Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other org. anizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

2008

OMB No 1545 1150

Department of the Treasury Internal Revenue Service

year may use this form

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

Open to Public Inspection

Α	For the 2008 calendar year, or tax year beginning , 2008, and en	dina		ī		
_	Check if applicable C		mployer	identification number		
	Address change Please Singularity Institute for Artificial		58-2565917			
Ħ	Name change label or Thtolligence Thc		E Telephone number			
F	Initial return type P.O. Box 50182	1	•			
Ħ	Termination See Specific Palo Alto, CA 94303		610-2	213-2487		
	Amended return Instruc-	lF G	roup F	xemption		
П	Application pending		lumber	<u> </u>		
	 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). 	G Accounting meth Other (specify) ▶		Cash Accrual		
,	Makaitan bu unun ginginet erg			ganization is not dule B (Form 990,		
	Website: Www.singinst.org	990-EZ, or 990-F	ir aciie PF).	dule B (FOITH 330,		
	Organization type (check only one) — X 501(c) (3) ◄ (insert no.) 4947(a)(1) or 527					
	Check $ ightharpoonup$ If the organization is not a section 509(a)(3) supporting organization and its gr \$25,000. A return is not required, but if the organization chooses to file a return, be sure to			ot more than		
L	Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Fount instead of Form 990-EZ	orm 990	► \$	425,701		
Pa	rt I Revenue, Expenses, and Changes in Net Assets or Fund Balan	ces (See the ins	tructio	ons for Part I.)		
	1 Contributions, gifts, grants, and similar amounts received		1	285,652.		
	Program service revenue including government fees and contracts		2	132,778		
	3 Membership dues and assessments		3			
	4 Investment income		4	7,271		
	5a Gross amount from sale of assets other than inventory 5a		-	1,411		
	· · · · · · · · · · · · · · · · · · ·		- 1			
_	b Less. cost or other basis and sales expenses		₹ <u> </u> {			
E	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) (att sch)	chere ► □	5c			
RE>E	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check					
UZI	a Gross revenue (not including \$ of contributions					
E	reported on line 1) 6a					
	b Less, direct expenses other than fundraising expenses 6b		1 1			
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	· · · · ·	່ 6cໄ			
	7a Gross sales of inventory, less returns and allowances 7a					
		 · · · · · · · · · · · · · · · · · · 	- 1			
	<u> </u>		┤╻╢			
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c			
	8 Other revenue (describe ►)	8			
	9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	<u> </u>	9	425,701		
	10 Grants and similar amounts paid (attach schedule)		10			
_	11 Benefits paid to or for members		11			
EX	12 Salaries, other compensation, and employee benefits		12	200,594		
mwZmZwm	13 Professional fees and other payments to independent contractors		13	35,361		
Ň			-	33,301		
S	14 Oqeypansy_rant Дипties, and maintenance		14	254		
Š	IIS Printing, publications, postage, and snipping	_	15			
	16 Other expenses (describe > See Statement 1)	16	378,613.		
	Total expenses 独似nes Y through 16)	<u> </u>	17	614,822		
	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-189,121.		
ASSET	Net assets er (und batances at beginning of year (from line 27, column (A)) (must agrefigure reported on prior year's return)	1.	202 446			
T E	ingureceponed on prior years return)		19	392,446		
s	Other changes in net assets or fund balances (attach explanation)	•	20	203,325		
	21 Net assets or fund balances at end of year. Combine lines 18 through 20					
Pa	rt II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more					
	(See the instructions for Part II.)	(A) Beginning of ye		(B) End of year		
22	Cash, savings, and investments	383,490		212,491		
23	Land and buildings		23			
24		9,289	. 24	6,952		
25		392,779		219,443.		
26	Total liabilities (describe ► See Statement 3)	333		16,118.		
		392,446		203,325.		
_27	net assets of fund balances (line 27 of column (b) must agree with line 21)	332,440	, , 41	200,020		

