** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

| A | For the | 2020 calendar year, or tax year beginning | and | ending | | | | | |
|--------------|----------------------------|--|--------------------------|-------------------|----------------------|----------------|-----------------------------|--|--|
| | Check if applicable: | C Name of organization | | | D Employer i | dentifica | ation number | | |
| | Address | INTERNET SOCIETY FOUNDATION | | | | | | | |
| | Name change | Doing business as | | | 82-328 | 5688 | | | |
| | Initial return Final | Number and street (or P.O. box if mail is not delivered to str 11710 PLAZA AMERICA DRIVE | , | Room/suite 400 | E Telephone r | | | | |
| | ☐return/ termin- ated | City or town, state or province, country, and ZIP or fore | | | | | | | |
| | □Amende | | igri postal code | | | | | | |
| F | return Applica tion | · | 77 N | | H(a) Is this a g | • | | | |
| L | tiòn pending | · · · · · | VAIN | | for subord | | | | |
| _ | | SAME AS C ABOVE | | | H(b) Are all subord | | | | |
| <u> </u> | Tax-exe | mpt status: \boxed{X} 501(c)(3) $$ 501(c) () $$ (insert | no.) 4947(a)(1) | or 527 | 1 | | st. See instructions | | |
| | | HTTPS://WWW.ISOCFOUNDATION.ORG | | | H(c) Group exe | | | | |
| | | organization: X Corporation Trust Association Summary | Other | L Year | of formation: 201 | 7 M | State of legal domicile: DC | | |
| | _ | - | THE THE | TEDNET CO | CIETY FOIND | лтом | | | |
| Governance | 1 E | Briefly describe the organization's mission or most significant XXISTS TO DEMONSTRATE AND SUPPORT THE POSITIVE | | | CIEII FOONDA | TION | | | |
| r E | 2 (| Check this box if the organization discontinued its | operations or dispos | sed of more | than 25% of its | net asse | ts. | | |
| Ş | 3 1 | Number of voting members of the governing body (Part VI, lin | e 1a) | | | 3 | 12 | | |
| ၓ | 4 1 | Number of independent voting members of the governing boo | | | | | 12 | | |
| ø | 5 7 | otal number of individuals employed in calendar year 2020 (F | | | | | 5 | | |
| Activities & | 6 7 | otal number of volunteers (estimate if necessary) | | | | | 17 | | |
| Ę | 727 | otal unrelated business revenue from Part VIII, column (C), lii | | | | | 0. | | |
| ¥ | 'a' | Net unrelated business taxable income from Form 990-T, Part | | | | 7b | 0. | | |
| _ | " | vet difference business taxable meetile from 1 om 550 1,1 art | . 1, 11110 11 | | Prior Year | 1,12 | Current Year | | |
| | 8 (| Contributions and grants (Part VIII, line 1h) | | | 32,505 | 894 | 26,818,395. | | |
| ne | 9 F | (5 | | | 02,000 | 0. | 0. | | |
| Revenue | 40 | | | | 2,023 | - + | 1,200,456. | | |
| Be | 10 | nvestment income (Part VIII, column (A), lines 3, 4, and 7d) | | | 2,025 | 0. | 1,200,430. | | |
| | 1 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, a | | 24 520 | | | | | |
| | 1 | otal revenue - add lines 8 through 11 (must equal Part VIII, c | | | 34,529 | | 28,018,851. | | |
| | 1 | Grants and similar amounts paid (Part IX, column (A), lines 1-3 | 3) | | 8,701, | | 15,356,807. | | |
| | 1 | | | | 000 | 0. | 0. | | |
| es | 15 9 | Salaries, other compensation, employee benefits (Part IX, colu | | | 920, | 536. | 1,298,485. | | |
| Expenses | 16 a F | Professional fundraising fees (Part IX, column (A), line 11e) \dots | | | | 0. | 0. | | |
| ă× | . b⊺ | otal fundraising expenses (Part IX, column (D), line 25) | • | 0. | | | | | |
| Ш | " | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | | | 355. | 850,912. | | |
| | 18 7 | otal expenses. Add lines 13-17 (must equal Part IX, column (| A), line 25) | | 10,083 | | 17,506,204. | | |
| | | Revenue less expenses. Subtract line 18 from line 12 | | | 24,445 | 656. | 10,512,647. | | |
| t Assets or | 3 | | | Be | ginning of Current | Year | End of Year | | |
| sets | 20 7 | otal assets (Part X, line 16) | | | 70,511, | 620. | 101,710,445. | | |
| AS | 21 7 | otal liabilities (Part X, line 26) | | | 560 | 149. | 13,309,869. | | |
| Net | 22 1 | Net assets or fund balances. Subtract line 21 from line 20 | | | 69,951, | 471. | 88,400,576. | | |
| P | art II | Signature Block | | | | | | | |
| Und | ler penal | ties of perjury, I declare that I have examined this return, including ac | companying schedule | s and stateme | ents, and to the bes | st of my k | knowledge and belief, it is | | |
| true | , correct | , and complete. Declaration of preparer (other than officer) is based of | on all information of wh | nich preparer | has any knowledg | Э. | | | |
| | | | | | | | | | |
| Sig | n | Signature of officer | | | Date | | | | |
| Hei | | ANDREW SULLIVAN, CHIEF EXECUTIVE OFFICER | | | | | | | |
| | | Type or print name and title | | | | | | | |
| | | Print/Type preparer's name Preparer's | signature . | > [| | heck | PTIN | | |
| Pai | | VILLIAM E TURCO, CPA | (1)00-11 | (c) 1: | 1/08/21 ii | elf-employed | P00369217 | | |
| | F | Firm's name RSM US LLP | ~~~ | | Firm's E | | 42-0714325 | | |
| | · | Firm's address 9801 WASHINGTONIAN BLVD, STE 500 | <u> </u> | | | | | | |
| | , | GAITHERSBURG, MD 20878 | | | Phone | nn 301- | 296-3600 | | |
| N/0 | , the ID | S discuss this return with the preparer shown above? See ins | atructions. | | [1 HOHO I | | X Ves No | | |

| | 1990 (2020) INTERNET SOCIETY FOUNDATION | 82-3285688 | Page 2 |
|-----------|--|--------------------------|----------|
| | rt III Statement of Program Service Accomplishments | | <u> </u> |
| | Check if Schedule O contains a response or note to any line in this Part III | | Х |
| 1 | Briefly describe the organization's mission: | | <u> </u> |
| | THE INTERNET SOCIETY FOUNDATION EXISTS TO SUPPORT THE POSITIVE | | |
| | DIFFERENCE THE INTERNET CAN MAKE TO PEOPLE EVERYWHERE. IT PROMOTES THE | | |
| | DEVELOPMENT OF THE INTERNET AS A GLOBAL TECHNICAL INFRASTRUCTURE, A | | |
| | RESOURCE TO ENRICH PEOPLE'S LIVES, AND A FORCE FOR GOOD IN SOCIETY. | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | | |
| 2 | , | Yes | X No |
| | prior Form 990 or 990-EZ? | 1es | NO |
| • | If "Yes," describe these new services on Schedule O. | | V N. |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | Yes | LA No |
| | If "Yes," describe these changes on Schedule O. | | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as m | | |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others | , the total expenses, an | ıd |
| | revenue, if any, for each program service reported. | | |
| 4a | (Code:) (Expenses \$12,742,209. including grants of \$12,742,209.) (Revenue | \$ |) |
| | INTERNET ENGINEERING TASK FORCE: | | |
| | THE FOUNDATION SUPPORTS THE WORK OF THE INTERNET ENGINEERING TASK | | |
| | FORCE, A 501(C)(3) ORGANIZATION UNDER THE INTERNET SOCIETY UMBRELLA | | |
| | THAT STRIVES TO MAKE THE INTERNET WORK BETTER BY PRODUCING HIGH | | |
| | QUALITY, RELEVANT TECHNICAL DOCUMENTS THAT INFLUENCE THE WAY PEOPLE | | |
| | DESIGN, USE, AND MANAGE THE INTERNET. | | |
| | | | |
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| | | | |
| | 1 520 452 | | |
| 4b | (Code:) (Expenses \$1,538,452. including grants of \$1,168,535. RESILIENCY AND RESPONDING TO EMERGENCY (RARE): THE FOUNDATION LAUNCHED | |) |
| | | | |
| | A GRANT PROGRAM IN 2020 TO FUND ORGANIZATIONS THAT WERE HELPING SOME | | |
| | COMMUNITIES IMPACTED BY THE PANDEMIC. THE PROGRAM WAS CALLED: | | |
| | EMERGENCY RESPONSE: COVID-19. | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 4c | (Code:) (Expenses \$ 1,000,848. including grants of \$ 760,195.) (Revenue | . \$ | ١ |
| 70 | STRENGTHENING COMMUNITIES, IMPROVING LIVES AND LIVELIHOODS (SCILLS): | | |
| | EXPANDING ECONOMIC GROWTH, IMPROVING HEALTH OUTCOMES AND INCREASING | | |
| | EDUCATIONAL OPPORTUNITIES BY SUPPORTING INDIVIDUALS AND COMMUNITIES TO | | |
| | MORE KNOWLEDGEABLY AND SKILLFULLY USE THE INTERNET. | | |
| | MORE KNOWLEDGEABLY AND SKILLFOLLY USE THE INTERNET. | | |
| | | | |
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| | | | |
| | | | |
| | | | |
| 4d | Other program services (Describe on Schedule O.) | | |
| Tu | (Expenses \$ 902,993. including grants of \$ 685,868.) (Revenue \$ | ١ | |
| 10 | 46.404.500 |) | |
| <u>4e</u> | Total program service expenses 16,184,502. | | 00 / |

Form 990 (2020) INTERNET SOCIETY F Part IV Checklist of Required Schedules

| | | | Yes | No |
|-----|--|-----|-----|-------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A | 1_ | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | Х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| | during the tax year? If "Yes," complete Schedule C, Part II | 4 | Х | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | | |
| | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | l |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | Х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | l |
| | Schedule D, Part III | 8 | | Х |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | | |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | ١., |
| | If "Yes," complete Schedule D, Part IV | 9_ | | Х |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | ١ | | |
| | or in quasi endowments? If "Yes," complete Schedule D, Part V | 10 | | Х |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | | | |
| | as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | х | |
| | Part VI | 11a | Λ | |
| D | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total | 446 | х | |
| _ | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total | 11b | 21 | |
| C | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | x |
| ч | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in | 110 | | |
| u | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | x |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| - | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | | х |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | Х | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Х |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Х | |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | |
| | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | Х | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | |
| | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | Х | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | Х | |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | Х |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | |
| | complete Schedule G, Part III | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | Х |
| | , | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | v | |
| | domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II | 21 | Х | l |

Form 990 (2020) INTERNET SOCIETY FOUNDATION Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|-------------|---|-----|-----|--|
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | Х |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | Х | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No," go to line 25a | 24a | | x |
| h | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | 275 | | |
| · | | 24c | | |
| | any tax-exempt bonds? | 24d | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 240 | | _ |
| 2 5a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | 05- | | x |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | X |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | | | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | Х | |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, | | | |
| | creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | | | |
| | entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | Х |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| | instructions, for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If | | | |
| | "Yes," complete Schedule L, Part IV | 28a | | х |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | Х |
| | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If | | | |
| | "Yes," complete Schedule L, Part IV | 28c | | x |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | х |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| 00 | contributions? If "Yes," complete Schedule M | 30 | | x |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | x |
| 32 | Did the organization required to the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete | 31 | | |
| 32 | , , | 20 | | x |
| 20 | Schedule N, Part II | 32 | | |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | _v |
| 0.4 | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | v | |
| | Part V, line 1 | 34 | X | - v |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | <u> </u> |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | Х |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | | |
| | Note: All Form 990 filers are required to complete Schedule O | 38 | X | |
| Par | t V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | | |
| | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c | Х | |
| | | _ | | |

