note *Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement) Instead, use Part V for listed property*

Part II MACRS Depreciation For Assets Placed in Service Only During Your 2000 Tax Year (Do not include listed property)

Section A - General Asset Account Election

14 If you are making the election under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box See instructions ▶ ☐

Section B - General Depreciation System (GDS) (See instructions)

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
15 a 3 year property						
b 5 year property						
c 7 year property						
d 10-year property						
e 15 year property						
f 20-year property						
g 25 year property			25 yrs		S/L	
h Residential rental property	/		27 5 yrs	MM	S/L	
	/		27 5 yrs	MM	S/L	
i Nonresidential real property	/		39 yrs	MM	S/L	
	/			MM	S/L	

Section C - Alternative Depreciation System (ADS) (See instructions)

16 a Class life					S/L	
b 12 year			12 yrs		S/L	
c 40-year	/		40 yrs	MM	S/L	

Part III Other Depreciation (Do not include listed property) (See instructions)

17	GDS and ADS deductions for assets placed in service in tax years beginning before 2000	17	
18	Property subject to section 168(f)(1) election	18	
19	ACRS and other depreciation	19	17,224.

Part IV Summary (See instructions)

20	Listed property Enter amount from line 26	20	
21	**Total** Add deductions from line 12, lines 15 and 16 in column (g), and lines 17 through 20 Enter here and on the appropriate lines of your return Partnerships and S corporations see instructions	21	17,224.
22	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 22		

LHA **For Paperwork Reduction Act Notice, see the separate instructions** Form 4562 (2000)

016251
11-20-00

Part V **Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)
Note *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* **only** *23a, 23b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable*

Section A - Depreciation and Other Information (Caution *See instructions for limits for passenger automobiles* **)**

23a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No 23b If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
24 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
25 Property used 50% or less in a qualified business use								
		%				S/L		
		%				S/L		
		%				S/L -		
26 Add amounts in column (h) Enter the total here and on line 20, page 1						26		
27 Add amounts in column (i) Enter the total here and on line 7, page 1							27	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
28 Total business/investment miles driven during the year (DO NOT include commuting miles)												
29 Total commuting miles driven during the year												
30 Total other personal (noncommuting) miles driven												
31 Total miles driven during the year Add lines 28 through 30												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
32 Was the vehicle available for personal use during off duty hours?												
33 Was the vehicle used primarily by a more than 5% owner or related person?												
34 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are **not** more than 5% owners or related persons

	Yes	No
35 Do you maintain a written policy statement that prohibits all personal use of vehicles including commuting, by your employees?		
36 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See instructions for vehicles used by corporate officers, directors, or 1% or more owners		
37 Do you treat all use of vehicles by employees as personal use?		
38 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
39 Do you meet the requirements concerning qualified automobile demonstration use? **Note** *If your answer to 35, 36, 37, 38, or 39 is "Yes," you need not complete Section B for the covered vehicles*		

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
40 Amortization of costs that begins during your 2000 tax year					
41 Amortization of costs that began before 2000				41	
42 **Total** Add amounts in column (f) See instructions for where to report				42	

016252
10-21-00

FORM 990 PAGE 2 990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	BUILDINGS											
46	L/H IMPROVEMENTS	102797	SL	7.00	19	5,670.			5,670.	2,160.		810.
47	L/H IMPROVEMENTS	112697	SL	7.00	19	730.			730.	261.		104.
48	L/H IMPROVEMENTS	120297	SL	7.00	19	3,318.			3,318.	1,185.		474.
49	L/H IMPROVEMENTS	120897	SL	7.00	19	4,375.			4,375.	1,563.		625.
50	L/H IMPROVEMENTS	123197	SL	7.00	19	478.			478.	159.		68.
51	L/H IMPROVEMENTS	012198	SL	7.00	19	225.			225.	70.		32.
	* 990 PAGE 2 TOTAL BUILDINGS					14,796.		0.	14,796.	5,398.	0.	2,113.
	FURNITURE & FIXTURES											
1	OFFICE EQUIPMENT	030191	SL	5.00	19	1,563.			1,563.	1,563.		0.
2	FURNITURE	083092	SL	5.00	19	448.			448.	448.		0.
3	FURNITURE	070994	SL	5.00	19	306.			306.	306.		0.
4	OFFICE EQUIPMENT	072194	SL	5.00	19	514.			514.	514.		0.
5	OFFICE EQUIPMENT	083195	SL	5.00	19	545.			545.	544.		0.
6	OFFICE EQUIPMENT	083195	SL	5.00	19	209.			209.	209.		0.
7	OFFICE EQUIPMENT	083195	SL	5.00	19	401.			401.	401.		0.
8	OFFICE EQUIPMENT	083195	SL	5.00	19	313.			313.	313.		0.
9	COMPUTER	102595	SL	5.00	19	3,094.			3,094.	2,991.		103.