Form 990-EZ (2008) Singularity Ins	titute for Artific	ial		-256	5917 Page 2
Part III Statement of Program Se	rvice Accomplishments	s (See the instructi	ions.)		Expenses
What is the organization's primary exempt purpose? See Describe what was achieved in carrying out the describe the services provided, the number of program title	e Statement 4 e organization's exempt purpo persons benefited, or other re	oses. In a clear and cor elevant information for i	ncise manner,	ànd (4947)	uired for 501(c)(3) 4) organizations and (a)(1) trusts, optional hers)
	ıs amount ıncludes foreign gr	ants, check here		28 a	201,192.
	ıs amount ıncludes foreign gr	ants, check here		29 a	140,774.
				30 a	107,315.
(Grants \$) If th	is amount includes foreign gra	ants, check here	▶ □	31 a	67,064.
32 Total program service expenses (add lin		· · · · · · · · · · · · · · · · · · ·	•	32	516,345.
Part IV List of Officers, Directors	, Trustees, and Key Em	iployees. (List each o	one even if not con	npens	sated. See the instrs.)
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributions employee benefit plan deferred compensat	s and	(e) Expense account and other allowances
Tyler Emerson 1158 Morse Ave #102 Sunnyvale, CA 94089	President 60.00	•	_	0.	0.
Brian Atkins 3060 Liberty Hills Dr. Franklin, TN 37067	Chairman 2.00			0.	0.
Sabine Atkins 3060 Liberty Hills Dr Franklin, TN 37067	Director 2.00			0.	0.
Ray Kurzweil 15 Walnut St Wellesley, MA 02481	Director 2.00	0.		0.	0.
Michael Raimondi 762 East Lake Landing Marietta, GA 30062	Director 2.00			0.	0.
Eliezer Yudkowsky 1256 Woodside Rd Redwood City, CA 94061	Secretary 60.00			0.	0.
Susan Fonseca-Klein 710 Blair Island Rd #400 Redwood City, CA 94061	Management 45.00			0.	0.
BAA	TEEA0812L 0	1/14/09			Form 990-EZ (2008)

	•		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		Х
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T			
á	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		х
ı	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions	- [
ŧ	Did the organization file Form 1120-POL for this year?	37 b		<u>X</u>
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38 a		Х
ŀ	olf 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on line 9	–c		
	Gross receipts, included on line 9, for public use of club facilities. 39b N/A 1501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under.			
40 6	section 4911 ► 0., section 4912 ► 0., section 4955 ► 0.			
ŧ	501(c)(3) and (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?	40Ь		x
	If 'Yes,' complete Schedule L, Part I	400		<u></u>
•	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
•	Enter amount of tax on line 40c reimbursed by the organization	-		
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T List the states with which a copy of this return is filed. CA	40 e		X
t	Telephone no 650-2 Located at 1455 Adams Dr #2160, Menlo Park, CA At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.	42b	860_ Yes	No X
	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		X N/A N/A No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	45_		<u>x</u>
BAA	TEEA0812L 01/14/09 Fo	rm 990	-EZ (2008)