Form 990 (2020) INTERNET SOCIETY FOUNDATION

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

| 22 Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, 2a 5 16 If the cleaned year entering with or within the year covered by this return 25 If the least one is reported on line 2a, did the organization file all required tederal employment tax returns? 26 Note: If the sum of lines it and 2a is greater than 250, you may be required to e-file (see instructions). 37 Did the organization have unrelated business gross income of \$1,000 or more during the year? 38 A X Tay Time during the celearder year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country by early of Wo'r to line 3b, provide an explanation on Schedule 0 39 If "Ves," that it filed a Foreign country by See instructions for filing requirements for FinCSN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 30 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 31 End of any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 32 End of the organization that was or is a party to a prohibited tax shelter transaction? 33 End of Wage and the organization file from 888-17 34 End of the organization party to a quantity of the prohibited tax shelter transaction? 35 End of Wage and the organization that it was or is a party to a prohibited tax shelter transaction? 36 End of Wage and the organization that it was or is a party to a prohibited tax shelter transaction? 36 End of Wage and the organization that was or is a party to a prohibited tax shelter transaction? 37 End of Wage and the organization include with every solicitation an express statement that such contributions solid any contributions between not tax deductibles of authralate contributions? 38 End of Wage and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles a Charlatale contributions? 39 | | | | | Yes | No | | | | |
|--|-----|--|------------------------|------|-----|----------------|--|--|--|--|
| b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to a_nbe (see instructions) 3a | 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | | | | | | |
| Note: if the sum of lines 1a and 2a is greater than 250, you may be required to g-file (see instructions) 30 Did the organization have unrelated business gross income of \$1,000 or more during the year? 41 A tary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? of the sub-file account? 42 A tary 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? 43 A X 44 B If "Yes," enter the name of the foreign country Is the same about a sub-file account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR). 53 Was the organization a party to a prohibitod tax shelter transaction at any time during the tax year? 54 Did any extrabule party neitly the organization file Form 8886-17 55 Did any contributions that were not tax eductable as charlable contributions? 56 Did any contributions that were not tax eductable as charlable contributions? 57 Did foreign the such as the comparization include with every solicitation an express statement that such contributions or gifts were not tax deductable as charlable contributions and express that the such contributions or gifts were not tax deductable as charlable contributions and express that the such contributions or gifts were not tax deductable as charlable contributions? 58 Diff the organization receive a parent in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 59 Diff the organization receive and contributions under section 17(c). 50 Diff the organization receive and contribution or the value of the goods or services provided? 50 Diff the organization received and contribution or the value of the goods or services provided? 50 Diff the organization received and contribution or the sub-payor and the sub-payor and th | | filed for the calendar year ending with or within the year covered by this return | 2a 5 | | | | | | | |
| 3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 5b If Yes, "Nest It filed a Form 9805 for this year? If "No" to fine 3b, provide an explanation on Schedule O 4c 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). She was the organization and the foreign country. 5c Was the organization and the foreign country. 5c Was the organization or party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization to file organization the foreign 8806.7 6c If Yes's to line 5a or 5b, did the organization the Form 8896.7 6c If Yes's to line 5a or 5b, did the organization the Form 8896.7 6c If Yes's to line 5a or 5b, did the organization the Form 8896.7 6c If Yes's to line 5a or 5b, did the organization the form 8896.7 6d If Yes's a file did er organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If Yes's a file or organization that were not tax deductible so charitable contributions under section 170(c). 6d If Yes's a file organization that may receive deductible contributions under section 170(c). 6d If Yes's a file organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the form 8892.7 6d If Yes's a find date the number of Forms 8282 filed during the year 6d If Yes's a find date the number of Forms 8282 filed during the year 6d If Yes's a find date the number of Forms 8282 filed during the year 6d If Yes's a find date the number of Forms 8282 filed during the year 6d If Yes's a find date the number of Forms 8282 filed during the year 7d If Yes's a find date the number of Forms 8282 filed during the year 8d If Yes's a find dat | b | If at least one is reported on line 2a, did the organization file all required federal employment tax return | ns? | 2b | X | | | | | |
| b If "Yes," has it filled a Form 990.T for this year? If "No" to lime 3b, provide an explanation on Schedule O 4a At any time during the calendary 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 accounts? b If "Yes," enter the name of the foreign country [such as a bank account, securities account, or other financial accounts (FBAR). See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). So Was the organization a party to a prohibitor tax shelter transaction? 5b IX If "Yes" to lime 5a or 5b, did the organization file Form 8888 in 2. If "Yes" to lime 5a or 5b, did the organization file Form 8888 in 2. If "Yes," old the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 organizations that were not tax deductible contributions under section 170(c). 8 If "Yes," old the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). 8 If "Yes," old the organization notity the donor of the value of the goods or services provided? 7 organizations may receive deductible contributions under section 170(c). 8 If "Yes," old the organization notity the donor of the value of the goods or services provided? 7 organization sell-exert apprend to the section 170(c). 9 If the organization sell-exert apprend to the section 170(c). 10 If the organization sell-exert apprend to the section 170(c). 11 If yes, "Indicate the number of Forms 8282 filed during the year 12 If If yes," old the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1088-07 12 If the organization received a contribution of cars, boats, airplanes, or other vehicles, d | | Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions | s) | | | | | | | |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country to the financial account in a foreign country ▶ 8 | За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | | 3a | | Х | | | | |
| financial account in a foreign country (such as a bank account, securities account, or other financial account)? b f' Yes," enter the name of the foreign country \(\) Sea instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any stable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c T' Yes' to line Sa or Sb, did the organization file Form 888617 6a Does the organization anual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6b T' Yes," did the organization include with every solicitation an express statement that such contributions or gifts were nor tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d Did the organization receive a payment in excess of \$76 made party is a contribution and party for goods and services provided to the payor? 7a X 7b Did the organization receive apayment in excess of \$76 made party as a contribution and party for goods and services provided to the payor? 7a X 7b Did the organization receive apayment in excess of \$76 made party as a contribution of the value of the goods or services provided? 7b Did the organization received a contribution of payment of the payor of the value of the goods or services provided? 7c Trial 7d Did the organization received a contribution of underectly, to pay premiums on a personal benefit contract? 7c X 7d Did the organization received a contribution of underectly, to pay premiums on a personal benefit contract? 7e X 7f Did the organization received a contribution of underectly or indirectly, to pay premiums on a personal benefit contract? 7e X 7f Did the organization received a contribution of unde | b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule | 0 | 3b | | | | | | |
| b If "Yes," enter the name of the foreign country ▶ See instructions for tiling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF). So Was the organization aparty to a prohibited tax shelter transaction? So D od any taxable party notify the organization file Form 88867? Boes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? So D if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? To Organizations that may receive deductible contributions under section 170(c). But the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To Productions that may receive deductible contributions under section 170(c). But the organization sell, exchange, or otherwise dispose of tangoible personal property for which it was required to file Form 8282? But the organization sell, exchange, or otherwise dispose of tangoible personal property for which it was required to file Form 8282? But the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? But the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required? By Did the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required? By Sponsoring organization make any taxable distributions under section 4966? Sponsoring organization make any taxable distributions under section 4966? By Sponsoring organization make any taxable distributions under section 4966? By Sponsoring organization make any taxable distributions under section 4966? By Sponsoring organization make any taxable distributions under section 4966? By Section 501(c)(2) organizations Enter: | 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other a | uthority over, a | | | | | | | |
| See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction? 5b X 5c If "Yes" to line Se or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes" to line Se or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes" to line Se or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes" to line Se or 5b, did the organization include with every solicitation on express statement that such contributions on gifts were not tax deductible as charitable contributions? 6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization notity the donor of the value of the goods or services provided? 8d If "Yes," did the organization notity the donor of the value of the goods or services provided? 8d If "Yes," indicate the number of Forms 8282 fled during the year 9d If "Yes," indicate the number of Forms 8282 fled during the year 9d If "Yes," indicate the number of Forms 8282 fled during the year 9d If the organization received a contribution of qualified intellectual property, did the organization flee Form 8399 as required? 9d If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization flee Form 8399 as required? 9d Sponsoring organizations make any taxeled identifications under section 4966? 9a Sponsoring organizations make any taxeled identifications under section 4966? 9a Did the sponsoring organization make any taxeled identifications under section 4966? 9a Section 501(c)(20) qualified nonprofit health insurance issuers. 11a If | | financial account in a foreign country (such as a bank account, securities account, or other financial a | ccount)? | 4a | | Х | | | | |
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| to file Form 8282? d | D | | | /b | | | | | | |
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| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h S Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10 Gross receipts, included on Form 990, Part VIII, line 12 11 Section 501(c)(7) organizations. Enter: a Gross income from members or shareholders b Gross income from ether sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization icensed to issue qualified health plans c Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year? 14 Did the organization receive any payments for indoor tanning services during the tax year? 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 If "Yes," has it filed a Form 720 to report | u | | • | 70 | | x | | | | |
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Form 990 (2020) INTERNET SOCIETY FOUNDATION 82-3285688 Pag
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

| | Check if Schedule O contains a response or note to any line in this Part VI | | | X | | | | | | |
|-----|---|---------|--------|-----|--|--|--|--|--|--|
| Sec | tion A. Governing Body and Management | | | | | | | | | |
| | | | Yes | No | | | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | | | | | | | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | | | | | | | |
| | body delegated broad authority to an executive committee or similar committee, explain on Schedule O. | | | | | | | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent 1b 12 | | | | | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | | | | | | | |
| | officer, director, trustee, or key employee? | 2 | | Х | | | | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | | | | | | | |
| | of officers, directors, trustees, or key employees to a management company or other person? | 3 | | Х | | | | | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | Х | | | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | Х | | | | | | |
| 6 | Did the organization have members or stockholders? | 6 | Х | | | | | | | |
| 7a | | | | | | | | | | |
| | more members of the governing body? | 7a | Х | | | | | | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | | | | | | | |
| | persons other than the governing body? | 7b | Х | | | | | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | | | | | | |
| а | The governing body? | 8a | Х | | | | | | | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Х | | | | | | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | | | | | | | |
| | organization's mailing address? If "Yes." provide the names and addresses on Schedule O | 9 | | Х | | | | | | |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | | | | | | | | |
| | | | Yes | No | | | | | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | Х | | | | | | |
| | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | | | | | | | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | | | | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Х | | | | | | | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | | | | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Х | | | | | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Х | | | | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | | | | | | | |
| | in Schedule O how this was done | 12c | Х | | | | | | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Х | | | | | | | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Х | | | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | | | | | | | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | | | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | | Х | | | | | | |
| | Other officers or key employees of the organization | 15b | | х | | | | | | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | | | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | | | | | | | |
| | taxable entity during the year? | 16a | | Х | | | | | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | | | | | | | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | | | | | | | | | |
| | exempt status with respect to such arrangements? | 16b | | | | | | | | |
| Sec | tion C. Disclosure | | | | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶NONE | | | | | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3) | s only) | availa | ble | | | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply. | | | | | | | | | |
| | X Own website Another's website X Upon request Other (explain on Schedule O) | | | | | | | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and | d finan | cial | | | | | | | |
| | statements available to the public during the tax year. | | | | | | | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records | | | | | | | | | |
| | SAE PARK, ACTING CFO - 703-439-2767 | | | | | | | | | |
| | 11710 PLAZA AMERICA DRIVE NO. 400 RESTON VA 20190 | | | | | | | | | |

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

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

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

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

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

See instructions for the order in which to list the persons above.

| (A) | (B) | | | | C) | | | (D) | (E) | (F) |
|----------------------------|-------------------|-------------------------------|---|----------|-------------------------|---------------------------------|-----------|-----------------|------------------------------|------------------------|
| Name and title | Average | | (do not check more than one box, unless person is both an | | Reportable compensation | Reportable | Estimated | | | |
| | hours per week | | | | | s botr r/trus | | from | compensation from related | amount of other |
| | (list any | tor | | | | | | the | organizations | compensation |
| | hours for | r direc | | | | pe | | organization | (W-2/1099-MISC) | from the |
| | related | stee o | rustee | | | ensat | | (W-2/1099-MISC) | | organization |
| | organizations | al tru | onal t | | ployee | comi | | | | and related |
| | below line) | ndividual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | organizations |
| (1) ANDREW SULLIVAN | 5.00 | 드 | 드 | ō | 3 | 王ə | F. | | | |
| PRESIDENT & CEO | 40.00 | 1 | | х | | | | 59,987. | 419,909. | 54,928. |
| (2) SARAH ARMSTRONG | 40.00 | | | | | | | · | • | , |
| EXECUTIVE DIRECTOR | | | | | х | | | 225,044. | 0. | 44,950. |
| (3) CONNIE KENDIG | 40.00 | | | | | | | | | |
| SENIOR GRANTS MANAGER | | | | | | Х | | 129,494. | 0. | 30,735. |
| (4) BRITTANY PIOVESAN | 40.00 | | | | | | | | | |
| PROGRAM OFFICER | | | | | | Х | | 108,018. | 0. | 27,755. |
| (5) GONZALO CAMARILLO | 4.00 | | | | | | | | | |
| TRUSTEE/CHAIR | 16.00 | Х | | Х | | | | 0. | 0. | 0. |
| (6) RICHARD BARNES | 4.00 | | | | | | | | | |
| TRUSTEE/TREASURER | 16.00 | Х | | Х | | | | 0. | 0. | 0. |
| (7) JOHN LEVINE | 4.00 | | | | | | | | | |
| TRUSTEE/SECRETARY | 16.00 | Х | | Х | | | | 0. | 0. | 0. |
| (8) GEORGE SADOWSKY | 0.42 | 1 | | | | | | | | |
| TRUSTEE | 2.50 | Х | | | | | | 0. | 0. | 0. |
| (9) GLENN MCKNIGHT | 0.58 | | | | | | | | | |
| TRUSTEE TILL 7/31/2020 | 3.50 | Х | | | | | | 0. | 0. | 0. |
| (10) HANS PETER DITTLER | 0.58 | - | | | | | | | | |
| TRUSTEE TILL 7/31/2020 | 3.50 | Х | | | | | | 0. | 0. | 0. |
| (11) HIROSHI ESAKI | 0.58 | - | | | | | | _ | _ | _ |
| TRUSTEE TILL 7/31/2020 | 3.50 | Х | | | | | | 0. | 0. | 0. |
| (12) HEATHER WEST | 0.42 | ł | | | | | | | • | |
| TRUSTEE | 2.50 | Х | | | | | | 0. | 0. | 0. |
| (13) ROBERT PEPPER | 1.00 | | | | | | | | • | |
| TRUSTEE (144) GENN THENDER | 6.00 | Х | | | | | | 0. | 0. | 0. |
| (14) SEAN TURNER | 0.58 | ., | | | | | | | ٥ | |
| TRUSTEE TILL 7/31/2020 | 3.50 | Х | | | | | | 0. | 0. | 0. |
| (15) MIKE GODWIN TRUSTEE | 6.00 | x | | | | | | 0. | 0. | _ |
| (16) LAURA THOMSON | _ | ^ | \vdash | \vdash | - | | | 0. | U. | 0. |
| TRUSTEE | 2.50 | x | | | | | | 0. | 0. | _ |
| (17) NDEYE MAIMOUNA DIOP | 0.42 | Λ | | | | | | 0. | 0. | 0. |
| TRUSTEE | 2.50 | х | | | | | | 0. | 0. | 0. |
| 11001111 | 1 2.30 | 21 | | l | <u> </u> | | l | | <u> </u> | Form 990 (2020) |

