

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2007

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2007 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization TECHNOSERVE INC.		D Employer identification number 13-2626135
		Number and street (or P.O. box if mail is not delivered to street address) 49 DAY ST.	Room/suite	E Telephone number 203-852-0377
		City or town, state or country, and ZIP + 4 NORWALK, CT 06854-4901		H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) If "Yes," enter number of affiliates N/A H(c) Are all affiliates included? N/A <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list.) H(d) Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No I Group Exemption Number N/A

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

G Website: WWW.TECHNOSERVE.ORG

J Organization type (check only one) 501(c)(3) (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **33,642,344.**

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

Revenue	1 Contributions, gifts, grants, and similar amounts received:		
	a Contributions to donor advised funds	1a	
	b Direct public support (not included on line 1a)	1b	18,380,225.
	c Indirect public support (not included on line 1a)	1c	
	d Government contributions (grants) (not included on line 1a)	1d	14,822,921.
	e Total (add lines 1a through 1d) (cash \$ 33,203,146. noncash \$)	1e	33,203,146.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	117,390.
	3 Membership dues and assessments	3	
	4 Interest on savings and temporary cash investments	4	91,987.
	5 Dividends and interest from securities	5	
	6 a 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		
8 a Gross amount from sales of assets other than inventory	8a	126,534.	
b Less: cost or other basis and sales expenses	8b	28,822.	
c Gain or (loss) (attach schedule)	8c	97,712.	
d Net gain or (loss). Combine line 8c, columns (A) and (B)	8d	97,712.	
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
a Gross revenue (not including \$ of contributions reported on line 1b)	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		
10 a 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	103,287.	
12 Total revenue. Add lines 1a, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	33,613,522.	
Expenses	13 Program services (from line 44, column (B))	13	27,658,531.
	14 Management and general (from line 44, column (C))	14	2,645,759.
	15 Fundraising (from line 44, column (D))	15	2,865,742.
	16 Payments to affiliates (attach schedule)	16	
	17 Total expenses. Add lines 13 and 14, column (A)	17	33,170,032.
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18	443,490.
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	7,449,584.
	20 Other changes in net assets or fund balances (attach explanation)	20	0.
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	7,893,074.

PUBLIC INSPECTION COPY - RETAIN FOR YOUR RECORDS

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
22a Grants paid from donor advised funds (attach schedule) Cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) Cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	1,221,017.	938,231.	157,014.	125,772.
25b Compensation of former officers, directors, key employees, etc. listed in Part V-B	118,831.	105,241.	12,163.	1,427.
25c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	10,182,707.	7,482,254.	1,495,667.	1,204,786.
27 Pension plan contributions not included on lines 25a, b, and c	312,443.	312,443.		
28 Employee benefits not included on lines 25a-27	1,198,643.	1,194,215.		4,428.
29 Payroll taxes	317,478.	317,478.		
30 Professional fundraising fees	104,929.			104,929.
31 Accounting fees	2,136.	2,136.		
32 Legal fees				
33 Supplies	415,059.	404,040.	11,019.	
34 Telephone	537,267.	537,267.		
35 Postage and shipping	12,191.	12,191.		
36 Occupancy	1,504,514.	1,017,718.	271,516.	215,280.
37 Equipment rental and maintenance	227,741.	189,557.	36,114.	2,070.
38 Printing and publications	41,761.	41,761.		
39 Travel	3,449,658.	2,937,394.	187,689.	324,575.
40 Conferences, conventions, and meetings	51,399.	51,399.		
41 Interest	41,968.	41,968.		
42 Depreciation, depletion, etc. (attach schedule)	521,591.	521,591.		
43 Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 2	12,908,699.	11,551,647.	474,577.	882,475.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	33,170,032.	27,658,531.	2,645,759.	2,865,742.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;

(iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions.)

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.

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 7</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
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.)	
a <u>SEE STATEMENT 3</u> _____ _____ _____ _____	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	6,709,523.
b <u>SEE STATEMENT 4</u> _____ _____ _____ _____	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	4,344,163.
c <u>SEE STATEMENT 5</u> _____ _____ _____ _____	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	3,620,972.
d <u>SEE STATEMENT 6</u> _____ _____ _____ _____	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	2,580,342.
e Other program services (attach schedule) <u>SEE STATEMENT 8</u> (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	10,403,531.
f Total of Program Service Expenses (should equal line 44, column (B). Program services) ►	27,658,531.

Form 990 (2007)

Part IV Balance Sheets (See the instructions.)

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

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing		45
	46 Savings and temporary cash investments	18,066,164.	46 26,614,757.
	47 a Accounts receivable	47a 602,344.	
	b Less: allowance for doubtful accounts	47b 22,818.	47c 579,526.
	48 a Pledges receivable	48a 6,418,967.	
	b Less: allowance for doubtful accounts	48b 41,771.	48c 6,377,196.
	49 Grants receivable		49
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b
	51 a Other notes and loans receivable	51a	
	b Less: allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	472,254.	53 549,421.
	54 a Investments - publicly-traded securities STMT 11 <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV	1,750.	54a 2,049.
	b Investments - other securities STMT 10 <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV	153,059.	54b 203,239.
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 3,716,671.		
b Less: accumulated depreciation STMT 9	57b 2,555,063.	57c 1,261,883.	
58 Other assets, including program-related investments (describe ▶)		58	
59 Total assets (must equal line 74). Add lines 45 through 58	25,864,843.	59 35,487,796.	
Liabilities	60 Accounts payable and accrued expenses	1,206,779.	60 2,398,912.
	61 Grants payable		61
	62 Deferred revenue	15,882,963.	62 23,314,012.
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b
	65 Other liabilities (describe ▶ ACCRUED EMPLOYEE BENEFITS)	1,325,517.	65 1,881,798.
66 Total liabilities. Add lines 60 through 65	18,415,259.	66 27,594,722.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	1,499,451.	67 1,638,895.
	68 Temporarily restricted	5,950,133.	68 6,254,179.
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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)	7,449,584.	73 7,893,074.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	25,864,843.	74 35,487,796.	