(2008) Singularity Institu	te for Artificia	al			age 4
Section 501(c)(3) organization	s only. All section 5	01(c)(3) organiz			49
and complete the tables for lin	es 50 and 51.		See St		
organization engage in direct or indirect	ct political campaign activi	ties on behalf of or	in opposition to candidates		No X
•	•	hadula C. Part II			X
			nlete Schedule F	 	X
			picto concado E		X
				49b	
•	-	than officers directi	ore trustees and key employ	(ees) who each	`
more than \$100,000 of compensation	from the organization. If	there is none, enter	'None.'		<u>'</u>
ne and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowance	s
ther employees paid over \$100,000					
organization. If there is none, enter 'I	None.' 	actors who each red		<u> </u>	
(a) Name and address of each independent conf	ractor paid more than \$100,000		(b) Type of service	(c) Compensation	on
·					
. -					
-					
of other independent contractors rode	was ever \$100,000				
		panying schedules and st I information of which pre	atements, and to the best of my known parer has any knowledge	wledge and belief, r	t is
			Date:///		
Signature of officer			Date		
Signature of officer Michael Vassar Type or print name and title	'		President		
Michael Vassar Type or print name and title	<u> </u>	Date	President Check of Preparation	arer's Identifying Ni	umber
Michael Vassar	CERT	Date / / -	President Check of Preparation	arer's Identifying Ni instructions)	umber
Michael Vassar Type or print name and title eparer's gnature Gregory W. Snow m's name (or Snow Bittleston	& Co., CPAs, LLP		President Check if self employed N/A	<u> </u>	umber
Michael Vassar Type or print name and title eparer's gradure Gregory w Show shall stress and str	& Co.,CPAs,LLP Cruz Avenue	- Date 11-4-	President Check if self employed Frephoyed N/A	/A	
Michael Vassar Type or print name and title eparer's gradure Gregory w Show shall stress and str	& Co.,CPAs,LLP Cruz Avenue 5030-7228	- 11-4-	President Check if self employed President N/A EIN N/A Phone no (408)	/A	
	Section 501(c)(3) organization and complete the tables for line and complete the tables for line and complete the tables for line organization engage in direct or indirect office? If 'Yes,' complete Schedule Conganization engage in lobbying activition ganization operating a school as description make any transfers to an was the related organization(s) a sective this table for the five highest compermore than \$100,000 of compensation and address of each employee paid more than \$100,000. The employees paid over \$100,000. The employees paid over \$100,000. The employees paid over \$100,000. The individual indi	Section 501(c)(3) organizations only. All section 5 and complete the tables for lines 50 and 51. organization engage in direct or indirect political campaign activities? If 'Yes,' complete Schedule C, Part I organization engage in lobbying activities? If 'Yes,' complete Sciganization operating a school as described in section 170(b)(1)(a) organization make any transfers to an exempt non-charitable relevants the related organization(s) a section 527 organization? The end \$100,000 of compensation from the organization. If the end address of each employee paid more than \$100,000 The end address of each employee paid more than \$100,000 The end address of each employee paid devoted to position The end address of each employee paid more than \$100,000 The end address of each employee paid devoted to position The end address of each employee paid every end address of each independent contractor paid more than \$100,000 The end address of each independent contractor paid more than \$100,000 The end address of each independent contractor paid more than \$100,000 The end address of each independent contractor paid more than \$100,000 The end address of each independent contractor paid more than \$100,000 The end address of each independent contractor paid more than \$100,000	and complete the tables for lines 50 and 51. organization engage in direct or indirect political campaign activities on behalf of or coffice? If "Yes," complete Schedule C, Part II granization engage in lobbying activities? If "Yes," complete Schedule C, Part II granization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," compreganization make any transfers to an exempt non-charitable related organization? was the related organization(s) a section 527 organization? e this table for the five highest compensated employees (other than officers, direct more than \$100,000 of compensation from the organization. If there is none, enter having per week devoted to position the end address of each employee paid more than \$100,000 of compensation from the organization. If there is none, enter "None." (a) Name and address of each independent contractor paid more than \$100,000 of other independent contractors receiving over \$100,000 of	Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer quant complete the tables for lines 50 and 51. See St organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates or office? If 'Yes,' complete Schedule C, Part II ganization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E organization make any transfers to an exempt non-charitable related organization? was the related organization(s) a section 527 organization? The third table for the five highest compensated employees (other than officers, directors, trustees and key employees and address of each employee pad more than \$100,000 of compensation from the organization. If there is none, enter 'None. The and address of each employee pad devoted to position The employees paid over \$100,000 to the five highest compensated employees devoted to position The employees paid over \$100,000 to the five highest compensated independent contractors who each received more than \$100,000 organization. If there is none, enter 'None.' The employees paid over \$100,000 to the five highest compensated independent contractors who each received more than \$100,000 organization. If there is none, enter 'None.' The employees paid over \$100,000 to the five highest compensated independent contractors who each received more than \$100,000 organization. If there is none, enter 'None.' The employees paid over \$100,000 to the five highest compensated independent contractors who each received more than \$100,000 organization. If there is none, enter 'None.' The employees paid over \$100,000 to the five highest compensation of each independent contractors receiving over \$100,000 to the five highest of the five particles and statements, and to the best of my known of the particles of the part	Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46 and complete the tables for lines 50 and 51. See Statement 9 yearnization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates confice? If Yes,' complete Schedule C, Part II granization engage in lobbying activities? If Yes,' complete Schedule C, Part II granization engage in lobbying activities? If Yes,' complete Schedule C, Part II granization engage in lobbying activities? If Yes,' complete Schedule C, Part II granization make any transfers to an exempt non-charitable related organization? Was the related organization(s) a section 527 organization? In this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each more than \$100,000 of compensation from the organization. If there is none, enter None. In and address of each employee paid over \$100,000 of compensation from the organization and exercise the position of the part of the five highest compensated in position. If there is none, enter None. In the employees paid over \$100,000 of compensation of the part of the five highest compensated independent contractors who each received more than \$100,000 of compensation of the part of the five highest compensated independent contractors who each received more than \$100,000 of compensation of the part of the five highest compensated independent contractors who each received more than \$100,000 of compensation of the part of the five highest compensated independent contractors who each received more than \$100,000 of compensation of the part of the five highest contractor paid more than \$100,000 of the part o