Form **990** (2020)

| Section A. Officers, Directors, Trust | | oloy | ees, | | | ghes | st C | | s (continued) | | | (F) | |
|--|--|--------------------------------|-------------------------|---------------|--------------|------------------------------------|--------------|--|---------------------------------------|----------|-------------------------|--|----------------|
| (A) | (B) | | | | C) | | | (D) | (E) | | | | |
| Name and title | Average hours per week | box | not c , unle | heck ss pe | rson i | than than is botl or/trus | n an | Reportable compensation from | Reportable compensatio from related | n | an | stimate nount other | |
| | (list any hours for related organizations below line) | Individual trustee or director | In stit utional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MIS | s | com fr org and | pensa om the anizat d relate anization | e ion ed |
| (18) OLGA CAVALLI | 1.00 | | | | | | | | | | | | |
| TRUSTEE | 6.00 | Х | | | | | | 0. | | 0. | | | 0. |
| (19) TED HARDIE | 0.42 | | | | | | | | | | | | |
| TRUSTEE | 2.50 | Х | | | | | | 0. | | 0. | | | 0. |
| (20) WALID AL-SAQAF | 1.00 | | | | | | | | | | | | |
| TRUSTEE | 6.00 | Х | | | | | | 0. | | 0. | | | 0. |
| (21) MIEKE VA HEESEWIJK | 0.42 | | | | | | | | | | | | |
| TRUSTEE TILL 5/26/2020 | 2.50 | Х | | | | | | 0. | | 0. | | | 0. |
| | | | | | | | | | | - | | | |
| | | | | | | | | | | \dashv | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 1b Subtotal | | | | | | | | 522,543. | 419,9 | 909. | | 158, | 368. |
| c Total from continuation sheets to Part VII | | | | | | | ightharpoons | 0. | | 0. | | | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 522,543. | 419,9 | 909. | | 158, | 368. |
| Total number of individuals (including but no compensation from the organization | ot limited to th | ose | liste | d at | oove | e) wh | o re | eceived more than \$100 | 000 of reportable |) | | | 3 |
| | | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer, | director, truste | ee, k | сеу е | empl | loye | e, or | hig | hest compensated emp | loyee on | | | | |
| line 1a? If "Yes," complete Schedule J for so | uch individual | | | | | | | | | | 3 | | Х |
| 4 For any individual listed on line 1a, is the su | • | | | | | | | • | • | | | | |
| and related organizations greater than \$150 |),000? If "Yes, | " co | mple | ete S | Sche | edule | e J 1 | for such individual | | | 4 | Х | |
| 5 Did any person listed on line 1a receive or a | ccrue comper | ısati | on fi | om | any | unre | elate | ed organization or indivi | dual for services | | | | |
| rendered to the organization? If "Yes." com | plete Schedule | e J fo | or su | ıch į | pers | on | | | | | 5 | | Х |
| Section B. Independent Contractors | | | | | | | | | | | | | |
| 1 Complete this table for your five highest con | • | - | | | | | | | · · · · · · · · · · · · · · · · · · · | ensat | ion fro | om | |
| the organization. Report compensation for t | he calendar ye | ear e | endir | ng w | ith c | or wi | thin I | | ear. | | | | |
| (A) Name and business | address | | | | | | | (B) Description of s | services | С | ompei | | n |
| GOLDMAN SACHS & CO. LLC, 101 CONSTITU | | | | | | | | MANAGEMENT OF INVE | STMENT | | | | |
| AVENUE NW, 10TH FL, WASHINGTON, DC 20 | | | | | | | PORTFOLIOS | | 308,211. | | | | |

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

82-3285688

Form 990 (2020)
Part VIII

Statement of Revenue

| | | Check if Schedule O c | ontains a | response o | or note to any lin | e in this Part VIII | | | |
|--|------|---|----------------|------------------|--------------------|---------------------|-------------------|------------------|---|
| | | | | | | (A) | (B) | (C) | (D) |
| | | | | | | Total revenue | Related or exempt | Unrelated | Revenue excluded from tax under |
| | | | | | | | function revenue | business revenue | sections 512 - 514 |
| 10 10 | | Endoughed a constitute | | - I | | | | | 000000000000000000000000000000000000000 |
| nts | | Federated campaigns | | 1a | | | | | |
| Sra Dou | | | | 1b | | | | | |
| S, (| С | Fundraising events | | 1c | | | | | |
| 를 돌 | d | Related organizations | | 1d | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | е | Government grants (contri | butions) | 1e | | | | | |
| ÖS | f | All other contributions, gifts, | grants, and | | | | | | |
| he be | | similar amounts not included | above | 1f | 26,818,395. | | | | |
| 걸 | а | Noncash contributions included in I | | 1g \$ | | | | | |
| Š | • | Total. Add lines 1a-1f | | | | 26,818,395. | | | |
| <u> </u> | | Totali / Ida iii ida ia ii | | | Business Code | | | | |
| | • | | | | Buomeso ocuc | | | | |
| <u>i</u> | 2 a | | | | | | | | |
| e c | b | | | | | | | | |
| S c | С | | | | | | | | |
| Program Service Revenue | d | | | | | | | | |
| о Б | е | | | | | | | | |
| ᇫ | f | All other program service r | evenue | | | | | | |
| | g | Total. Add lines 2a-2f | | | | | | | |
| | 3 | Investment income (includ | | | | | | | |
| | | other similar amounts) | 0 | , | <i>'</i> | 2,153,103. | | | 2,153,103. |
| | 4 | Income from investment o | | | | , , | | | , , |
| | 5 | | | | | | | | |
| | 3 | Royalties | |) Real | (ii) Personal | | | | |
| | _ | _ | ` |) neai | (II) Fersorial | | | | |
| | | Gross rents | 6a | | | | | | |
| | b | Less: rental expenses | 6b | | | | | | |
| | С | Rental income or (loss) | 6c | | | | | | |
| | d | Net rental income or (loss) | | | | | | | |
| | 7 a | Gross amount from sales of | (i) S | ecurities | (ii) Other | | | | |
| | | assets other than inventory | 7a 22,5 | 586,609. | | | | | |
| | b | Less: cost or other basis | | | | | | | |
| <u>o</u> | | and sales expenses | 7b 23,5 | 39,256. | | | | | |
| Revenue | _ | Gain or (loss) | 70 -9 | 952 647. | | | | | |
| ě | | | | | | -952,647. | | | -952,647. |
| | | Net gain or (loss) | | | | 332,017. | | | 332,017. |
| ther | 8 a | Gross income from fundraisin | | | | | | | |
| 0 | | including \$ | | | | | | | |
| | | contributions reported on | | I | | | | | |
| | | Part IV, line 18 | | | | | | | |
| | b | Less: direct expenses | | 8b | | | | | |
| | С | Net income or (loss) from f | fundraisin | g event <u>s</u> | | | | | |
| | 9 a | Gross income from gamine | g activities | s. See | | | | | |
| | | Part IV, line 19 | | 9a | | | | | |
| | b | Less: direct expenses | | | | | | | |
| | | Net income or (loss) from g | | | > | | | | |
| | | Gross sales of inventory, le | | | | | | | |
| | 10 a | | | | | | | | |
| | _ | and allowances | | | | | | | |
| | | Less: cost of goods sold | | | | | | | |
| | С | Net income or (loss) from s | sales of in | ventory | | | | | |
| S | | | | | Business Code | | | | |
| ő a | 11 a | | | | | | | | |
| ane Transport | b | | | | | | | | |
| Miscellaneous Revenue | С | | | | | | | | |
| <u>8</u> | | All other revenue | | | | | | | |
| Σ | | Total. Add lines 11a-11d | | | | | | | |
| | | Total revenue. See instruction | | | | 28,018,851. | 0. | 0. | 1,200,456. |

82-3285688

Part IX Statement of Functional Expenses

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

| 0001 | on 501(c)(3) and 501(c)(4) organizations must complete Check if Schedule O contains a respons | | | ipieto columni (i ij. | |
|------|---|--------------------|--------------------------|---------------------------------|-------------------------|
| Do | not include amounts reported on lines 6b, | (A) Total expenses | (B) | (C) | (D) |
| | 8b, 9b, and 10b of Part VIII. | rotal expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | 14,784,673. | 14,784,673. | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | 572,134. | 572,134. | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 225,044. | | 225,044. | |
| 6 | Compensation not included above to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 865,816. | 581,092. | 284,724. | |
| 8 | Pension plan accruals and contributions (include | 06.450 | F0 110 | 25 222 | |
| | section 401(k) and 403(b) employer contributions) | 96,172. | 59,149. | 37,023. | |
| 9 | Other employee benefits | 56,755. | 44,531. | 12,224. | |
| 10 | Payroll taxes | 54,698. | 43,818. | 10,880. | |
| 11 | Fees for services (nonemployees): | | | | |
| a | Management | 26 999 | 2 202 | 22 605 | |
| b | Legal | 26,888. 4,752. | 3,283. | 23,605. 4,752. | |
| | Accounting | 4,752. | | 4,752. | |
| | Lobbying | | | | |
| _ | Professional fundraising services. See Part IV, line 17 | 308,211. | | 308,211. | |
| f | Investment management fees | 300,211. | | 300,211. | |
| 9 | Other. (If line 11g amount exceeds 10% of line 25, | 294,887. | 47,976. | 246,911. | |
| 12 | column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion | 16,490. | 3,950. | 12,540. | |
| 13 | Office expenses | 5,103. | 729. | 4,374. | |
| 14 | Information technology | 43,789. | 251. | 43,538. | |
| 15 | Royalties | 2777 | | | |
| 16 | Occupancy | 12,000. | | 12,000. | |
| 17 | Travel | 25,936. | 23,403. | 2,533. | |
| 18 | Payments of travel or entertainment expenses | , | , | , | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 21,596. | 19,468. | 2,128. | |
| 20 | Interest | | | · | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 53,540. | | 53,540. | |
| 23 | Insurance | 30,155. | | 30,155. | |
| 24 | Other expenses. Itemize expenses not covered | | | | |
| | above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) | | | | |
| | amount, list line 24e expenses on Schedule 0.) | | | | |
| а | DUES & SUBSCRIPTIONS | 4,596. | 45. | 4,551. | |
| b | EMPLOYEE TRAINING | 2,969. | | 2,969. | |
| С | | | | | |
| d | <u> </u> | | | | |
| | All other expenses | 15 506 004 | 16 101 506 | 1 201 722 | |
| 25 | Total functional expenses. Add lines 1 through 24e | 17,506,204. | 16,184,502. | 1,321,702. | 0. |
| 26 | Joint costs. Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | | 5 000 (0000) |

Form 990 (2020) Part X Balance Sheet

| Pal | rt X | Balance Sneet | | | | | |
|-----------------------------|----------|---|-------------|------------------------|-------------------|----------|-----------------------|
| | | Check if Schedule O contains a response or | note to a | ny line in this Part X | (A) | T T | (B) |
| | | | | | Beginning of year | | End of year |
| | 1 | Cash - non-interest-bearing | | | | 1 | |
| | 2 | Savings and temporary cash investments | | | | 2 | 8,461,849. |
| | 3 | Pledges and grants receivable, net | | 3 | | | |
| | 4 | Accounts receivable, net | l . | 4 | | | |
| | 5 | Loans and other receivables from any current | | | | | |
| | | trustee, key employee, creator or founder, su | bstantial | contributor, or 35% | | | |
| | | controlled entity or family member of any of t | hese per | sons | | 5 | 100 |
| | 6 | Loans and other receivables from other disqu | ualified p | ersons (as defined | | | |
| | | under section 4958(f)(1)), and persons describ | bed in se | ection 4958(c)(3)(B) | | 6 | |
| S | 7 | Notes and loans receivable, net | | | | 7 | |
| Assets | 8 | Inventories for sale or use | | | | 8 | |
| ğ | 9 | Duran sid some server and defended the server | | | | 9 | 58,464 |
| | 10a | Land, buildings, and equipment: cost or othe | r | | | | |
| | | basis. Complete Part VI of Schedule D | 10a | 173,329 | | | |
| | b | Less: accumulated depreciation | . 104,208. | | 88,798 | | |
| | 11 | Investments - publicly traded securities | | | | 11 | 69,588,958 |
| | 12 | Investments - other securities. See Part IV, lin | 17,447,433. | 12 | 23,478,811 | | |
| | 13 | Investments - program-related. See Part IV, lin | | 13 | | | |
| | 14 | Intangible assets | | 14 | | | |
| | 15 | Other assets. See Part IV, line 11 | 0. | 15 | 33,465 | | |
| | 16 | Total assets. Add lines 1 through 15 (must e | | | | 16 | 101,710,445 |
| | 17 | Accounts payable and accrued expenses | | 17 | 502,657 | | |
| | 18 | Grants payable | | 18 | 12,742,209 | | |
| | 19 | Deferred revenue | | 19 | | | |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Comple | | | | 21 | |
| es | 22 | Loans and other payables to any current or for | | | | | |
| Liabilities | | trustee, key employee, creator or founder, su | | | | | |
| jab | | controlled entity or family member of any of t | - | | | 22 | |
| _ | 23 | Secured mortgages and notes payable to uni | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrela | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, | | | | | |
| | | parties, and other liabilities not included on lin | nes 17-2 | 4). Complete Part X | 476,149. | . | 65,003 |
| | | of Schedule D | | | | | |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 560,149. | 26 | 13,309,869 |
| Ś | | Organizations that follow FASB ASC 958, o | спеск пе | ere 🖊 🔼 | | | |
| nce | | and complete lines 27, 28, 32, and 33. | | | 69,951,471. | 07 | 88,400,576 |
| a | 27 | | 05,551,471. | 27 28 | 00,400,570, | | |
| d B | 28 | Net assets with donor restrictions | | | | 20 | |
| Ë | | Organizations that do not follow FASB ASC | . 956, CI | neck nere | | | |
| Net Assets or Fund Balances | 20 | and complete lines 29 through 33. | de | | | 29 | |
| əts | 29 | Capital stock or trust principal, or current fun Paid-in or capital surplus, or land, building, or | | | | 30 | |
| \ss | 30 | | | | | 31 | |
| et ⊿ | 31 32 | Retained earnings, endowment, accumulated | | | | 32 | 88,400,576. |
| ž | 33 | Total liabilities and net assets/fund balances | | | 70,511,620. | 33 | 101,710,445. |
| | J | Total liabilities and net assets/fund balances | | | , 511 , 520 . | J | Form 990 (2020 |

Form **990** (2020)

| Pa | rt XI Reconciliation of Net Assets | | | | |
|----|---|------------|---------|-------|------|
| | Check if Schedule O contains a response or note to any line in this Part XI | | <u></u> | | |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | ,018, | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 17 | ,506, | 204. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 10 | ,512, | 647. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 69 | ,951, | 471. |
| 5 | Net unrealized gains (losses) on investments | 5 | 7 | ,936, | 458. |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | | | | |
| | column (B)) | 10 | 88 | ,400, | 576. |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | Ш |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | Ο. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | . 2a | | Х |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | on a | | | |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | Х | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | e basis, | | | |
| | consolidated basis, or both: | | | | |
| | Separate basis X Consolidated basis Both consolidated and separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | e audit, | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | Х | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on Sch | | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir | igle Audit | | | |
| | Act and OMB Circular A-133? | | 3a | | Х |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | red audit | | | |
| | or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | 3b | | |

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

HELP NGO

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **Employer identification number** INTERNET SOCIETY FOUNDATION 82-3285688 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). Х An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. 17 Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) INTERNET SOCIETY 54-1650477 7 Х 13,358,569 7 AMREF HEALTH AFRICA INC 13-1867411 Х 247,500 BRAC USA INC 20-8456741 7 Х 71,990 ENVIRONMENTAL LAW INSTITUTE 52-0901863 7 100,000.