Part VI Other Information (continued)		Yes	No
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?	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 in Part III.)		
	82b 1,672,188.		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		
	N/A		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	N/A		
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		
	N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
	N/A		
	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 on line 85f?		
	N/A		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	N/A		
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 a	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		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		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		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.		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
90 a	List the states with which a copy of this return is filed		
	SEE STATEMENT 13		
b	Number of employees employed in the pay period that includes March 12, 2007	90b	48
91 a	The books are in care of		
	JAMES NEHMER Telephone no. 203-852-0377		
	Located at 49 DAY STREET, NORWALK, CT ZIP + 4 06854		
b	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 STATEMENT 14		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	91b	X	

Part VI Other Information (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c
 If "Yes," enter the name of the foreign country **SEE STATEMENT 15**

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 (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a PROJECT FEES					117,390.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	91,987.	
96 Dividends and interest from securities					
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			18	97,712.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a OTHER INCOME			01	103,287.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		292,986.	117,390.
105 Total (add line 104, columns (B), (D), and (E))					410,376.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

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).
93A	ENTERPRISES ASSISTED BY TECHNOSERVE ARE ASKED TO PAY PROJECT FEES (WHICH USUALLY REPRESENT NO MORE THAN A SMALL PERCENTAGE OF THE TOTAL COST OF ASSISTANCE) IN ORDER TO PROMOTE PARTICIPATION IN THE PROJECT.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(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 (See the instructions.)

(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

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). **N/A**

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

Yes	No

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

Yes	No

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

Under penalties of perjury, I declare that I prepared this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

PUBLIC INSPECTION COPY - RETAIN FOR YOUR RECORDS

Please Sign Here: Signature of officer: *James Nehmer* Date: *17 Nov 2008*
 Type or print name and title: *Chief Financial Officer*

Paid Preparer's Use Only: Preparer's signature: *[Signature]* Date: *NOV 14 2008* Check if self-employed:
 Firm's name (or yours if self-employed), address, and ZIP + 4: *RSM MCGLADREY, INC. 9737 WASHINGTONIAN BLVD., #400 GAITHERSBURG, MD 20878-7340*
 EIN: *[Blank]* Phone no.: *(301) 296-3600*

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

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

2007

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)

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

Name of the organization: **TECHNOSERVE INC.** Employer identification number: **13 2626135**

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

(See page 1 of the 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
NICHOLAS RAILSTON 49 DAY ST., NORWALK, CT 06854-4901	DIRECTOR-GHANA 40.00	172,268.	25,210.	0.
JOHN WALTER 49 DAY ST., NORWALK, CT 06854-4901	DIRECTOR-MOZAMBIQUE 40.00	169,174.	27,311.	0.
MARCOS MORENO 49 DAY ST., NORWALK, CT 06854-4901	SENIOR MNGER- AFRICA 40.00	133,964.	21,172.	0.
LESLIE JOHNSTON 49 DAY ST., NORWALK, CT 06854-4901	DIRECTOR-SWAZILAND 40.00	131,874.	23,854.	0.
THOMAS DIXON 49 DAY ST., NORWALK, CT 06854-4901	DIRECTOR-TANZANIA 40.00	128,419.	16,306.	0.
Total number of other employees paid over \$50,000	▶ 39			

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

(See page 2 of the 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
PRICEWATERHOUSECOOPERSLLP P.O. BOX 7247-8001, PHILADELPHIA, PA 19170-8001	AUDITING SERVICES	132,339.
A.B. DATA P.O. BOX 170062, MILWAUKEE, WI 53217-8000	FUNDRAISING SERVICES	104,929.
SLAYTON SEARCH PARTNERS, INC. 200 WEST MADISON ST, SUITE 28, CHICAGO, IL 60606	PLACEMENT SERVICES	92,534.
IRON BRIDGE SYSTEMS, INC. 1331 F-STREET NW, SUITE 815, WASHINGTON, DC 20000	CONSULTING SERVICES	90,000.
THREESpot MEDIA, LLC 3333 14TH STREET NC SUITE 300, WASHINGTON, DC 20000	CONSULTING SERVICES	71,698.
Total number of others receiving over \$50,000 for professional services	▶ 6	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
ZUCKERMAN SPAEDER LLP 1800 M STREET, NW SUITE 1000, WASHINGTON, DC 20036	RENT	255,243.
RAPTIM INT'L TRAVEL, INC. 145 NORTH 4TH STREET, LEWISTON, NY 14092	AIRFARE TICKETS	245,830.
PIERSON & SMITH, INC. 40 RICHARDS AVE - P.O. BOX 5175, NORWALK, CT 06854	CORPORATE INSURANCE	142,431.
RAPTIM INT'L TRAVEL, INC. 2926 W. STORY ROAD, IRVING, TX 75038	AIRFARE TICKETS	106,343.
PRIME EQUITIES P.O. BOX 3221, STAMFORD, CT 06905	RENT	78,826.
Total number of other contractors receiving over \$50,000 for other services	▶ 6	

Part III Statements About Activities (See page 2 of the instructions.)