(D) Asset disposed

FORM 990 PAGE 2 990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
10	COMPUTER	072396	SL	5.00	19	300.			300.	245.		55.
11	COMPUTER	122096	SL	5.00	19	2,924.			2,924.	2,144.		585.
12	COMPUTER	122096	SL	5.00	19	2,374.			2,374.	1,741.		475.
13	COMPUTER	122096	SL	5.00	19	2,374.			2,374.	1,741.		475.
14	OFFICE EQUIPMENT	082997	SL	5.00	19	215.			215.	129.		43.
15	OFFICE EQUIPMENT	082997	SL	5.00	19	579.			579.	348.		116.
16	COMPUTER	111797	SL	5.00	19	1,027.			1,027.	565.		205.
17	COMPUTER	111797	SL	5.00	19	2,138.			2,138.	1,176.		428.
18	OFFICE EQUIPMENT	111797	SL	5.00	19	1,510.			1,510.	830.		302.
19	OFFICE EQUIPMENT	112897	SL	5.00	19	7,279.			7,279.	4,004.		1,456.
20	OFFICE EQUIPMENT	121597	SL	5.00	19	3,260.			3,260.	1,793.		652.
21	OFFICE EQUIPMENT	040198	SL	5.00	19	2,261.			2,261.	1,093.		452.
22	OFFICE EQUIPMENT	041698	SL	5.00	19	2,479.			2,479.	1,157.		496.
23	OFFICE EQUIPMENT	031098	SL	5.00	19	693.			693.	346.		139.
24	FURNITURE - DONATED	021198	SL	5.00	19	563.			563.	291.		113.
25	FURNITURE- DONATED	021198	SL	5.00	19	2,202.			2,202.	1,138.		440.
26	FURNITURE- DONATED	020198	SL	5.00	19	750.			750.	387.		150.
27	FURNITURE- DONATED	020198	SL	5.00	19	200.			200.	103.		40.

(D) Asset disposed

FORM 990 PAGE 2 990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
28	OFFICE EQUIPMENT	071599	SL	5.00	19	226.			226.	53.		45.
33	COMPUTER	031600	SL	5.00	19	2,484.			2,484.	248.		497.
34	FURNITURE	031600	SL	5.00	19	1,369.			1,369.	137.		274.
35	COMPUTER	031600	SL	5.00	19	1,943.			1,943.	194.		389.
36	COMPUTER	031600	SL	5.00	19	1,857.			1,857.	186.		371.
37	COMPUTER	031600	SL	5.00	19	1,771.			1,771.	177.		354.
38	OFFICE EQUIPMENT	122100	SL	5.00	19	584.			584.			78.
39	COMPUTER	022601	SL	5.00	19	1,875.			1,875.			188.
	* 990 PAGE 2 TOTAL FURNITURE & FIXTURES					52,630.		0.	52,630.	27,515.	0.	8,921.
	MACHINERY & EQUIPMENT											
52	EQUIPMENT - LEASED	011501	SL	5.00	19	33,799.			33,799.			4,225.
	* 990 PAGE 2 TOTAL MACHINERY & EQUIPMENT					33,799.		0.	33,799.	0.	0.	4,225.
	OTHER											
40	SOFTWARE	011797	SL	3.00	19	97.			97.	97.		0.
41	SOFTWARE	041698	SL	3.00	19	1,180.			1,180.	918.		262.
42	SOFTWARE	051598	SL	3.00	19	628.			628.	489.		139.
43	SOFTWARE	031799	SL	3.00	19	496.			496.	248.		165.
44	SOFTWARE	031600	SL	3.00	19	3,085.			3,085.	514.		1,028.

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04 27-01

(D) Asset disposed

FORM 990 PAGE 2 990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
45	SOFTWARE	103000	SL	3.00	19	1,336.			1,336.			371.
	* 990 PAGE 2 TOTAL OTHER					6,822.		0.	6,822.	2,266.	0.	1,965.
	* GRAND TOTAL 990 PAGE 2 DEPR					108,047.		0.	108,047.	35,179.	0.	17,224.

(D) Asset disposed