82-2095809

0.

449,100. 15,356,806.

7

X

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sec | ction A. Public Support | | | | | | |
|------|--|-----------------------|---------------------|----------------------|---------------------|----------------------|-----------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | | | | | |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | | | | | | |
| 5 | The portion of total contributions | | | | | | |
| | by each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included | | | | | | |
| | on line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, | | | | | | |
| | column (f) | | | | | | |
| 6 | Public support. Subtract line 5 from line 4. | | | | | | |
| Sec | ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| 7 | Amounts from line 4 | | | | | | |
| 8 | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, | | | | | | |
| | and income from similar sources | | | | | | |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | |
| 12 | Gross receipts from related activities, | etc. (see instruction | ons) | | | 12 | |
| 13 | First 5 years. If the Form 990 is for the | e organization's fi | rst, second, third, | fourth, or fifth tax | year as a section 5 | 501(c)(3) | |
| _ | organization, check this box and stop | | | | | | |
| | ction C. Computation of Publi | | | | | | |
| 14 | Public support percentage for 2020 (li | | | | | 14 | <u>%</u> |
| 15 | Public support percentage from 2019 | | | | | 15 | <u>%</u> |
| 16a | 33 1/3% support test - 2020. If the o | | | | | | |
| | stop here. The organization qualifies | | - | | | | |
| b | 33 1/3% support test - 2019. If the o | | | | | | |
| | and stop here. The organization quali | | | | | | |
| 17a | 10% -facts-and-circumstances test | • | | | | | • |
| | and if the organization meets the facts | | • | - | • | VI how the organiz | ation |
| | meets the facts-and-circumstances te | _ | • | * * | - | | |
| b | 10% -facts-and-circumstances test | - | | | | | 10% or |
| | more, and if the organization meets th | | | | - | | |
| | organization meets the facts-and-circu | | | | | | |
| 18 | Private foundation. If the organizatio | n did not check a | box on line 13, 16 | a, 16b, 17a, or 17l | b, check this box a | ind see instructions | <u> </u> |

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

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

| Se | ction A. Public Support | now, please comp | Diete Part II.) | | | | |
|---------|--|---------------------|---------------------------|-----------------------|---------------------|-----------------------|---------------|
| | endar year (or fiscal year beginning in) | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf | | | | | | |
| | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| | Total. Add lines 1 through 5 | | | | | | |
| 78 | a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| t | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| C | Add lines 7a and 7b | | | | | | |
| 8 Se | Public support. (Subtract line 7c from line 6.) ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| | Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| k | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 | First 5 years. If the Form 990 is for th | e organization's fi | irst, second, third, | fourth, or fifth tax | year as a section s | 501(c)(3) organizatio | on, |
| _ | check this box and stop here | | | | | | > |
| | ction C. Computation of Publi | | | | | | |
| | Public support percentage for 2020 (li | | | column (f)) | | 15 | <u>%</u> |
| | Public support percentage from 2019 | | | | | 16 | % |
| | ction D. Computation of Inves | | | 10 1 (0) | | 14-1 | |
| | Investment income percentage for 20 | | | | | 17 | <u>%</u> |
| | Investment income percentage from 2 | | | | | 18 | % 7 is not |
| 198 | a 33 1/3% support tests - 2020. If the | | | | | | r is flot |
| k | more than 33 1/3%, check this box an 33 1/3% support tests - 2019. If the | = | - | | | | nd |
| | line 18 is not more than 33 1/3%, ched | ck this box and st | top here. The orga | ınization qualifies a | as a publicly suppo | orted organization | |
| 20 | Private foundation. If the organization | n did not check a | box on line 14, 19 | a, or 19b, check th | nis box and see ins | structions | |

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

| | | ., | |
|---|----------|--------|----------|
| ı | | Yes | No |
| | | | |
| | 1 | | Х |
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| | 2 | Х | |
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| | 3a | | Х |
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| | 9b | | |
| | 9с | | Х |
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| | 10a | | Х |
| | | | |
| _ | 10b | | <u> </u> |
| 9 | 90 or 99 | 10-EZ1 | 2020 |

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

of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

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

Schedule A (Form 990 or 990-EZ) 2020

instructions).

| Pai | t V Type III Non-Functionally Integrated 509(| (a)(3) Supporting Orga | inizations _{(continue} | ed) | | | | |
|-----------|---|-------------------------------|---------------------------------|-----|----------------------------------|--|--|--|
| Secti | ction D - Distributions Current Year | | | | | | | |
| 1 | Amounts paid to supported organizations to accomplish exer | | 1 | | | | | |
| 2 | Amounts paid to perform activity that directly furthers exemp | | | | | | | |
| | organizations, in excess of income from activity | | 2 | | | | | |
| 3 | Administrative expenses paid to accomplish exempt purpose | S | 3 | | | | | |
| 4 | Amounts paid to acquire exempt-use assets | | | 4 | | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required - pro | ovide details in Part VI) | | 5 | | | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | 6 | | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | 7 | | | | |
| 8 | Distributions to attentive supported organizations to which the | ne organization is responsive | | | | | | |
| | (provide details in Part VI). See instructions. | | | 8 | | | | |
| 9 | Distributable amount for 2020 from Section C, line 6 | | | 9 | | | | |
| 10 | Line 8 amount divided by line 9 amount | | | 10 | | | | |
| | | (i) | (ii) | | (iii) | | | |
| Secti | on E - Distribution Allocations (see instructions) | Excess Distributions | Underdistributions Pre-2020 | 5 | Distributable Amount for 2020 | | | |
| _1_ | Distributable amount for 2020 from Section C, line 6 | | | | | | | |
| 2 | Underdistributions, if any, for years prior to 2020 (reason- | | | | | | | |
| | able cause required - explain in Part VI). See instructions. | | | | | | | |
| 3 | Excess distributions carryover, if any, to 2020 | | | | | | | |
| a | From 2015 | | | | | | | |
| b | From 2016 | | | | | | | |
| С | From 2017 | | | | | | | |
| d | From 2018 | | | | | | | |
| <u>e</u> | From 2019 | | | | | | | |
| f | Total of lines 3a through 3e | | | | | | | |
| g | Applied to underdistributions of prior years | | | | | | | |
| <u>h</u> | Applied to 2020 distributable amount | | | | | | | |
| i_ | Carryover from 2015 not applied (see instructions) | | | | | | | |
| <u>_i</u> | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | | | | | |
| 4 | Distributions for 2020 from Section D, | | | | | | | |
| | line 7: \$ | | | | | | | |
| a | Applied to underdistributions of prior years | | | | | | | |
| b | Applied to 2020 distributable amount | | | | | | | |
| c | Remainder. Subtract lines 4a and 4b from line 4. | | | | | | | |
| 5 | Remaining underdistributions for years prior to 2020, if | | | | | | | |
| | any. Subtract lines 3g and 4a from line 2. For result greater | | | | | | | |
| | than zero, explain in Part VI. See instructions. | | | | | | | |
| 6 | Remaining underdistributions for 2020. Subtract lines 3h | | | | | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | | | | | |
| | Part VI. See instructions. | | | | | | | |
| 7 | Excess distributions carryover to 2021. Add lines 3j | | | | | | | |
| | and 4c. | | | | | | | |
| 8 | Breakdown of line 7: | | | | | | | |
| <u>a</u> | Excess from 2016 | | | | | | | |
| <u>b</u> | Excess from 2017 | | | | | | | |
| <u> </u> | Excess from 2018 | | | | | | | |
| <u>d</u> | Excess from 2019 | | | | | | | |
| _ | Excess from 2020 | | | | | | | |

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 INTERNET SOCIETY FOUNDATION Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) SECTION A, LINE 1 OTHER SUPPORTED ORGANIZATIONS NOT NAMED IN THE INTERNET SOCIETY FOUNDATION'S GOVERNING DOCUMENTS ARE DESIGNATED AS 501(C)(3) OR FOREIGN EQUIVALENT AND ARE OF A DESIGNATED CLASS WHOSE PURPOSES AND ACTIVITIES ARE CONSISTENT WITH THE TAX EXEMPT PURPOSES OF THE INTERNET SOCIETY. PART IV, LINE 2 THE CERTIFICATION PROCESS FOR THE EQUIVALENCY OF A 501(C)(3) ORGANIZATION IS CONDUCTED BY INDEPENDENT PARTNER ORGANIZATIONS AND THEIR LEGAL COUNSEL, CONTRACTED BY THE INTERNET SOCIETY FOUNDATION. THE DESIGNATION IS TYPICALLY DOCUMENTED ON A CERTIFICATE AND IS VALID FOR UP TO TWO YEARS. PART IV, LINE 4B INTERNET SOCIETY FOUNDATION EMPLOYS A GRANT APPLICATION PROCESS THAT USES A CAREFUL EVALUATION AND SELECTION PROCESS FOR DETERMINING GRANT THE INTERNET SOCIETY FOUNDATION FURTHER OBTAINS SIGNED GRANT AGREEMENTS WITH SUPPORTED ORGANIZATIONS THAT DEFINE THE GRANT PURPOSE, HOW FUNDS SHOULD BE USED, REPORTING REQUIREMENTS, AND OTHER COMPLIANCE REQUIREMENTS. PART IV, LINE 4C THE CERTIFICATION PROCESS FOR THE FOREIGN EQUIVALENCY OF A 501(C)(3)

ORGANIZATION IS CONDUCTED BY INDEPENDENT PARTNER ORGANIZATIONS AND

THEIR LEGAL COUNSEL, CONTRACTED BY THE INTERNET SOCIETY FOUNDATION. THE

DESIGNATION IS TYPICALLY DOCUMENTED ON A CERTIFICATE AND IS VALID FOR

UP TO TWO YEARS.

| Part VI | Supplemental Information Design to the state of the state |
|----------|--|
| i dit vi | Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) |
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| Part VI Supplemental Infor | mation (Schedule | A, Part I, Line 12g - Info | rmation re | garding su | pported organizations (co | ontinuation) |
|--|------------------|----------------------------|---------------|----------------------|---------------------------|----------------|
| (i) Name of supported | (ii) EIN | (iii) Type of organization | (iv) Is the o | rganization | (v) Amount of monetary | (vi) Amount of |
| organization | | (described on lines 1-10 | governing | in your document? | support | other support |
| | | above) | Yes | No | | |
| HIAS INC | 13-5633307 | 7 | | х | 69,600. | |
| ONESKY | 95-4714047 | 7 | | х | 388,933. | |
| TEACH FOR BANGLADESH | 45-4476715 | 7 | | х | 98,980. | |
| CHOMORA MIKEKA | 00-000000 | 7 | | х | 28,509. | |
| CORPORACION MAKAIA ASESORIA INTERNACIONAL | 00-000000 | 7 | | х | 69,589. | |
| CTIC DAKAR | 00-000000 | 7 | | х | 71,691. | |
| FUNDACION CAPITAL FUNDAK | 00-000000 | 7 | | х | 71,966. | |
| FUNDACION LA VOZ PUBLICA CHEQUEADO | 00-000000 | 7 | | х | 83,000. | |
| ISOC HAITI | 00-000000 | 7 | | х | 3,428. | |
| PARADIGM INITIATIVE FOR INFORMATION TECHNOLOGY DEVEL | 00-000000 | 7 | | х | 71,954. | |
| PRACTICAL ACTION | 00-000000 | 7 | | х | 71,997. | |
| THE CENTRE FOR INTERNET AND SOCIETY | 00-000000 | 7 | | х | 100,000. | |
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| | | | | | | |
| Continuation Totals | | | | | 1,129,647. | |

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

| II | 82-3285688 | | | | | | |
|--|---|--------------------------------|--|--|--|--|--|
| Organization type (check | Organization type (check one): | | | | | | |
| Filers of: | Section: | | | | | | |
| Form 990 or 990-EZ | X 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 | | | | | | |
| , , | is covered by the General Rule or a Special Rule. | e See instructions | | | | | |
| General Rule | b)(r), (b), or (10) organization can check boxes for both the deficial rule and a opecial rule | e. dee instructions. | | | | | |
| General Nule | | | | | | | |
| - | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor's | • | | | | | |
| Special Rules | | | | | | | |
| sections 509(a)(1 any one contribu | on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, tor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amou Z, line 1. Complete Parts I and II. | or 16b, and that received from | | | | | |
| contributor, durir literary, or educa | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. | | | | | | |
| year, contributior is checked, enter purpose. Don't c | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \ \rightarrow \left\frac{\text{\text{\text{clusively}}}{\text{\text{\text{\text{\text{\text{contributions}}}}} \right | | | | | | |
| Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't 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, 990-EZ, or 990-PF.