		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? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) 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.		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
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)? SEE PART V-A, FORM 990	2d	X
e	Transfer of any part of its income or assets?	2e	X
3	a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a	X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c	X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	X
4	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	X
b	Did the organization make any taxable distributions under section 4966?	4b	N/A
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N/A
d	Enter the total number of donor advised funds owned at the end of the tax year	▶ N/A	
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	▶ N/A	
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	▶ 0.	
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	▶ 0.	

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)

I certify that 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.)
- 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)(ii). 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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total ▶					

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 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) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 26.)	31,335,943.	21,535,122.	15,839,525.	15,781,718.	84,492,308.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	112,303.	98,288.	145,060.	86,026.	441,677.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	70,015.	25,424.	12,576.		108,015.
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					
23 Total of lines 15 through 22	31,518,261.	21,658,834.	15,997,161.	15,867,744.	85,042,000.
24 Line 23 minus line 17	31,405,958.	21,560,546.	15,852,101.	15,781,718.	84,600,323.
25 Enter 1% of line 23	315,183.	216,588.	159,972.	158,677.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 1,692,006.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 1,197,994.
c Total support for section 509(a)(1) test; Enter line 24, column (e)					26c 84,600,323.
d Add: Amounts from column (e) for lines: 18 108,015. 19 _____ 22 _____ 26b 1,197,994.					26d 1,306,009.
e Public support (line 26c minus line 26d total)					26e 83,294,314.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 98.4563%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A	(2006)	(2005)	(2004)	(2003)	
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records 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 11b, as well as individuals.) Do not file this list with your return. 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	(2006)	(2005)	(2004)	(2003)	
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 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		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?		
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?		
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.)		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
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.)		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
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.		
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		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)

N/A

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

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" 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 -		
	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 6% of the excess over \$1,500,000
	Over \$17,000,000		\$1,000,000
41		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	

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 13 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2007	(b) 2008	(c) 2005	(d) 2004	
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) (See page 14 of the instructions.)

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.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2007

Name of organization

TECHNOSERVE INC.

Employer identification number

13-2626135

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions.)

General Rule-

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, Form 990-EZ, and Form 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

Name of organization TECHNOSERVE INC.	Employer identification number 13-2626135
---	---

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 8,585,582.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 6,237,338.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 761,909.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 743,667.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 4,375,965.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 885,901.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

TECHNOSERVE INC.

13-2626135

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ <u>761,921.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

FORM 990 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 1

DESCRIPTION	DATE	DATE	METHOD	NET GAIN OR (LOSS)	
	ACQUIRED	SOLD	ACQUIRED		
SALE OF FIXED ASSETS			PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	126,534.	28,822.	0.	0.	97,712.
TO FM 990, PART I, LN 8	126,534.	28,822.	0.	0.	97,712.

FORM 990 OTHER EXPENSES STATEMENT 2

DESCRIPTION	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
OUTSIDE SERVICES	4,255,410.	2,959,247.	439,548.	856,615.
PAYROLL EXPENSES	2,881.	2,881.		
INSURANCE	440,771.	440,771.		
BANK CHARGES	9,396.	9,396.		
FOOD EXPENSE	37,683.	37,683.		
AUTO EXPENSES	1,024,830.	1,024,830.		
SECURITY EXPENSE	10,108.	10,108.		
CONSULTANTS	99,485.	99,485.		
PROFESSIONAL FEES AND SERVICES	777,608.	777,608.		
TRAINING	119,523.	119,523.		
PASS THRU AWARDS	3,637,028.	3,637,028.		
OTHER AWARDS AND PRIZES	140,023.	140,023.		
EQUIPMENT AND SUPPLIES	336,236.	336,236.		
OTHER EXPENSES	1,953,716.	1,897,974.	35,478.	20,264.
TAXES	13,816.	13,816.		
VIDEO PRODUCTION	16,109.			16,109.
INDIRECT COST ALLOCATION	0.	10,962.	<449.>	<10,513.>
PUBLIC RELATIONS	2,439.	2,439.		
AGRICULTURE	31,637.	31,637.		
TOTAL TO FM 990, LN 43	12,908,699.	11,551,647.	474,577.	882,475.

DESCRIPTION OF PROGRAM SERVICE ONE

MOZAMBIQUE: TECHNOSERVE HAS HELPED TO REVITALIZE THE MOZAMBIKAN ECONOMY, WHICH SUFFERED DECADES OF CIVIL WAR, BY EXPANDING PROCESSING AND MARKETING CAPACITY IN A RANGE OF SECTORS THAT PROVIDE JOBS AND MARKETS FOR THE RURAL POOR. TECHNOSERVE/MOZAMBIQUE HELPED ENTREPRENEURS TO ESTABLISH VIABLE CASHEW PROCESSING PLANTS AND TRAINED FARMERS TO PRODUCE MORE AND BETTER NUTS. TECHNOSERVE WAS A CRUCIAL PLAYER IN THE REBIRTH OF A SUCCESSFUL MOZAMBIKAN POULTRY INDUSTRY, IMPROVING THE PRODUCTIVITY AND QUALITY OF SMALL-SCALE GROWERS AND LARGER PROCESSORS. WE HELPED FORM AN INDUSTRY ASSOCIATION THAT HAS ALREADY SUCCESSFULLY ADVOCATED FOR KEY POLICY CHANGES. TO CAPITALIZE ON GROWING DEMAND FOR ALTERNATIVE SOURCES OF ENERGY, TECHNOSERVE LAUNCHED A PILOT PROCESSING MODEL TO DEVELOP LOCAL SOURCES OF BIODIESEL. IN THE TOURISM SECTOR, TECHNOSERVE PROVIDED A NUMBER OF ECO-LODGE VENTURES WITH ASSISTANCE ON BUSINESS PLANS, FINANCING AND MANAGEMENT SKILLS. WE ALSO PROVIDED GUIDANCE TO THE WOOD PRODUCTS INDUSTRY, WITH A FOCUS ON DEVELOPING VALUE-ADDED PRODUCTS AND IMPROVING THE MANAGEMENT OF PLANTATIONS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	<u> </u>	<u>6,709,523.</u>