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

4

Employer identification number

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

Singularity Institute for Artificial

Intelligence, Inc. 58-2565917

Part	ı	Reason for Pu	<u>blic Charity Statu</u>	ı s (All organizations	<u>must</u>	compl	<u>ete thi</u>	<u>s part</u>	<u>.) (see</u>	instru	ctions)		
The o	rga	nization is not a priv	ate foundation becaus	se it is (Please check on	ly one o	rganızat	ion)						
1	Ň			ciation of churches desc)(A)(i).					
2	П)(ii). (Attach Schedule E									
3	П			organization described i		n 170(b)	(1)(A)(ii	i). (Atta	ch Sche	dule H.)			
4				d in conjunction with a ho								ıtal's	
•	ш	name, city, and sta	= -	,				`					
5	П	An organization ope	erated for the benefit of	of a college or university	owned o	r opera	ted by a	govern	mental	unit desc	ribed in se	ction	
	\sqsubseteq	170(b)(1)(A)(iv). (C	omplete Part II.)	,		·	•						
6		A federal, state, or	cal government or governmental unit described in section 170(b)(1)(A)(v). normally receives a substantial part of its support from a governmental unit or from the general public described										
7	X	An organization tha	t normally receives a : (A)(vi). (Complete Pa	substantial part of its sup	oport fro	m a gov	ernment	tal unit	or from	the gene	ral public d	lescribe	ed
	\vdash				Dort II	`							
8	님	-		70(b)(1)(A)(vi). (Complete			. aantrib	utions	mamhar	chin foo	and area	c recei	ntc
9	Ш	from activities relate	ed to its exempt functi	 more than 33-1/3 % of ons — subject to certain as taxable income (less s implete Part III.) 	exception	ns. and	(2) no r	nore th	an 33-1/	3 % of it	s support fi	rom gro	oss
10		An organization org	anized and operated	exclusively to test for put	olic safet	y. See	section !	5 <mark>09(a)(</mark> 4). (see	instructio	ons) .	• •••	
11	П	An organization org	anized and operated o	exclusively for the benefi	t of, to p	erform	the func	tions of	. or carr	v out the	purposes	of one	or
	لسسا	more publicly suppo	orted organizations de	escribed in section 509(a ation and complete lines)(1) or s	ection 5	09(a)(2)	. See s e	ection 5	09(a)(3).	Check the	box th	at
		a Type I	b Type II	· · · · · · · · · · · · · · · · · · ·	I — Func	-	-			d 📙	Type III-		
е		By checking this bo than foundation ma 509(a)(2)	x, I certify that the org nagers and other than	ganization is not controlle n one or more publicly su	ed direct ipported	ly or ind organiz	irectly b ations d	y one o escribed	r more o	disqualificion 509(a	ed persons a)(1) or sec	s other ction	
f			eceived a written dete	ermination from the IRS t	hat is a	Type I,	Type II o	or Type	III supp	orting or	ganızatıon,		
			nne hae the erganizat	on accepted any gift or	contribu	ition froi	m any o	f the fol	lowing n	ersons?			
g		Since August 17, 20	Joo, mas the organizat	ion accepted any gift of	COMMISS		ii diiy o		g P			Yes	No
		(i) a person who	directly or indirectly of	ontrols, either alone or to	oaether	with per	sons de	scribed	ın (ıı) ar	nd (III)		1.55	
		below, the go	verning body of the su	ipported organization?	•	•			• •	. ,	11 g (i)		
		(ii) a family mem	ber of a person descr	ribed in (i) above?							11 g (ii)		
		(iii) a 35% control	led entity of a person	described in (i) or (ii) ab	ove?						11 g (iii)		
h		Provide the following	ig information about th	ne organizations the orga	nızatıon	support	s.						
	(i) Name of Supported	(ii) EIN	(iii) Type of organization	(iv)	s the	(v) Did y	ou notify	(vi)	s the	(vii) Amoun	t of Supp	oort
		Organization	•	(described on lines 1.9 above or IRC section	(i) listed	ion in col	col	(i) of		zed in the			
				(see instructions))	docui	rning nent?	your st	ipport,		3 ,			
					Yes	No	Yes	No	Yes	No			
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					 		<u> </u>	<u> </u>	 	-			
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Total			1	t., ,	J	t	Ł		£	£1		•	