Name of organization

Employer identification number

INTERNET SOCIETY FOUNDATION

82-3285688

| Part I | rt I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. | | | | | |
|------------|---|-------------------------|--|--|--|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| 1 | | \$\$ | Person X Payroll | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) | | | |
| (a) | (b) | (c) | (d) | | | |
| No. | Name, address, and ZIP + 4 | Total contributions \$ | Person Payroll Complete Part II for noncash contributions. | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) | | | |

Name of organization Employer identification number

INTERNET SOCIETY FOUNDATION 82-3285688

| Part II | Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. | | | | | | |
|------------------------------|---|---|----------------------|--|--|--|--|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | | |
| | | - - - - - \$ | | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | | |
| | | - - - - - \$ | | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | | |
| | | - - - - - \$ | | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | | |
| | | - - - - - - - - - | | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | | |
| | | - - - - - \$ | | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | | |
| | | - - - - \$ | | | | | |

| Name of or | ganization | | | Employer identification number | | | |
|---------------------------|---|--|--------------------------------------|---------------------------------|--|--|--|
| | SOCIETY FOUNDATION | | | 82-3285688 | | | |
| Part III | Exclusively religious, charitable, etc., contributifrom any one contributor. Complete columns (a |) through (e) and the following line | entry. For organizations | | | | |
| | completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional | charitable, etc., contributions of \$1,000 space is needed. | or less for the year. (Enter this in | nfo. once.) \$ | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) I | Description of how gift is held | | | |
| | | | | | | | |
| | | (e) Transfer of | gift | | | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship o | of transferor to transferee | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) I | Description of how gift is held | | | |
| | | | | | | | |
| | (e) Transfer of gift | | | | | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship o | of transferor to transferee | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) I | Description of how gift is held | | | |
| | | | | | | | |
| | (e) Transfer of gift | | | | | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship o | f transferor to transferee | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) I | Description of how gift is held | | | |
| | | | | | | | |
| | (e) Transfer of gift | | | | | | |
| - | Transferee's name, address, a | nd ZIP + 4 | Relationship o | f transferor to transferee | | | |
| | | | | | | | |

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

Section 501(c)(4) (5) or (6) organizations: Complete Part III.

| | Occion oc | , 1 (0)(+), (0), 01 (0) 01 gainzat | iono. Compicto i dit iii. | | | |
|-------------|--|--|--|--|---|---|
| Nan | ne of orgar | nization | | | Empl | oyer identification number |
| | | | CIETY FOUNDATION | | | 82-3285688 |
| Pa | art I-A | Complete if the org | anization is exempt und | der section 501(c) | or is a section 527 or | ganization. |
| 2 | Political o | campaign activity expendit | ation's direct and indirect politi ures gn activities | | ▶ \$ | |
| Pa | art I-B | Complete if the org | anization is exempt und | der section 501(c)(| 3). | |
| 1 2 3 | Enter the Enter the If the orga | amount of any excise tax amount of any excise tax anization incurred a section | incurred by the organization un incurred by organization manaq n 4955 tax, did it file Form 4720 | der section 4955 gers under section 4955 Of for this year? | ► \$ ► \$ | Yes No |
| | | describe in Part IV. | | | | 165 146 |
| | art I-C | | anization is exempt und | der section 501(c), | except section 501(c |)(3). |
| 2 | Enter the exempt for | amount of the filing organ unction activities | by the filing organization for so ization's funds contributed to c | other organizations for se | ection 527 > \$ | |
| Ü | | • | | , | | |
| | line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. | | | | | |
| | | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0 |
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| Page | |
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| raue | 4 |

| Part II-A Complete if the org section 501(h)). | anization is exe | empt under section | n 501(c)(3) and file | d Form 5768 (ele | ction under |
|--|---|--|-----------------------------|--|------------------------------------|
| . — | tion belongs to an a | ffiliated group (and list ir | n Part IV each affiliated o | group member's name | e, address, EIN, |
| expenses, and shar | e of excess lobbying | g expenditures). | | | |
| B Check 🕨 🗌 if the filing organiza | tion checked box A | and "limited control" pro | ovisions apply. | | |
| | ts on Lobbying Exp ditures" means am | enditures ounts paid or incurred. |) | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a Total lobbying expenditures to influ | uence public opinior | (grassroots lobbying) | | | |
| b Total lobbying expenditures to influ | uence a legislative b | ody (direct lobbying) | | | |
| c Total lobbying expenditures (add li | nes 1a and 1b) | | | | |
| d Other exempt purpose expenditure | es | | | 17,506,204. | 158,381,100. |
| e Total exempt purpose expenditure | s (add lines 1c and | Id) | | 17,506,204. | 158,381,100. |
| f Lobbying nontaxable amount. Ente | er the amount from t | he following table in bot | h columns. | 1,000,000. | 1,000,000. |
| If the amount on line 1e, column (a) o | | obbying nontaxable am | | | |
| Not over \$500,000 | 20% (| of the amount on line 1e. | | | |
| Over \$500,000 but not over \$1,000 |),000 \$100, | 000 plus 15% of the exc | ess over \$500,000. | | |
| Over \$1,000,000 but not over \$1,5 | | 000 plus 10% of the exc | ess over \$1,000,000. | | |
| Over \$1,500,000 but not over \$17, | 000,000 \$225, | 000 plus 5% of the exce | ss over \$1,500,000. | | |
| Over \$17,000,000 | \$1,00 | 0,000. | | | |
| | | | | | |
| g Grassroots nontaxable amount (en | • | | | 250,000. | 250,000. |
| h Subtract line 1g from line 1a. If zero | | | | 0. | 0. |
| i Subtract line 1f from line 1c. If zero | , · · · · · · · · · · · · · · · · · · · | | L | 0. | 0. |
| j If there is an amount other than ze | | or line 1i, did the organiza | ation file Form 4/20 | Г | ¬,, ,, |
| reporting section 4911 tax for this | | | 0 1' 504(1-) | | Yes No |
| (Some organizations the | nat made a section | veraging Period Under 501(h) election do not arate instructions for li | have to complete all of | f the five columns be | low. |
| | Lobbying Exp | enditures During 4-Yea | ar Averaging Period | | |
| Calendar year (or fiscal year beginning in) | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) Total |
| 2a Lobbying nontaxable amount | | | 1,000,000. | 1,000,000. | 2,000,000. |
| b Lobbying ceiling amount | | | | | 2 000 000 |
| (150% of line 2a, column(e)) | | | | | 3,000,000. |
| c Total lobbying expenditures | | | | | |
| d Grassroots nontaxable amount | | | 250,000. | 250,000. | 500,000. |
| e Grassroots ceiling amount | | | | | |
| (150% of line 2d, column (e)) | | | | | 750,000. |
| f Grassroots lobbying expenditures | | | | | |

Schedule C (Form 990 or 990-EZ) 2020

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| 1 D | obbying activity. | | | | <u>)</u> |
|---|---|--------------------------|--|------|----------|
| o a V | 1 1-1 | | No | Amo | unt |
| lo o a V | Ouring the year, did the filing organization attempt to influence foreign, national, state, or | | | | |
| o a V | ocal legislation, including any attempt to influence public opinion on a legislative matter | | | | |
| | or referendum, through the use of: | | | | |
| | folunteers? | | | | |
| b P | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | |
| c N | Media advertisements? | | | | |
| | Mailings to members, legislators, or the public? | | | | |
| | Publications, or published or broadcast statements? | | | | |
| f G | Grants to other organizations for lobbying purposes? | | | | |
| | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | |
| | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | |
| i O | Other activities? | | | | |
| jΤ | otal. Add lines 1c through 1i | | | | |
| | oid the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | | |
| b If | "Yes," enter the amount of any tax incurred under section 4912 | | | | |
| c If | F "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | |
| d If | the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | |
| art I | Complete if the organization is exempt under section 501(c)(4), section 501(c) |)(5), | or sec | tion | |
| | 501(c)(6). | | | Vaa | _ |
| | Vere substantially all (90% or more) dues received nondeductible by members? | | | Yes | 1 |
| | Vare substantially all (90% or more) dues received hondeductible by members? | | | | |
| | | | | | |
| D D | old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political campaign activity expenditures from the prior year. Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Older the organization is exempt under section 501(c)(6). | ar?)(5), | 2 3 or sec | | 3, is |
| 2 D 3 D art I | oid the organization make only in-house lobbying expenditures of \$2,000 or less? oid the organization agree to carry over lobbying and political campaign activity expenditures from the prior year. Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Organization in answered "Yes." | ar?)(5), R (b) | 2 3 or sec) Part I | | 3, is |
| 2 D 3 D art I | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yet an activity expenditures from the prior yet and activity expenditures from the prior yet activity expenditures from the prior yet and activity expenditures from the prior yet activity expension from the prior yet activity expension from the prior yet activity expe | ar?)(5), R (b) | 2 3 or sec | | 3, is |
| 2 D B D B D B D B D B D B D B D B | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yet of the organization is exempt under section 501(c)(4), section 501(c)(5) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" of answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political | ar?)(5), R (b) | 2 3 or sec) Part I | | 3, is |
| 2 D B D art I | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yet of the organization is exempt under section 501(c)(4), section 501(c) (501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes." Dues, assessments and similar amounts from members Description 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | ar?)(5), R (b) | or sec) Part I | | 3, is |
| P D D art I | old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political campaign activity expenditures from the prior year lobbying and political campaign activity expenditures from the prior year lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Organization answered "Yes." Oues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | ar?)(5), R (b) | 2 3 or sec) Part I | | 3, is |
| art I S B C B C C C C C C C C C C | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year lobbying and political campaign activity expenditures from the prior year lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Organization answered "Yes." Dues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Durrent year Carryover from last year | ar?)(5), R (b) | 2 3 or sec) Part I | | 3, is |
| art I I D S e a C b C | old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political campaign activity expenditures from the prior yet the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes." Oues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Ourrent year carryover from last year fortal | ar?)(5), R (b) | 2 3 or sec) Part I | | 3, is |
| art I I D S e a C b C c T A | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yet of the organization is exempt under section 501(c)(4), section 501(c) (501(c)(6)) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes." Dues, assessments and similar amounts from members Dues, assessments and similar amounts from members Dues of the section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Dues of the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Dues of the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Dues of the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Dues of the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Dues of the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | ar?)(5), R (b) | 2 3 or sec) Part I | | 3, is |
| 2 D 3 D art I 1 D 2 S e a C b C c T 3 A 1 If | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yestellar. Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Or answered "Yes." Dues, assessments and similar amounts from members D | ar?)(5), R (b) | 2 3 or sec) Part I | | 3, is |
| 2 D 3 D art I D 2 S e a C b C T 3 A | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yet to the organization agree to carry over lobbying and political campaign activity expenditures from the prior yet to the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Organization answered "Yes." Dues, assessments and similar amounts from members Description 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Durrent year Description 162(e) and 162(e) and 162(e) and 162(e) dues Total aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues Total aggregate amount on line 2c exceeds the amount on line 3, what portion of the excess loses the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political | ar? (5),(5), R (b) | 2 3 or sec) Part I 1 2a 2b 2c 3 | | 3, is |
| 2 D art I 1 D 2 S e a C b C c T d d e e | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yestellar. Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Or answered "Yes." Dues, assessments and similar amounts from members D | ar? (5),(5), R (b) | 2 3 or sec) Part I | | 3, is |

Schedule C

Affiliated Group Lobbying Expenditures Part II -A

Name of Affiliated Group Member INTERNET SOCIETY FOUNDATION

Employer ID Number 82-3285688

Affiliated Group Member Address 11710 PLAZA AMERICA DRIVE STE 400 RESTON , VA 20190 Electing Member YES

| | | | | Т |
|---|------------------------------------|----------------|-------------|---|
| Limits on Lobbying Expenditu | ires: | | | L |
| Total lobbying expenditures to | influence public opinion (grassro | oots lobbying) | 0. | |
| Total lobbying expenditures to | influence a legislative body (dire | ect lobbying) | 0. | |
| Fotal lobbying expenditures (ad | ld lines 1a and 1b) | | 0. | |
| Other exempt purpose expendi | tures | | 17,506,204. | |
| Fotal exempt purpose expendit | ures (add lines 1c and 1d). | | 17,506,204. | |
| obbying nontaxable amount. Enter the amount from the follo | wing table: | | | |
| If the amount on line e is: | The lobbying nontaxable amount is: | | | |
| Not over \$500,000 > 500,000 <= 1,000,000 > 1,000,000 <= 1,500,000 > 1,500,000 <= 17,000,000 | 175,000 + 10% > 1,000,000 | | | |
| Over \$17,000,000 | \$1,000,000 | | 1,000,000. | |
| Grassroots nontaxable amount | (enter 25% of line 1f) | | 250,000. | |
| Subtract line 1g from line 1a (lir | nit to zero) | | 0. | |
| Subtract line 1f from line 1c (lim | nit to zero) | | 0. | |
| Member's share of excess lobb | ying expenditures | | 0. | |

Schedule C

Affiliated Group Lobbying Expenditures Part II -A

Name of Affiliated Group Member PUBLIC INTEREST REGISTRY

Employer ID Number 33-1025119

Affiliated Group Member Address 11911 FREEDOM DRIVE, SUITE 1000 RESTON, VA 20190 Electing Member YES

| | | | | T |
|---|------------------------------------|----------------|-------------|----|
| Limits on Lobbying Expenditu | res: | | | Li |
| Total lobbying expenditures to i | influence public opinion (grassro | oots lobbying) | 0. | 1 |
| Total lobbying expenditures to i | influence a legislative body (dire | ct lobbying) | 0. | |
| Total lobbying expenditures (ad | ld lines 1a and 1b) | | 0. | |
| Other exempt purpose expendi | tures | | 95,799,726. | |
| Fotal exempt purpose expendit | ures (add lines 1c and 1d). | | 95,799,726. | |
| Lobbying nontaxable amount. Enter the amount from the follo | wing table: | | | |
| If the amount on line e is: | The lobbying nontaxable amount is: | | | |
| Not over \$500,000 > 500,000 <= 1,000,000 > 1,000,000 <= 1,500,000 > 1,500,000 <= 17,000,000 | 175,000 + 10% > 1,000,000 | | | |
| Over \$17,000,000 | \$1,000,000 | | 1,000,000. | |
| Grassroots nontaxable amount | (enter 25% of line 1f) | | 250,000. | |
| Subtract line 1g from line 1a (lin | nit to zero) | | 0. | |
| Subtract line 1f from line 1c (lim | nit to zero) | | 0. | |
| Member's share of excess lobb | ying expenditures | | 0. | |