DESCRIPTION OF PROGRAM SERVICE TWO

KENYA: TECHNOSERVE/KENYA WORKED WITH AGRI-BUSINESSES AND FARMERS ACROSS A NUMBER OF INDUSTRIES TO HELP THEM REACH THEIR POTENTIAL. WE HELPED REVITALIZE KENYA'S CASHEW NUT INDUSTRY BY ASSISTING ENTREPRENEURS TO ESTABLISH PROCESSING PLANTS IN STRUGGLING RURAL AREAS. THESE PLANTS CREATED STEADY MARKETS FOR THOUSANDS OF FARMERS AND GENERATED MANY NEW JOBS. WE HELPED SMALL-SCALE COFFEE FARMERS IMPROVE THEIR CULTIVATION, MILLING AND MARKETING PRACTICES, ALLOWING THEM TO COMMAND HIGHER PRICES FOR BETTER-QUALITY COFFEE. TECHNOSERVE DROVE THE DEVELOPMENT OF SUSTAINABLE, RURAL-BASED MILK COOLING PLANTS THAT OFFER A VARIETY OF SERVICES TO OTHERWISE UNDER-SERVED DAIRY FARMERS AND TRIGGER BROADER ECONOMIC ACTIVITY. IN 2007, THESE PLANTS PROVIDED A RELIABLE MARKET FOR NEARLY 20,000 RURAL DAIRY FARMERS. TECHNOSERVE ALSO HELPED THOUSANDS OF BANANA FARMERS INCREASE THE QUALITY AND QUANTITY OF THEIR PRODUCE AND ORGANIZED THEM INTO BUSINESS GROUPS. WE HELPED MORE THAN 20,000 FARMERS OF LEGUMES INCREASE THEIR PRODUCTIVITY, FORM FARMER-OWNED BUSINESSES, GAIN ACCESS TO FINANCING AND LINK TO BUYERS. WE ALSO PROMOTED THE GROWTH OF KENYA'S BUSINESS SECTOR THROUGH WIDE-SCALE ENTREPRENEURSHIP PROGRAMS - INCLUDING A NATIONAL BUSINESS PLAN COMPETITION THAT ATTRACTED MORE THAN 5,000 APPLICANTS IN 2007.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE B		4,344,163.

DESCRIPTION OF PROGRAM SERVICE THREE

GHANA: TECHNOSERVE/GHANA WORKED ACROSS VARIOUS SECTORS, INCLUDING CASHEW, COCOA, HORTICULTURE (INCLUDING PINEAPPLE, PAPAYA AND MANGO) AND SALT, TO HELP FARMERS IMPROVE THE QUALITY AND QUANTITY OF THEIR CROPS, LINK TO BETTER MARKETS AND IMPROVE THEIR BUSINESS SKILLS. TECHNOSERVE ALSO WORKED TO TRAIN THOUSANDS OF FARMERS TO BETTER GROW AND SELL CROPS SUCH AS PEANUTS, ONIONS AND MAIZE; LINKS TO SOURCES OF CREDIT AND MARKETS WERE FACILITATED. WE ALSO HELPED SEVERAL RICE BUSINESSES BOOST PRODUCTIVITY, INTRODUCE VALUE-ADDED PROCESSING TO MEET LOCAL MARKET DEMANDS AND REDUCE THE COUNTRY'S DEPENDENCE ON RICE IMPORTS. ON A WIDER SCALE, TECHNOSERVE HELPED ASPIRING ENTREPRENEURS TO BETTER DEVELOP THEIR BUSINESS IDEAS AND CONNECT WITH FINANCIERS THROUGH OUR SUCCESSFUL BUSINESS PLAN COMPETITION MODEL. WITH THE SUPPORT OF GOOGLE.ORG, TECHNOSERVE ALSO GATHERED INDUSTRY STAKEHOLDERS TO IDENTIFY SPECIFIC OPPORTUNITIES AND PRIORITIZE POLICY REQUIREMENTS TO FOSTER THE DEVELOPMENT OF THE BIOFUELS AND AQUACULTURE INDUSTRIES, TWO SECTORS IN WHICH GHANA HAS A STRONG NATURAL COMPARATIVE ADVANTAGE.

TO FORM 990, PART III, LINE C

GRANTS	EXPENSES
_____	3,620,972.
=====	=====

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 6

DESCRIPTION OF PROGRAM SERVICE FOUR

NICARAGUA: TECHNOSERVE/NICARAGUA HELPED BUSINESSES IN KEY AGRICULTURAL SECTORS REACH BETTER-PAYING MARKETS THROUGH IMPROVEMENTS IN QUALITY STANDARDS, MANAGEMENT AND ACCESS TO CREDIT AND BUYERS. TECHNOSERVE HELPED TWO COFFEE COOPERATIVES PRODUCE AND SELL MORE LUCRATIVE SPECIALTY COFFEE. WE ALSO HELPED FARMER COOPERATIVES IN REGIONS PRODUCING LOW-QUALITY COFFEE TO DIVERSIFY INTO MORE PROFITABLE CROPS SUCH AS ROOT VEGETABLES. HUNDREDS OF SMALL-SCALE FARMERS EARNED HIGHER INCOMES AND HUNDREDS OF NEW PROCESSING AND PACKING JOBS WERE GENERATED. TECHNOSERVE WORKED WITH DAIRY PRODUCERS TO HELP THEM GAIN ACCESS TO HIGHER-PAYING BUT MORE DEMANDING EXPORT MARKETS, CONTRIBUTING TO INCREASED INCOMES FOR THOUSANDS OF SMALL-SCALE MILK PRODUCERS. WE ALSO RAN A SUCCESSFUL BUSINESS PLAN COMPETITION, LAUNCHING OR EXPANDING DOZENS OF BUSINESSES.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE D	_____	_____
		2,580,342.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III STATEMENT 7