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

Schedule A (Form 990 or 990-EZ) 2008

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.) Section A. Public Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') 69,272 101,016 492,070 285,652 1,061,551. 113,541 Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf 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 69,272 101,016 113,541 492,070 285,652 1,061,551 Total, Add lines 1-3 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 456,976. shown on line 11, column (f) Public support. Subtract line 5 604,575. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) > 69,272 101,016 113,541 492,070 285,652 061,551. 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 511 694 2,732 2.444 7.271 13,652. similar sources Net income form unrelated business activities, whether or not the business is regularly 0. carried on Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV) See Part IV 103 103. Total support. Add lines 7 1,075,306. through 10 Gross receipts from related activities, etc. (see instructions) 0. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ □ Section C. Computation of Public Support Percentage 56.2% 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 14 91.7 % 15 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box X and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. . . b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

Page 2

Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support (d) 2007 **(b)** 2005 (c) 2006 (e) 2008 (f) Total Calendar year (or fiscal yr beginning in) ► (a) 2004 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1-5 7a Amounts included on lines 1 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► (a) 2004 **(b)** 2005 (c) 2006(d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form sımılar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage % 15 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19a 33-1/3 support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 20

Schedule /	A (Form 990	or 990-EZ	2008	Sing	ularit	y In:	stitut	e for	Art	ificial	58-2565917	Page 4
Part IV	Supplem	ental Ir	iformat	ion. Co	mplete	this	oart to j	provid	e the	explanati	58-2565917 on required by Part II, line information. (see instruct	10;
	Part II, Iii	ne 17a	or 17b;	or Par	t III, line	e 12.	Provide	any c	other a	additional	information. (see instruct	ions)
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2008	Federal Statements Singularity Institute for Artificial Intelligence, Inc.		Page 1 58-2565917
Statement 1 Form 990-EZ, Part I, Line 16 Other Expenses			
Bank Charges/Paypal Charges Contract Services Contributions Depreciation Dues and Fees Information Technology Interest Meetings Miscellaneous Office Expenses Other Direct Program Expenses		\$	6,417. 158,242. 615. 2,337. 785. 1,289. 219. 2,368. 9. 2,824. 1,042. 189,284.
Storage Rent Taxes Travel		Total 🕏	7,531. 77. 5,574. 378,613.
Statement 2 Form 990-EZ, Part II, Line 24 Other Assets			
Furniture and Fixtures Miscellaneous	T	Beginning	Ending 1,914. 5,038. 6,952.
Statement 3 Form 990-EZ, Part II, Line 26 Total Liabilities			
Accounts Payable and Accrued Payroll Taxes Payable	-	Beginning \$ 333. \$ 0. \$ 333. \$	716. 15,402. 16,118.

Statement 4 Form 990-EZ, Part III Organization's Primary Exempt Purpose

To develop safe, stable and self-modifying Artificial General Intelligence. And to support novel research and to foster the creation of a research community focused on Artificial General Intelligence and Safe and Friendly Artificial Intelligence.

2008 Page 5 Schedule A, Part IV - Supplemental Information Singularity Institute for Artificial Intelligence, Inc. 58-2565917 Part II, Line 10 - Other Income <u>2008</u> <u>2007</u> <u>2006</u> <u>2005</u> <u>2004</u> Nature and Source ____ Amazon.com 0. \$ 0. \$ 0. \$ Total \$

2008

Federal Statements

Singularity Institute for Artificial Intelligence, Inc.