Schedule C

Affiliated Group Lobbying Expenditures Part II -A

Name of Affiliated Group Member CONNECTED GIVING FOUNDATION

Employer ID Number 84-3558614

Affiliated Group Member Address 11710 PLAZA AMERICA DRIVE STE 400 RESTON , VA 20190 Electing Member NO

| Limits on Lobbying Expenditures: | | | | | |
|---|--|------------------|---|----|--|
| Total lobbying expenditures to | nfluence public opinion (grassro | oots lobbying) 0 | . | 1a | |
| Total lobbying expenditures to influence a legislative body (direct lobbying) | | | | | |
| Total lobbying expenditures (add lines 1a and 1b) | | | | | |
| Other exempt purpose expendi | tures | 0 | . | d | |
| Total exempt purpose expendit | ures (add lines 1c and 1d) | 0 | . | е | |
| Lobbying nontaxable amount. Enter the amount from the follo | wing table: | | | | |
| If the amount on line e is: | The lobbying nontaxable amount is: | | | | |
| Not over \$500,000 > 500,000 <= 1,000,000 > 1,000,000 <= 1,500,000 > 1,500,000 <= 17,000,000 | 20% of the amount on line 1e 100,000 + 15% > 500,000 175,000 + 10% > 1,000,000 225,000 + 5% > 1,500,000 | | | | |
| Over \$17,000,000 | \$1,000,000 | 0 | . | f | |
| Grassroots nontaxable amount | (enter 25% of line 1f) | 0 | . | g | |
| Subtract line 1g from line 1a (limit to zero) | | | | h | |
| Subtract line 1f from line 1c (lim | it to zero) | | . | i | |
| Member's share of excess lobbying expenditures | | | | | |

Schedule C

Affiliated Group Lobbying Expenditures Part II -A

Name of Affiliated Group Member INTERNET SOCIETY

Employer ID Number 54-1650477

Affiliated Group Member Address 11710 PLAZA AMERICA DRIVE STE 400 RESTON , VA 20190 Electing Member YES

| imits on Lobbying Expenditu | ires: | | | |
|---|------------------------------------|----------------|-------------|--|
| otal lobbying expenditures to | influence public opinion (grassro | oots lobbying) | 0. | |
| otal lobbying expenditures to | influence a legislative body (dire | ct lobbying) | 0. | |
| otal lobbying expenditures (ac | ld lines 1a and 1b) | | 0. | |
| Other exempt purpose expendi | tures | | 45,075,170. | |
| otal exempt purpose expendit | ures (add lines 1c and 1d). | | 45,075,170. | |
| Lobbying nontaxable amount. Enter the amount from the follo | wing table: | | | |
| If the amount on line e is: | The lobbying nontaxable amount is: | | | |
| Not over \$500,000 > 500,000 <= 1,000,000 > 1,000,000 <= 1,500,000 > 1,500,000 <= 17,000,000 | 175,000 + 10% > 1,000,000 | | | |
| Over \$17,000,000 | \$1,000,000 | | 1,000,000. | |
| Grassroots nontaxable amount | (enter 25% of line 1f) | | 250,000. | |
| Subtract line 1g from line 1a (lir | nit to zero) | | 0. | |
| Subtract line 1f from line 1c (lim | nit to zero) | | 0. | |
| Nember's share of excess lobb | ying expenditures | | 0. | |

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

INTERNET SOCIETY FOUNDATION

Employer identification number 82-3285688

| Pai | t I Organizations Maintaining Donor Advised | d Funds or Other Similar Funds | or Accounts. Complete if the |
|-------|---|--|--|
| | organization answered "Yes" on Form 990, Part IV, line | e 6. | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor advisors in v | writing that the assets held in donor advis | ed funds |
| | are the organization's property, subject to the organization's | exclusive legal control? | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor a | dvisors in writing that grant funds can be | used only |
| | for charitable purposes and not for the benefit of the donor or | r donor advisor, or for any other purpose | conferring |
| | | | |
| Pai | t II Conservation Easements. Complete if the org | ganization answered "Yes" on Form 990, | Part IV, line 7. |
| 1 | Purpose(s) of conservation easements held by the organization | on (check all that apply). | |
| | Preservation of land for public use (for example, recreated | tion or education) Preservation o | f a historically important land area |
| | Protection of natural habitat | Preservation or | f a certified historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualif | ied conservation contribution in the form | of a conservation easement on the last |
| | day of the tax year. | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a |
| b | Total acreage restricted by conservation easements | | 2b |
| С | Number of conservation easements on a certified historic stru | ucture included in (a) | 2c |
| d | Number of conservation easements included in (c) acquired a | ifter 7/25/06, and not on a historic structu | ıre |
| | listed in the National Register | | 2d |
| 3 | Number of conservation easements modified, transferred, rele | eased, extinguished, or terminated by the | e organization during the tax |
| | year ▶ | | |
| 4 | Number of states where property subject to conservation eas | | |
| 5 | Does the organization have a written policy regarding the per | | |
| | violations, and enforcement of the conservation easements it | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | handling of violations, and enforcing cons | servation easements during the year |
| _ | <u> </u> | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | ling of violations, and enforcing conserva | tion easements during the year |
| _ | > \$ | | (1.)(4)(7)(1) |
| 8 | Does each conservation easement reported on line 2(d) above | | |
| • | and section 170(h)(4)(B)(ii)? | | |
| 9 | In Part XIII, describe how the organization reports conservation | • | |
| | balance sheet, and include, if applicable, the text of the footn | ote to the organization's financial statem | ents that describes the |
| Pai | organization's accounting for conservation easements. † III Organizations Maintaining Collections of | Art. Historical Treasures, or Ot | ther Similar Assets. |
| | Complete if the organization answered "Yes" on Form | | |
| 12 | If the organization elected, as permitted under FASB ASC 95 | | and halance sheet works |
| iu | of art, historical treasures, or other similar assets held for pub | • | |
| | service, provide in Part XIII the text of the footnote to its finan | | |
| h | If the organization elected, as permitted under FASB ASC 95 | | |
| | art, historical treasures, or other similar assets held for public | • | |
| | provide the following amounts relating to these items: | exhibition, education, or rescarcinin fact | icranice of public scretoc, |
| | | | > \$ |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | |
| 2 | If the organization received or held works of art, historical trea | | |
| _ | the following amounts required to be reported under FASB A | | a gan, provide |
| 9 | Revenue included on Form 990, Part VIII, line 1 | G | > \$ |
| a | Accepts included in Form 990, Part V | | |

| Pai | 1 III Organizations Maintaining C | ollections of Ar | t, Histo | orical Tre | asures, o | r Othe | r Similar | Assets | (contir | nued) | |
|--------|---|------------------------|-------------------|------------------|---------------------|------------|-------------------------|--------------|-----------|---------|-----|
| 3 | Using the organization's acquisition, accession | | | | | | | | • | , | |
| | collection items (check all that apply): | | | | | | | | | | |
| а | Public exhibition | c | i 🔲 i | Loan or exc | hange progra | am | | | | | |
| b | Scholarly research | e | , 🔲 | Other | | | | | | | |
| С | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explain | n how the | ey further th | ne organizatio | n's exer | npt purpos | e in Part | XIII. | | |
| 5 | During the year, did the organization solicit o | r receive donations | of art, his | storical treas | sures, or othe | er similar | assets | | | | |
| | to be sold to raise funds rather than to be ma | | | | | | | | Yes | | No |
| Par | t IV Escrow and Custodial Arran | | ete if the | organizatio | n answered ' | "Yes" on | Form 990, | , Part IV, I | ine 9, or | | |
| | reported an amount on Form 990, Par | rt X, line 21. | | | | | | | | | |
| 1a | Is the organization an agent, trustee, custodi | | | | | | | | _ | | |
| | on Form 990, Part X? | | | | | | | L | Yes | | No |
| b | If "Yes," explain the arrangement in Part XIII | and complete the fol | llowing ta | able: | | | | | | | |
| | | | | | | | | | Amoun | t | |
| С | Beginning balance | | | | | | | | | | |
| d | Additions during the year | | | | | | | | | | |
| е | Distributions during the year | | | | | | | | | | |
| f | Ending balance | | | | | | | | 7 | | |
| | Did the organization include an amount on Fo | | , | | | | ity? | | Yes | | No |
| Par | If "Yes," explain the arrangement in Part XIII. | Check here if the ex | planatio | n has been | provided on I | Part XIII | | | | | |
| Fai | T V Endowment Funds. Complete i | | | | | | | | () [| | 1 . |
| 4. | Device in a of consultation of | (a) Current year | (b) P | rior year | (c) Two year | rs dack | (d) Three y | ears dack | (e) Four | years b | аск |
| 1a | Beginning of year balance | | | | | | | | | | |
| b | Contributions | | | | | | | | | | |
| C | Net investment earnings, gains, and losses | | | | | | | | | | |
| d | Grants or scholarships | | | | | + | | | | | |
| е | Other expenditures for facilities | | | | | | | | | | |
| | and programs | | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | | |
| g 2 | End of year balance Provide the estimated percentage of the curr | ent year end halance | e (line 1a | column (a) | // pelq sc. | | | | | | |
| a | Board designated or quasi-endowment | • | e (iii le 19 % | i, coluitiit (a) | I) Helu as. | | | | | | |
| b | Permanent endowment | | | | | | | | | | |
| | | | | | | | | | | | |
| · | The percentages on lines 2a, 2b, and 2c sho | | | | | | | | | | |
| За | Are there endowment funds not in the posse | • | ation that | are held ar | nd administer | red for th | e organiza | tion | | | |
| Ju | by: | colori or the organiza | 2011 11101 | aro mora ar | ra darriiriiotor | 00 101 111 | o organiza | | | Yes | No |
| | (i) Unrelated organizations | | | | | | | | 3a(i) | | |
| | (ii) Related organizations | | | | | | | | 3a(ii) | | |
| b | If "Yes" on line 3a(ii), are the related organiza | tions listed as requir | ed on So | hedule R? | | | | | 3b | | |
| 4 | Describe in Part XIII the intended uses of the | | | | | | | | | | |
| Par | t VI Land, Buildings, and Equipm | | | | | | | | | | |
| | Complete if the organization answered | d "Yes" on Form 990 |), Part IV | , line 11a. S | ee Form 990 | , Part X, | line 10. | | | | |
| | Description of property | (a) Cost or o | | | or other (other) | | ccumulate preciation | d | (d) Boo | k value | |
| | Land | | - | | | | | | | | |
| b | Buildings | | | | | | | | | | |
| c | Leasehold improvements | | | | | | | | | | |
| d | Equipment | | | | | | | | | | |
| | Other | | | | 173,329. | | 84,5 | 531. | | 88,7 | 98. |
| | l. Add lines 1a through 1e. <i>(Column (d) must</i> e | | X. colum | n (B). line 1 | 0c.) | <u></u> | <u></u> . | | | 88,7 | 98. |
| | | | | | | | | | | | |

| Part VII Investments - Other Securities. | | | |
|--|------------------------------|---|-----------------------|
| Complete if the organization answered "Yes" | on Form 990, Part IV, line 1 | 1b. See Form 990, Part X, line 12. | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end | -of-year market value |
| (1) Financial derivatives | | | |
| (2) Closely held equity interests | | | |
| (3) Other | | | |
| (A) TIAA-CREF SOCIAL CHOICE BD FD INST | | | |
| (B) (TSBIX) | 16,903,192. | END-OF-YEAR MARKET VALUE | |
| (C) STATE STREET HEDGED INT'L DEV EQUITY | | | |
| (D) INDEX FUND K CLASS (SSHQX) | 6,575,619. | END-OF-YEAR MARKET VALUE | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | 23,478,811. | | |
| Part VIII Investments - Program Related. | | | |
| Complete if the organization answered "Yes" | on Form 990, Part IV, line 1 | 1c. See Form 990, Part X, line 13. | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end | -of-year market value |
| <u>(1)</u> | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | | |
| Part IX Other Assets. | | | |
| Complete if the organization answered "Yes" | on Form 990, Part IV, line 1 | 1d. See Form 990, Part X, line 15. | |
| | Description | , , | (b) Book value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| | 1 <i>E</i> \ | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. | ? 15. <i>j</i> | | |
| Complete if the organization answered "Yes" | on Form 990 Part IV line 1 | 11e or 11f See Form 990 Part X line 25 | |
| 1. (a) Description of liability | off offit 550, factiv, line | 710 01 111. Gee 1 01111 330, 1 art X, iiiic 23. | (b) Book value |
| | | | (b) Book value |
| | | | 65,003. |
| (=) | | | 03,003. |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ... 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

65,003.