EXPLANATION

TECHNOSERVE HELPS ENTREPRENEURIAL MEN AND WOMEN IN POOR RURAL AREAS OF THE DEVELOPING WORLD TO BUILD BUSINESSES THAT CREATE INCOME, OPPORTUNITY AND ECONOMIC GROWTH FOR THEIR FAMILIES, THEIR COMMUNITIES AND THEIR COUNTRIES.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 8

DESCRIPTION OF OTHER PROGRAM SERVICES

RWANDA: TO HELP RWANDA REPOSITION ITSELF AS A LEADING PRODUCER OF SPECIALTY COFFEE, TECHNOSERVE/RWANDA PROVIDED TRAINING AND SUPPORT TO COFFEE COOPERATIVES. OUR BUSINESS ADVISORS HELPED FARMERS BOOST PRODUCTION AND IMPROVE QUALITY, WHILE PROVIDING TRAINING IN BASIC

GRANTS AND ALLOCATIONS	EXPENSES
_____	_____

BUSINESS SKILLS. TECHNOSERVE ALSO FACILITATED ACCESS TO FINANCING AND LINKED THE FARMERS TO SPECIALTY BUYERS - THE SEGMENT OF THE GLOBAL MARKET THAT CONTINUES TO GROW AND PAY HIGHER PRICES. THE INCOMES OF THESE COFFEE FARMERS WILL DOUBLE WITHIN FOUR YEARS, BENEFITING THEMSELVES, THEIR FAMILIES AND THEIR COMMUNITIES.

0. 366,365.

SOUTH AFRICA: THROUGH A NATIONAL BUSINESS PLAN COMPETITION, TECHNOSERVE/SOUTH AFRICA HELPED ASPIRING ENTREPRENEURS TURN BUSINESS IDEAS INTO VIABLE BUSINESS PLANS. WE ALSO WORKED WITH FARMERS AND PROCESSORS IN THREE KEY REGIONS. IN KWAZULU-NATAL, WE SUPPORTED THE ONLY CASHEW NUT PROCESSOR IN THE COUNTRY AND HELPED SET UP A PINEAPPLE AND VEGETABLE FARM. IN THE MARULENG AND BUSHBUCKRIDGE DISTRICT, WE WORKED WITH AN ORGANIC BANANA JUICE COMPANY, A POULTRY COOPERATIVE AND A VEGETABLE COOPERATIVE TO IMPROVE BUSINESS PRACTICES AND LINK TO NEW OR BETTER MARKETS. IN MPUMALANGA, TECHNOSERVE WORKED WITH TWO SUGARCANE COOPERATIVES TO DEVELOP BUSINESS PLANS AND SECURE FINANCING. TECHNOSERVE ALSO HELPED RUN THE AFRICA LEADERSHIP INITIATIVE SEMINAR SERIES.

0. 1,153,321.

SWAZILAND: TECHNOSERVE/SWAZILAND HELPED ASPIRING YOUNG ENTREPRENEURS TO TURN THEIR BUSINESS IDEAS INTO REALITY THROUGH A NATIONAL BUSINESS PLAN COMPETITION. ADDITIONALLY, WE DEVELOPED AN INNOVATIVE AFTER-SCHOOL PROGRAM, SCHOOL-AGE YOUTH ENTREPRENEURSHIP (SAYE), TO INSPIRE YOUNG PEOPLE AND TEACH THEM ABOUT THE WORLD OF BUSINESS. TECHNOSERVE ALSO HELPED LOCAL VEGETABLE FARMERS TO DEVELOP MARKETING ORGANIZATIONS AND PLANS THAT WOULD ALLOW THEM TO SELL INTO EXPORT MARKETS. OTHER HORTICULTURAL ACTIVITIES INCLUDED BOOSTING PRODUCTION OF BANANAS AND PINEAPPLES AND INTRODUCING PRODUCTION OF OTHER HIGH-VALUE EXPORT CROPS, SUCH AS BLUEBERRIES AND CHILI PEPPERS. TECHNOSERVE WORKED WITH FARMER GROUPS TO DIVERSIFY INTO SOY AND OTHER FEEDS TO MEET THE NEEDS OF A GROWING LIVESTOCK INDUSTRY. TECHNOSERVE ALSO BEGAN WORKING TO DEVELOP THE ORGANIC COTTON INDUSTRY AND WAS INVOLVED IN THE HONEY INDUSTRY.

0. 1,052,604.

UGANDA

TECHNOSERVE/UGANDA WORKED WITH SMALL-SCALE FARMERS AND FRESH PRODUCE BUSINESSES TO TAP INTO A GROWING DOMESTIC DEMAND FOR FRESH FOOD. WE HELPED THOUSANDS OF FARMERS GROW EXOTIC PRODUCE SUCH AS CAULIFLOWER AND COLLARD GREENS, IN ADDITION TO MORE TRADITIONAL FRUITS SUCH AS MANGOES. WE ALSO WORKED IN THE MATOOKE (GREEN BANANAS) SECTOR TO LINK ORGANIZED FARMERS DIRECTLY TO URBAN WHOLESALERS. WE HELPED MATOOKE TRADERS ENTER BETTER-PAYING AND MORE STABLE INSTITUTIONAL MARKETS.