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Statement 5
Form 990-EZ, Part III, Line 28
Statement of Program Service Accomplishments

Since 2000, the Singularity Institute for Artificial Intelligence (SIAI) has stood alone as the only non-profit organization that exists for the express purpose of stewarding beneficial artificial general intelligence (AGI) technology, and raising awareness of its benefits and risks. SIAI houses researchers focused on the real and pressing issues that humanity faces surrounding this issue.

Statement 6
Form 990-EZ, Part III, Line 29
Statement of Program Service Accomplishments

Education

SIAI hosted the 2008 Singularity Summit at the Montgomery Theater in San Jose. Its theme was "What is the Singularity". The event had over 800 in attendance, and was covered by multiple outlets, including CNET, Forbes, SF Chronicle, San Jose Mercury News and Wired. Since being founded in 2006 by Ray Kurzweil, Peter Thiel and Tyler Emerson, the Singularity Summit has become the world's leading forum in the Singularity, bringing together scientists, technologists, skeptics, and enthusiasts alike. It was created to provide a much needed forum to discuss the risks and opportunities presented by our expanding relationship with technology.

Statement 7 Form 990-EZ, Part III, Line 30 Statement of Program Service Accomplishments

Research

The core mission of SIAI is to develop a framework for safe advanced artificial intelligence. One of our paths toward this is research and software development. We have three aims with the SIAI Research Program:

Understanding the problems underlying the creation of safe Artificial Intelligence with powerful general intelligence.

Pursue in-house theoretical and experimental research to work directly toward safe advance artificial intelligence.

Provide the artificial intelligence community at large with conceptual, mathematical, and software tools that they can use to move and accelerate their artificial intelligence R&D work toward the direction of safe and beneficial general intelligence.

2008

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Singularity Institute for Artificial Intelligence, Inc.

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Statement 8
Form 990-EZ, Part III, Line 31
Statement of Program Service Accomplishments

Description

0. Grants Program Service Expenses

Outreach and Development

SIAI continues to publicize current developments in Artificial Intelligence through its web site, blogs, media coverage, pod casts and written publications. The organization has made available numerous interviews from its past Summit conferences. These interviews discuss the risks and opportunities presented by our expanding relationship with technology and are presented by recognized leaders, researchers and scientists.

In addition, the organization began its inaugural summer intern program working with interns Steve Reyhawk, Anna Solamon and Tom McCabe. This program supports novel research to foster scientific understanding in our focus areas and is allowing students to pursue promising research projects and the sharing of ideas with SIAI's research fellows.

67,064.

Includes Foreign Grants: No Total \$

0. \$

67,064.

Statement 9
Form 990-EZ, Part VI
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?(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

No

No

12/31/08

2008 Federal Book Summary Depreciation Schedule Singularity Institute for Artificial Intelligence, Inc.

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Client 236500

58-2565917

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Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct.	Cur 179/ SDA	Prior 179/ SDA/ Depr.	Method		Current Depr.
199									
nputer									
Computer	7/01/06		6,924			2,077	S/L	5	1,385
Sony Computer	1/03/07		2,344			469	S/L	5	469
Computer Accessories	1/03/07		284			57	S/L	5 _	57
Total Computer			9,552		0	2,603			1,911
niture and Fixtures									
Furniture	7/01/06		2,979			639	S/L	7 -	426
Total Furniture and Fixtures			2,979		0	639			426
Total Depreciation			12,531		0	3,242		=	2,337
Grand Total Depreciation			12,531		0	3,242		=	2,337
	Description 199 Inputer Computer Sony Computer Computer Accessories Total Computer Initure and Fixtures Furniture Total Furniture and Fixtures	Date Acquired 199 Inputer Computer 7/01/06 Sony Computer 1/03/07 Computer Accessories 1/03/07 Total Computer Initure and Fixtures Furniture 7/01/06 Total Furniture and Fixtures	Date Sold Description Acquired Sold 199 Inputer Computer 7/01/06 Sony Computer 1/03/07 Computer Accessories 1/03/07 Total Computer Initure and Fixtures Furniture 7/01/06 Total Furniture and Fixtures	Date Date Cost/	Date Date Sold Basis Pct	Date Date Cost/ Bus 179/ SDA	Date Date Cost/ Bus 179/ SDA/ Depr.	Date Date Cost / Bus 179 / SDA / Depr. Method	Date Date Sold Bus 179/ SDA/ Depr. Method Life