82-3285688

| Par | · | | Revenue per Re | turn. | |
|---------|---|---------------------|------------------------|------------|----------------------------|
| 1 | Complete if the organization answered "Yes" on Form 990, Part IV, line Total revenue, gains, and other support per audited financial statements | | | 1 | 116,284,952. |
| | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | |
| | Net unrealized gains (losses) on investments | 2a | 7,936,457. | | |
| | Donated services and use of facilities | | , , | | |
| | Recoveries of prior year grants | | | | |
| | Other (Describe in Part XIII.) | | 80,637,855. | | |
| | Add lines 2a through 2d | | | 2e | 88,574,312. |
| 3 | Subtract line 2e from line 1 | | | 3 | 27,710,640. |
| | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 308,211. | | |
| b | Other (Describe in Part XIII.) | 4b | | | |
| С | Add lines 4a and 4b | | | 4c | 308,211. |
| | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) | | | 5 | 28,018,851. |
| Par | t XII Reconciliation of Expenses per Audited Financial State | | Expenses per F | Return. | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line | | | | |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 83,236,920. |
| | Amounts included on line 1 but not on Form 990, Part IX, line 25: | 1 1 | | | |
| | Donated services and use of facilities | | | | |
| | Prior year adjustments | | | | |
| | Other losses | | 66 039 037 | - | |
| | Other (Describe in Part XIII.) | | 66,038,927. | | 66 029 027 |
| | Add lines 2a through 2d | | | 2e | 66,038,927. 17,197,993. |
| | Subtract line 2e from line 1 | | | 3 | 17,137,333. |
| | Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b | 42 | 308,211. | | |
| | Other (Describe in Part XIII.) | | 300,211. | | |
| | Add lines 4a and 4b | | | 4c | 308,211. |
| | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18. | | | 5 | 17,506,204. |
| Par | t XIII Supplemental Information. | / | | | |
| Provid | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; | Part IV, lines 1b a | and 2b; Part V, line 4 | l; Part X, | line 2; Part XI, |
| lines 2 | 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any | additional inform | ation. | | |
| | | | | | |
| | | | | | |
| PART | X, LINE 2: | | | | |
| | | | | | |
| ISOC | AND PIR ARE GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UN | IDER THE | | | |
| | | /\ | | | |
| PROV | ISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (| (IRC). IN | | | |
| A DDT | TION TOOK AND DID OUR TRY BOD GUADINADIE GOMMETHUMION DE | NIGHTONG AND | | | |
| ADDI | TION, ISOC AND PIR QUALIFY FOR CHARITABLE CONTRIBUTION DEL | DUCTIONS AND | | | |
| HAVE | BEEN CLASSIFIED AS ORGANIZATIONS THAT ARE NOT PRIVATE FOU | NDATTONS | | | |
| IIAVE | DEEN CHADIFFED AD ONGANIZATIONS THAT ARE NOT INTVALE FOR | MDATIONS. | | | |
| TNCO | ME WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABI | E DEDUCTIONS | | | |
| | | <u> </u> | | | |
| (UNR | ELATED BUSINESS INCOME), IS SUBJECT TO FEDERAL AND STATE (| CORPORATE | | | |
| , | | | | | |
| INCO | ME TAXES. ISOC AND PIR HAD NO NET UNRELATED BUSINESS INCOM | ME FOR THE | | | |
| | | | | | |
| YEAR | S ENDED DECEMBER 31, 2020 AND 2019. | | | | |
| | | | | | |
| | | | | | |
| T.100- | DNEW GOGTEMY AGIA LIMITED TO CURTICAL TO LOCAL CONVENT | ad DED | | | |
| TNTE. | RNET SOCIETY ASIA LIMITED IS SUBJECT TO LOCAL COUNTRY TAXE | PO LEK | | | |
| SING | APORE TAX REGULATIONS. THE SUBSIDIARY HAD NO TAXABLE SURPI | LUS AND, AS | | | |

| Schedule D (Form 990) 2020 INTERNET SOCIETY FOUNDATION | 82-3285688 | Page 5 |
|--|------------|--------|
| Part XIII Supplemental Information (continued) | | |
| SUCH, HAD NO TAX LIABILITY AT DECEMBER 31, 2020 AND 2019. | | |
| | | |
| | | |
| IETF LLC IS A DISREGARDED ENTITY FOR TAX REPORTING PURPOSES. | | |
| | | |
| | | |
| MANAGEMENT EVALUATED ISOC'S AND PIR'S TAX POSITIONS AND CONCLUDED THAT | | |
| THEY HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE | | |
| FINANCIAL STATEMENTS. | | |
| | | |
| | | |
| PART XI, LINE 2D - OTHER ADJUSTMENTS: | | |
| RELATED ENTITIES REVENUE INCLUDED IN CONSOLIDATED FINANCIAL | | |
| STATEMENTS 80.637.855. | | |
| STATEMENTS 80,637,855. | | |
| | | |
| PART XII, LINE 2D - OTHER ADJUSTMENTS: | | |
| RELATED ENTITIES EXPENSES INCLUDED IN CONSOLIDATED | | |
| | | |
| FINANCIAL STATEMENTS 66,038,927. | | |
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SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

2020
Open to Public Inspection

Name of the organization

Employer identification number

INTERNET SOCIETY FOUNDATION 82-3285688 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total (a) Region expenditures employees, offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region SUB-SAHARAN AFRICA 0 PROGRAM RARE 4,147. EUROPE (INCLUDING 1,734. ICELAND & GREENLAND) 0 PROGRAM RARE 1 PROGRAM 2,698. SUB-SAHARAN AFRICA 0 0 SCILLS EUROPE (INCLUDING ICELAND & GREENLAND) 0 0 PROGRAM SCILLS 1,128. SUB-SAHARAN AFRICA 0 0 PROGRAM BNET 1,623. EUROPE (INCLUDING ICELAND & GREENLAND) 0 0 PROGRAM BNET 679. SUB-SAHARAN AFRICA 0 0 PROGRAM RESEARCH 811. EUROPE (INCLUDING ICELAND & GREENLAND) 0 0 PROGRAM RESEARCH 339. 0 4 13,159. 3 a Subtotal **b** Total from continuation

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

0

0

Schedule F (Form 990) 2020

572,134.

585,293.

and 3b)

sheets to Part I

Totals (add lines 3a

| Part I Continuatio | n of Activitie | | • (Schedule F (Form 990), Part I, line 3) | 02 3203000 | Page |
|----------------------|-----------------------|------------------|--|---|------------------------|
| | 1 | | | | T |
| (a) Region | (b) Number of offices | employees or | (d) Activities conducted in region (by type) (i.e., fundraising, | (e) If activity listed in (d) is a program service, | (f) Total expenditures |
| | in the region | agents in region | program services, grants to recipients located in the region) | describe specific type of service(s) in region | for region |
| | | | GRANTS & OTHER ASSISTANCE | | |
| | | | TO RECIPIENTS LOCATED IN | | |
| SOUTH AMERICA | 0 | | THE REGION | | 152,589. |
| | | | GRANTS & OTHER ASSISTANCE | | |
| | | | TO RECIPIENTS LOCATED IN | | |
| SOUTH ASIA | 0 | | THE REGION | | 100,000. |
| | | | GRANTS & OTHER ASSISTANCE | | |
| | | | TO RECIPIENTS LOCATED IN | | |
| SUB-SAHARAN AFRICA | 0 | 0 | THE REGION | | 172,154. |
| | | | GRANTS & OTHER ASSISTANCE | | |
| CENTRAL AMERICA AND | | | TO RECIPIENTS LOCATED IN | | |
| THE CARIBBEAN | 0 | 0 | THE REGION | | 75,394. |
| | | | GRANTS & OTHER ASSISTANCE | | |
| EUROPE (INCLUDING | | | TO RECIPIENTS LOCATED IN | | |
| ICELAND & GREENLAND) | 0 | 0 | THE REGION | | 71,997. |
| | | | | | |
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| | | | | | |
| Totals | · | | | | 572,134. |

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

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|-------------------------------|---|--|--------------------------|--------------------------|-------------------------------------|----------------------------------|---|---|
| | | | | | | | | |
| | | SOUTH AMERICA | SCILLS | 69 859 | EFT OR WIRE | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | SCILLS | 71,691. | EFT OR WIRE | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA AND THE CARIBBEAN | scills | 71,966. | EFT OR WIRE | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | RARE | 83,000. | EFT OR WIRE | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | SCILLS | 71,954. | EFT OR WIRE | 0. | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | | SCILLS | 71,997. | EFT OR WIRE | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | RESEARCH | 100,000. | EFT OR WIRE | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| 2. Extended number of | | AND THE CARIBBEAN SOUTH AMERICA SUB-SAHARAN AFRICA EUROPE (INCLUDING ICELAND & GREENLAND) | RARE SCILLS SCILLS | 71,954. 71,997. | EFT OR WIRE EFT OR WIRE EFT OR WIRE | 0. | | |

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

| ightharpoonup | |
|---------------|--|
| | |

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash assistance noncash assistance SUB-SAHARAN AFRICA 28,509. EFT OR WIRE RESEARCH 1 0.

| Part IV | Foreign | Forms |
|---------|---------|--------------|

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

Schedule F (Form 990) 2020

Page 5

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of

| investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. |
|---|
| PART I, LINE 2: |
| THE FOUNDATION FIRST DETERMINES IF A GRANTEE IS WITHIN THE CLASS OF |
| SUPPORTED ORGANIZATIONS DESCRIBED IN ITS ARTICLES OF INCORPORATION OR IS |
| OTHERWISE A PERMITTED GRANTEE. THE FOUNDATION OBTAINS AN EQUIVALENCY |
| DETERMINATION FOR ANY FOREIGN GRANTEE THAT IS NOT RECOGNIZED BY THE IRS |
| AS A 501(C)(3) ORGANIZATION AND PROVIDE ANY ADDITIONAL INFORMATION |
| REQUIRED TO EXPLAIN ITS CONTROL OVER GRANTS TO THESE ORGANIZATIONS. |
| |
| GRANT PROPOSALS ARE REVIEWED AND APPROVED IN COMPLIANCE WITH INTERNET |
| SOCIETY FOUNDATION'S ARTICLES OF INCORPORATION, DELEGATION OF AUTHORITY |
| POLICY, AND BOARD APPROVED BUDGET. ONCE APPROVED, AN AGREEMENT IS |
| ESTABLISHED WITH A CLEAR UNDERSTANDING OF THE GRANTEE'S REQUIREMENTS. THE |
| AGREEMENT IS SIGNED BY THE APPROPRIATE PARTIES AND THE AGREED UPON |
| INITIAL AMOUNT IS FUNDED. THE GRANT IS CONSIDERED COMPLETE WHEN GRANTEE |
| FULFILLS THE ESTABLISHED REQUIREMENTS AND SUBMITS A REPORT. PAYMENT MADE |
| ACCORDING TO GRANT. |
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Inspection Employer identification number 82-3285688 INTERNET SOCIETY FOUNDATION

| 11111111111 00011 | II I COMBILITOR | • | | | | | 02 020000 | |
|---|--------------------|------------------------------------|--------------------------|-----------------------------------|--|---------------------------------------|---------------------------------------|----|
| Part I General Information on Grants ar | nd Assistance | | | | | | | |
| 1 Does the organization maintain records to | substantiate the | amount of the grants | or assistance, the | grantees' eligibility | for the grants or assi | stance, and the selection | on | |
| criteria used to award the grants or assist | tance? | | | | | | Yes I | V٥ |
| 2 Describe in Part IV the organization's pro- | | | | | | | | |
| Part II Grants and Other Assistance to D | omestic Organia | zations and Domestic | Governments. C | omplete if the orga | anization answered "Y | es" on Form 990, Part | IV, line 21, for any | |
| recipient that received more than \$ | 5,000. Part II can | be duplicated if additi | onal space is neede | ed. | | _ | | |
| Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance | |
| AMREF HEALTH AFRICA INC | | | | | | | | |
| 75 BROAD STREET STE 703 | | | | | | | | |
| NEW YORK, NY 10004 | 13-1867411 | 501(C)(3) | 247,500. | 0. | | | RARE | |
| BRAC USA INC | | | | | | | | |
| 110 WILLIAM STREET 18TH FLOOR | 20-8456741 | E01/G)/3) | 71 000 | 0 | | | SCILLS | |
| NEW YORK, NY 10038 | 20-6456741 | 501(C)(3) | 71,990. | 0. | | | SCILLS | |
| ENVIRONMENTAL LAW INSTITUTE 1730 M STREET NW STE 700 WASHINGTON, DC 20036 | 52-0901863 | 501(C)(3) | 100,000. | 0. | | | RESEARCH | |
| HELP NGO 123 N PLAZA CT MOUNT PLEASANT, SC 29464 | 82-2095809 | 501(C)(3) | 449,100. | 0. | | | RARE | |
| HIAS INC 1300 SPRING STREET STE 500 SILVER SPRING, MD 20910 | 13-5633307 | 501(C)(3) | 69,600. | 0. | | | SCILLS | |
| INTERNET SOCIETY 11710 PLAZA AMERICA DRIVE, SUITE 40 RESTON, VA 20190 | 54-1650477 | 501(C)(3) | 616,360. | 0. | | | BNET, SCILLS | |
| 2 Enter total number of section 501(c)(3) ar 3 Enter total number of other organizations | d government org | ganizations listed in the | e line 1 table | | | | > | 9. |
| Enter total harrison of other organizations | notou in the line | u | | | | | | |

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

Schedule I (Form 990) 2020

Schedule I (Form 990) INTERNET SOCIETY FOUNDATION 82-3285688

| Part II Continuation of Grants and Other A | Assistance to Dor | nestic Organizations | and Domestic Go | overnments (Sche I | edule I (Form 990), Pai I | rt II.) T | T |
|--|-------------------|-------------------------------|--------------------------|-----------------------------------|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| INTERNET SOCIETY 1710 PLAZA AMERICA DRIVE, SUITE 40 RESTON, VA 20190 |) 54-1650477 | 501 (C) (3) | 12,742,210. | 0. | | | FUNDING |
| DNESKY | 34 1030477 | 301(0)(3) | 12,742,210. | | | | IONDING |
| 2246B SIXTH STREET BERKELEY, CA 94710 | 95-4714047 | 501(C)(3) | 388,933. | 0. | | | RARE |
| TEACH FOR BANGLADESH | | | | | | | |
| GREAT FALLS, VA 22066 | 45-4476715 | 501(C)(3) | 98,980. | 0. | | | SCILLS |
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Page 1