0. 235,836.

AFRICA REGION: THESE FUNDS SUPPORTED MULTI-COUNTRY ACTIVITIES SUCH AS TRAINING AND KNOWLEDGE SHARING, AS WELL AS OPPORTUNITY STUDIES FOR SECTORS AND COUNTRIES WHERE TECHNOSERVE DID NOT HAVE A PREVIOUSLY ESTABLISHED PROGRAM.

0. 429,630.

INDIA: SIXTY YEARS AFTER INDEPENDENCE, INDIA'S BOOMING URBAN ECONOMY - BASED ON THE HIGH-TECH, MANUFACTURING, TEXTILES AND SERVICES INDUSTRIES - HAS CREATED NEW OPPORTUNITIES FOR MILLIONS. HOWEVER, SOME 250 MILLION INDIANS CONTINUE TO LIVE IN RURAL POVERTY. TWO-THIRDS OF INDIA'S 1.1 BILLION PEOPLE DEPEND ON AGRICULTURE FOR THEIR INCOMES, PRIMARILY AT A SMALL-SCALE OR SUBSISTENCE LEVEL. TECHNOSERVE BEGAN WORKING IN INDIA TO HELP FARMERS IMPROVE AGRICULTURAL PRACTICES, PRODUCE HIGHER-VALUE ITEMS AND ACCESS NEW, MORE PROFITABLE MARKETS. WE ALSO BEGAN EXPLORING OPPORTUNITIES IN ALTERNATIVE ENERGY, ENTREPRENEUR TRAINING AND OTHER AREAS.

0. 369,167.

COLOMBIA: TECHNOSERVE/COLOMBIA LAID THE GROUNDWORK TO LAUNCH A NATIONAL BUSINESS PLAN COMPETITION IN 2008. THE PROGRAM WILL FOCUS ON SMALL AND MEDIUM BUSINESSES THAT BENEFIT PEOPLE AT THE BOTTOM OF THE ECONOMIC PYRAMID BY GENERATING JOBS AND MARKETS WHILE ALSO INCREASING THE SUPPLY OF HIGH-QUALITY, AFFORDABLE GOODS AND SERVICES. TECHNOSERVE CONTINUED WORK WITH NESTLE'S NESPRESSO BUSINESS UNIT TO HELP 3,500 SMALL-SCALE FARMERS IN THREE COOPERATIVES INCREASE THEIR PRODUCTION OF HIGH-QUALITY, SUSTAINABLY PRODUCED COFFEE TO MEET NESPRESSO'S INCREASING GLOBAL DEMAND. THE PROGRAM HELPED THE COOPERATIVES IMPROVE THEIR PRODUCTION, PROCESSING AND BUSINESS MANAGEMENT PRACTICES.

0. 273,397.

EL SALVADOR: TECHNOSERVE DEBUTED ITS NATIONAL BUSINESS PLAN COMPETITION MODEL IN EL SALVADOR IN 2002. SINCE THEN, TECHNOSERVE/EL SALVADOR HAS RUN FIVE COMPETITIONS. MORE THAN 150 BUSINESSES HAVE BEEN LAUNCHED OR EXPANDED, EARNING INCREMENTAL REVENUES EXCEEDING \$15 MILLION AND CREATING HUNDREDS OF NEW JOBS. WE ALSO RAN A YOUTH ENTREPRENEURSHIP INITIATIVE, BENEFITING THOUSANDS OF YOUNG SALVADORANS. TECHNOSERVE WORKED WITH DAIRY PRODUCERS AND PROCESSORS TO GAIN ACCESS TO HIGHER-PAYING BUT MORE DEMANDING EXPORT MARKETS. TECHNOSERVE LAUNCHED A PILOT PROJECT TO TEACH YOUTHS WHO HAVE GROWN UP IN SUGARCANE FAMILIES TO PROFITABLY FARM MORE LUCRATIVE AND LESS RISKY PRODUCTS, SUCH AS TOMATOES AND CASSAVA.

0. 909,370.

GUATEMALA: TECHNOSERVE/GUATEMALA BEGAN EXPLORING OPPORTUNITIES TO DEVELOP A BIOFUEL INDUSTRY, HELPING

SIX COMMUNITIES OF SMALL-SCALE FARMERS GROW JATROPHA CROPS. IN ADDITION, WE RAN A SUCCESSFUL NATIONAL BUSINESS PLAN COMPETITION, WHILE TECHNOSERVE BUSINESS ADVISORS HELPED EXPAND A LETTUCE PRODUCER'S BUSINESS AND AIDED A COOPERATIVE IN PRODUCING SOUGHT-AFTER HORTICULTURAL CROPS. WE ALSO WORKED WITH A SMALL MUSHROOM PRODUCER TO EXPAND PRODUCTION, PROVIDING AN OPPORTUNITY FOR MORE THAN 300 FAMILIES TO SUBSTANTIALLY INCREASE THEIR INCOMES BY FARMING ORGANIC MUSHROOMS. TECHNOSERVE ADVISORS HELPED A MAYA NUT BUSINESS OWNED BY MORE THAN 50 LOW-INCOME WOMEN TO INCREASE THEIR PRODUCTION AND DEVELOP A MARKETING CAMPAIGN.

0. 512,951.

HONDURAS: TECHNOSERVE/HONDURAS FOCUSED ON REBUILDING AND MODERNIZING KEY INDUSTRIES, MAKING THEM MORE PROFITABLE TO GENERATE JOBS AND INCOMES FOR THE RURAL POOR. WE WORKED WITH SEVEN PILOT GROUPS IN THE COCOA SECTOR, THE GOVERNMENT AND INTERNATIONAL CHOCOLATE MANUFACTURERS TO DEVELOP THE FINE COCOA INDUSTRY. WE IDENTIFIED FINE COCOA GENETIC MATERIAL AND WORKED WITH FARMERS TO IMPROVE THEIR GROWING, HARVESTING AND PROCESSING TECHNIQUES. TO HELP THE COFFEE INDUSTRY LIVE UP TO ITS POTENTIAL TO BENEFIT THE RURAL POOR, TECHNOSERVE HELPED PRODUCERS FROM FIVE GROUPS PRODUCE HIGHER-QUALITY COFFEE IN ORDER TO GAIN ACCESS TO MORE LUCRATIVE PREMIUM MARKETS. TECHNOSERVE HELPED DAIRY PRODUCERS GAIN ACCESS TO HIGHER-PAYING BUT MORE DEMANDING DOMESTIC AND REGIONAL MARKETS, SIMULTANEOUSLY IMPROVING QUALITY AND INCREASING PROFITS. WE ALSO WORKED TO DEVELOP A SUSTAINABLE HORTICULTURAL SECTOR BY FOCUSING ON CROPS - SUCH AS ROOTS AND TUBERS, HOT AND SWEET PEPPERS AND COOL-WEATHER VEGETABLES - THAT LEVERAGE HONDURAS' NATURAL COMPARATIVE ADVANTAGES. WE LAUNCHED HONDURAS' FIRST NATIONAL BUSINESS PLAN COMPETITION IN 2007.

0. 1,490,507.

TANZANIA: TECHNOSERVE/TANZANIA CONTINUED ITS WORK WITH FARMERS, COOPERATIVES, SUPPLIERS AND PROCESSORS TO STRATEGICALLY DEVELOP COMPETITIVE RURAL INDUSTRIES AROUND KEY CROPS SUCH AS CASHEW NUT, COFFEE, TEA AND ARTEMISIA (AN HERB USED IN THE PRODUCTION OF THE MOST EFFECTIVE TREATMENT FOR MALARIA). WE HELPED 2,500 TANZANIAN FARMERS TO PRODUCE AND MARKET ARTEMISIA CROPS AND LINKED THEM TO A REGIONAL EXTRACTION PLANT. THE NEARLY 10,000 MEMBERS OF KILICAFE, A TECHNOSERVE-ASSISTED COFFEE ASSOCIATION, CONTINUED TO BENEFIT FROM IMPROVED QUALITY, INCREASED KNOWLEDGE AND A MORE COMPETITIVE INDUSTRY THAT ALLOWED THEM TO SELL DIRECTLY TO OVERSEAS BUYERS, SUCH AS STARBUCKS AND PEET'S COFFEE & TEA. WE ALSO BEGAN TO ORGANIZE BANANA FARMERS AND TEACH THEM TO GROW BETTER BANANAS AND RUN THEIR BUSINESSES EFFECTIVELY. IN THE TEA SECTOR,

TECHNOSERVE HELPED 1,000 SMALL-SCALE FARMERS IMPROVE THE QUALITY OF THE TEA THEY PRODUCE. MORE BROADLY, WE ALSO SUPPORTED THE DIVERSIFICATION OF TANZANIA'S ECONOMY THROUGH ENTREPRENEURSHIP PROGRAMS THAT EMPOWER MEN AND WOMEN TO CREATE THRIVING BUSINESSES IN A VARIETY OF SECTORS.

0. 2,183,436.

PERU: TECHNOSERVE LAID THE GROUNDWORK TO INTRODUCE ITS SUCCESSFUL BUSINESS PLAN COMPETITION MODEL TO HELP THE COUNTRY'S NASCENT ENTREPRENEURS TURN GOOD IDEAS INTO THRIVING, GROWTH-ORIENTED BUSINESSES. WE ALSO IDENTIFIED AND SUPPORTED YOUNG ENTREPRENEURS, TRAINING THEM IN SUBJECTS SUCH AS MANAGEMENT, OPERATIONS AND ACCOUNTING. TECHNOSERVE ADVISORS WORKED WITH FARMERS IN THE HUANCAYO REGION TO GROW AN ARTICHOKE INDUSTRY. IN ADDITION, WE WORKED WITH MINERA YANACOCCHA, SOUTH AMERICA'S LARGEST GOLD PRODUCER, TO HELP SMALL RURAL ENTERPRISES CAPITALIZE ON THE MINE'S PRESENCE IN THE POVERTY-PLAGUED AREA OF CAJAMARCA. IN PHASE ONE, WE SUPPORTED 22 LOCAL BUSINESSES THAT FOCUSED FIRST ON SUPPLYING THE MINE'S CATERING FACILITIES AND THEN EXPANDED TO SERVE REGIONAL AND INTERNATIONAL MARKETS, CREATING JOBS AND BOOSTING THE INCOMES OF THEIR LOCAL SUPPLIERS. IN 2007, WE WORKED WITH 19 BUSINESSES TO LEVERAGE THE SUPPLY NEEDS OF THE MINE AND EXPAND INTO NEW MARKETS.

0. 735,165.

COFFEE INITIATIVE: TECHNOSERVE CONDUCTED AN ANALYSIS OF THE PREMIUM COFFEE MARKET, CONSULTED WITH A VARIETY OF INDUSTRY STAKEHOLDERS AND CONDUCTED FIELD RESEARCH TO DESIGN A PROGRAM TO INCREASE THE INCOMES OF FARMERS GROWING COFFEE IN EAST AFRICA.

0. 396,546.

STRATEGIC INITIATIVES: THESE FUNDS SUPPORTED MANAGEMENT AND OVERSIGHT OF VOLUNTEER BUSINESS CONSULTANTS PLACED IN TECHNOSERVE AREAS OF OPERATION TO HELP DEVELOP INDUSTRIES AND CLIENT BUSINESSES AND INCREASE THE CAPACITY OF OUR STAFF. A PORTION ALSO FUNDED A STUDY OF THE MOST EFFICIENT MEANS OF SECURING CAPITAL FOR TECHNOSERVE CLIENT BUSINESSES.

0. 295,236.

TOTAL TO FORM 990, PART III, LINE E

10403531.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 9

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE & EQUIPMENT	437,765.	405,188.	32,577.
VEHICLES	2,722,567.	2,053,980.	668,587.
LEASEHOLD IMPROVEMENTS	556,339.	95,895.	460,444.
TOTAL TO FORM 990, PART IV, LN 57	3,716,671.	2,555,063.	1,161,608.

FORM 990 OTHER SECURITIES STATEMENT 10

SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
ANNUITIES	COST	203,239.
TO FORM 990, LINE 54B, COL B		203,239.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 11

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
E.D.C.S.	COST			2,049.	2,049.
TO FORM 990, LINE 54A, COL B				2,049.	2,049.

FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 12

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
BRUCE MCNAMER 49 DAY ST. NORWALK, CT 06854-4901	PRESIDENT & CEO 40.00	317,574.	33,357.	0.
SIMON WINTER 49 DAY ST. NORWALK, CT 06854-4901	SENIOR VP, DEVELOPMENT 40.00	160,718.	23,640.	0.
DAVID BROWNING 49 DAY ST. NORWALK, CT 06854-4901	VP, COFFEE INITIATIVE 40.00	141,654.	18,722.	0.
STACEY DAVES-OHLIN 49 DAY ST. NORWALK, CT 06854-4901	GENERAL COUNSEL 40.00	125,375.	30,230.	0.
EDUARDO ALMEIDA 49 DAY ST. NORWALK, CT 06854-4901	VP, LATIN AMERICAN 40.00	163,496.	24,785.	0.
JAMES NEHMER 49 DAY ST. NORWALK, CT 06854-4901	CFO 40.00	7,308.	1,370.	0.
SANDRA JETTEN 49 DAY ST. NORWALK, CT 06854-4901	VP, AFRICA 40.00	154,276.	18,513.	0.
SEGUN AGANGA 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
GERALD BALDWIN 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
THOMAS C. BARRY 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
JENNIFER BULLARD BROGGINI 49 DAY ST. NORWALK, CT 06854-4901	SECRETARY 2.00	0.	0.	0.

BETH BROOKE 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
MICHAEL BUSH 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
ROBERT CALHOUN 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
JOHN CARON 49 DAY ST. NORWALK, CT 06854-4901	VICE CHAIRMAN 2.00	0.	0.	0.
DAVID DE FERRANTI 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
PETER A. FLAHERTY 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
BRUCE HEEREMA 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
STACEY D. LINDSAY 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
THILO MANNHARDT 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
WILLIAM MCCOMB 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
ROBERT MURRAY MEZA 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
TIM MOTT 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.
ALI A. MUFURUKI 49 DAY ST. NORWALK, CT 06854-4901	DIRECTOR 2.00	0.	0.	0.

FORM 990	NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST	STATEMENT 14
----------	--	--------------

NAME OF COUNTRY

GHANA
 KENYA
 TANZANIA
 MOZAMBIQUE
 RWANDA
 SOUTH AFRICA
 SWAZILAND
 UGANDA
 GUATEMALA
 EL SALVADOR
 PERU
 NICARAGUA
 HONDURAS
 COLOMBIA
 POLAND
 INDIA

FORM 990	NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS AN OFFICE	STATEMENT 15
----------	---	--------------

NAME OF COUNTRY

GHANA
 KENYA
 TANZANIA
 MOZAMBIQUE
 RWANDA
 SOUTH AFRICA
 SWAZILAND
 UGANDA
 GUATEMALA
 EL SALVADOR
 PERU
 NICARAGUA
 HONDURAS
 COLOMBIA
 POLAND
 INDIA

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.		
Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization TECHNOSERVE INC.	Employer identification number 13-2626135
	Number, street, and room or suite no. If a P.O. box, see instructions. 49 DAY ST.	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NORWALK, CT 06854-4901	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of _____
Telephone No. _____ FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.
- 4 I request an additional 3-month extension of time until **NOVEMBER 15, 2008.**
- 5 For calendar year **2007**, or other tax year beginning _____, and ending _____.
- 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 7 State in detail why you need the extension

INFORMATION REQUIRED TO FILE A COMPLETE AND ACCURATE RETURN WILL NOT BE AVAILABLE UNTIL AFTER THE FIRST EXTENDED DUE DATE.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	\$	
8b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	\$	
8c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	\$	N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title **ACCOUNTANT** Date 

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization TECHNOSERVE INC.	Employer identification number 13-2626135
	Number, street, and room or suite no. If a P.O. box, see instructions. 49 DAY ST.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NORWALK, CT 06854-4901	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **JOHN TAYLOR**
Telephone No. ▶ **203-852-0377** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2008**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year **2007** or
 ▶ tax year beginning _____, and ending _____.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.