Schedule I (Form 990) 2020 INTERNET SOCIETY FOUNDATION 82-3285688 Page 2

| Part III Grants and Other Assistance to Domestic Individuals. Part III can be duplicated if additional space is needed. | . Complete if the | organization answe | ered "Yes" on Form 9 | 90, Part IV, line 22. | |
|--|--------------------------|--------------------------|---------------------------------------|---|---------------------------------------|
| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non- cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
| | | | | | |
| | | | | | |
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| Part IV Supplemental Information. Provide the information req | uired in Part I, lin | e 2; Part III, column | (b); and any other ad | ditional information. | |
| PART I, LINE 2: | | | | | |
| THE FOUNDATION FIRST DETERMINES IF A GRANTEE IS WIT | THIN THE CLAS | S OF | | | |
| SUPPORTED ORGANIZATIONS DESCRIBED IN ITS ARTICLES (| OF INCORPORAT | ION OR IS | | | |
| OTHERWISE A PERMITTED GRANTEE. | | | | | |
| | | | | | |
| GRANT PROPOSALS ARE REVIEWED AND APPROVED IN COMPL | IANCE WITH IS | oc | | | |
| FOUNDATION'S DELEGATION POLICY AND BOARD APPROVED I | BUDGET. ONCE | APPROVED, AN | | | |
| AGREEMENT IS ESTABLISHED WITH A CLEAR UNDERSTANDING | G OF THE GRAN | TEE'S | | | |
| REQUIREMENTS THE AGREEMENT IS SIGNED BY THE APPROI | PRTATE PARTIE | S AND THE | | | |

Schedule I (Form 990) 2020

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

2020

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

INTERNET SOCIETY FOUNDATION

Employer identification number 82-3285688

| Pa | Part I Questions Regarding Compensation | • | | |
|------------|---|-------------------|-----|----|
| | <u> </u> | | Yes | No |
| 1 a | ta Check the appropriate box(es) if the organization provided any of the following to or for a person listed | on Form 990, | | |
| | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | | | |
| | First-class or charter travel Housing allowance or residence to | for personal use | | |
| | Travel for companions Payments for business use of per | rsonal residence | | |
| | Tax indemnification and gross-up payments Health or social club dues or initial | ation fees | | |
| | Discretionary spending account Personal services (such as maid, | chauffeur, chef) | | |
| | | | | |
| b | b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment | nt or | | |
| | reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | 1 <u>b</u> | | |
| 2 | 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all dire | ectors, | | |
| | trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? | 2 | | |
| | | | | |
| 3 | Indicate which, if any, of the following the organization used to establish the compensation of the organ | nization's | | |
| | CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related or | rganization to | | |
| | establish compensation of the CEO/Executive Director, but explain in Part III. | | | |
| | Compensation committee Written employment contract | | | |
| | ☐ Independent compensation consultant ☐ Compensation survey or study | | | |
| | Form 990 of other organizations Approval by the board or comper | nsation committee | | |
| | | | | |
| 4 | During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing | 3 | | |
| | organization or a related organization: | | | |
| а | a Receive a severance payment or change-of-control payment? | 4a | | Х |
| b | b Participate in or receive payment from a supplemental nonqualified retirement plan? | 4b | | Х |
| С | c Participate in or receive payment from an equity-based compensation arrangement? | 4c | | Х |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | l. | | |
| | | | | |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | | |
| 5 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any com | npensation | | |
| | contingent on the revenues of: | | | |
| а | a The organization? | <u>5a</u> | | Х |
| b | b Any related organization? | <u>5b</u> | | Х |
| | If "Yes" on line 5a or 5b, describe in Part III. | | | |
| 6 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any com | npensation | | |
| | contingent on the net earnings of: | | | |
| а | a The organization? | <u>6a</u> | | X |
| | b Any related organization? | ا ما | | Х |
| | If "Yes" on line 6a or 6b, describe in Part III. | | | |
| 7 | | • | | |
| | not described on lines 5 and 6? If "Yes," describe in Part III | | Х | |
| 8 | , | | | |
| | initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | 8 | | Х |
| 9 | If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in | | | |
| | Regulations section 53.4958-6(c)? | 9 | | |

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

Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title | | (B) Breakdown of | W-2 and/or 1099-MI | SC compensation | (C) Retirement and other deferred | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) |
|-----------------------|------|--------------------------|-------------------------------------|---|-----------------------------------|-------------------------|------------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | compensation | perients | (6)(1)-(0) | reported as deferred on prior Form 990 |
| (1) ANDREW SULLIVAN | (i) | 44,907. | 14,994. | 86. | 5,344. | 1,826. | 67,157. | 0. |
| PRESIDENT & CEO | (ii) | 314,347. | 104,958. | 604. | 37,406. | 12,785. | 470,100. | 0. |
| (2) SARAH ARMSTRONG | (i) | 203,754. | 20,000. | 1,290. | 33,723. | 13,473. | 272,240. | 0. |
| EXECUTIVE DIRECTOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (3) CONNIE KENDIG | (i) | 124,254. | 5,000. | 240. | 19,509. | 12,607. | 161,610. | 0. |
| SENIOR GRANTS MANAGER | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

Page 2

Schedule J (Form 990) 2020

| Part III | Supplemental Information |
|----------|--------------------------|
| | |

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

COMPENSATION SHOWN IN PART VII OF THE FORM 990. AND SCHEDULE J. PAGE 2.

PART II. IS PROCESSED BY INTERNET SOCIETY ON BEHALF OF INTERNET SOCIETY

FOUNDATION.

THE INTERNET SOCIETY ENGAGED A COMPENSATION SPECIALIST TO ESTABLISH A

COMPREHENSIVE COMPENSATION PROGRAM OF THE COMPANY. THE GOALS WERE TO

ESTABLISH INTERNAL COMPENSATION EQUITY. ACHIEVE EXTERNAL EQUITY TO ENSURE

FAIR AND COMPETITIVE PAY. TO DEVELOP AN OBJECTIVE MERIT REVIEW PROCESS. AND

DEVELOP TOOLS TO MAINTAIN THE COMPENSATION PROGRAM. THE INTERNET SOCIETY

DEVELOPED COMPENSATION BENCHMARKS FOR EACH POSITION WITHIN THE

ORGANIZATION. USING SEVERAL COMPENSATION STUDIES FOR US BASED EMPLOYEES AND

BENCHMARKS FROM MERCER TOWERS WATSON AND BIRCHES GROUP FOR WORLDWIDE

EMPLOYEES. THESE BENCHMARKS ARE UPDATED ANNUALLY.

AS PART OF THE CONTRACT PROCESS. AN INDEPENDENT COMPENSATION CONSULTANT WAS

ENGAGED BY THE INTERNET SOCIETY BOARD OF TRUSTEES TO PROVIDE AN OPINION ON

REASONABLENESS OF AND SUPPORTING COMPARABILITY DATA WITH RESPECT TO TOTAL

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

COMPENSATION OF THE CHIEF EXECUTIVE OFFICER. THE CEO RECEIVES THE BENEFITS

AVAILABLE TO OTHER INTERNET SOCIETY EMPLOYEES. INCLUDING A COMPANY

CONTRIBUTION TOWARDS A RETIREMENT PLAN. ANNUALLY THE COMPENSATION

COMMITTEE OF THE BOARD OF TRUSTEES DRAWS UP ACHIEVEMENT TARGETS FOR THE

CEO. THE CEO SUBMITS A SELF-EVALUATION AT YEAREND TO THE COMPENSATION

COMMITTEE. THE COMPENSATION COMMITTEE REVIEWS THE CEO'S PERFORMANCE AND

MAKES A DETERMINATION AS TO THE AMOUNT OF VARIABLE COMPENSATION EARNED.

THE COMPENSATION COMMITTEE THEN INSTRUCTS THE INTERNET SOCIETY'S CFO TO PAY

THE VARIABLE AWARD BASED ON THE COMMITTEE'S PERFORMANCE ASSESSMENT. LESS

APPLICABLE STATUTORY WITHHOLDINGS.

THE INTERNET SOCIETY EMPLOYS A GOAL MANAGEMENT PROCESS TO ESTABLISH AND

TRACK GOALS FOR ALL MEMBERS OF ITS STAFF. THE INTERNET SOCIETY REVIEWS

PERFORMANCE OF ALL EMPLOYEES ON DECEMBER 31. ANNUAL SALARY REVIEWS ARE

BASED ON PERFORMANCE EVALUATIONS, COMPENSATION SURVEYS, AND STANDARDS FOR

THE INDIVIDUAL COUNTRY OF EMPLOYMENT. THE INTERNET SOCIETY ALSO AWARDS

VARIABLE COMPENSATION TO STAFF BASED ON INDIVIDUAL AND CORPORATE

PERFORMANCE DURING THE YEAR. THESE AWARDS WERE DETERMINED IN CONSULTATION

WITH THE COMPENSATION CONSULTANT BASED ON RECOMMENDATIONS BY THE CEO CFO

| Part III Supplemental Information |
|--|
| Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. |
| AND AWARDEES' DIRECT SUPERVISOR. |
| |
| PART I, LINE 7: |
| 2020 VARIABLE COMPENSATION AWARDS WERE DETERMINED BY THE CEO AND CFO, WITH |
| INPUT FROM MANAGEMENT UNDER THE VARIABLE COMPENSATION PROGRAM. AT THE |
| BEGINNING OF THE YEAR, THE CEO DETERMINES TARGET AWARDS (ALL TARGETS AND |
| AWARDS ARE BASED ON A PERCENTAGE OF YEAR-END BASE COMPENSATION) FOR |
| POSITIONS WITHIN THE ORGANIZATION. ALL FULL-TIME STAFF RECEIVED VARIABLE |
| COMPENSATION TARGETS BETWEEN 4% AND 20% (THE CEO'S TARGET IS ESTABLISHED IN |
| HIS EMPLOYMENT AGREEMENT). AT THE END OF THE YEAR, THE CEO, WITH INPUT |
| FROM MANAGERS DETERMINES THE FINAL AWARDS. PERFORMANCE OF THE INTERNET |
| SOCIETY AS A WHOLE AND OF THE INDIVIDUAL ARE THE BASIS FOR THESE AWARDS. |
| THE CEO'S PERFORMANCE AND AWARD ARE DETERMINED BY THE BOARD OF TRUSTEES |
| ACCORDING TO GOALS ESTABLISHED BY THE BOARD. |
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SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open To Public Inspection

| Name of the | organization |
|-------------|--------------|
|-------------|--------------|

INTERNET SOCIETY FOUNDATION

Employer identification number

82-3285688

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (h) Approved (i) Written (b) Relationship (c) Purpose (d) Loan to or (e) Original (f) Balance due (d) In (a) Name of

| | rested person | with organization | | fron | n the zation? | principal amount | (i) Balarice due | defa | ult? | by boo | ard or littee? | agreer | ment? |
|----------|---------------|-------------------|----------|------|------------------|------------------|------------------|------|------|--------|-------------------|--------|-------|
| | | | | То | From | | | Yes | No | Yes | No | Yes | No |
| SARAH AR | MSTRONG | EXECUTIV | ACCIDENT | | Х | 100. | 100. | | Х | | Х | | Х |
| | | | | | | | | | | | | | |
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| Total | | | | | | | 100. | | | | | | |

| Part III | Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of assistance | (d) Type of assistance | (e) Purpose of assistance |
|-------------------------------|---|--------------------------|-------------------------------|---------------------------|
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2020

Page 2

| (a) Name of interested person | d "Yes" on Form 990, Part IV, line 28a, 28 (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's | | |
|---|---|---------------------------|--------------------------------|-------------------------------|-------|--|
| | person and the organization | transaction | transaction | Yes | nues? | |
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| Part V Supplemental Information. | | | | • | | |
| Provide additional information for resp | onses to questions on Schedule L (see in | nstructions). | | | | |
| SCHEDULE L, PART II, LOANS TO AND FROM | I INTERESTED PERSONS: | | | | | |
| (A) NAME OF PERSON: SARAH ARMSTRONG | | | | | | |
| (ii) MMI of TEMBON. BIRMI IMMBIRONG | | | | | | |
| (B) RELATIONSHIP WITH ORGANIZATION: EX | ECUTIVE DIRECTOR | | | | | |
| (C) PURPOSE OF LOAN: ACCIDENTAL PERSON | IAL CHARGE ON CORPORATE CREDIT | CARD | | | | |
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SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Inspection

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information. Department of the Treasury Internal Revenue Service Name of the organization

INTERNET SOCIETY FOUNDATION

Employer identification number 82-3285688

| FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: |
|---|
| INTERNET CAN MAKE TO PEOPLE EVERYWHERE. IT PROMOTES THE DEVELOPMENT OF |
| THE INTERNET AS A GLOBAL TECHNICAL INFRASTRUCTURE, A RESOURCE TO ENRICH |
| PEOPLE'S LIVES, AND A FORCE FOR GOOD IN SOCIETY. |
| |
| FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: |
| BEYOND THE NET GRANTS: THROUGH INTERNET SOCIETY, THE INTERNET SOCIETY |
| FOUNDATION'S BEYOND THE NET SMALL AND LARGE GRANT PROGRAMMES OFFERS |
| FUNDING TO SUPPORT INTERNET SOCIETY CHAPTERS AND SPECIAL INTEREST |
| GROUPS (SIGS) TO IMPLEMENT INNOVATIVE PROJECTS THAT MAKE A LOCAL IMPACT |
| BY PROVIDING MEANINGFUL ACCESS TO AN OPEN, TRUSTED, AND |
| GLOBALLY-CONNECTED INTERNET. |
| EXPENSES \$ 602,146. INCLUDING GRANTS OF \$ 457,360. REVENUE \$ 0. |
| |
| RESEARCH: THE FOUNDATION EXPLORES OPPORTUNITIES TO FUND RESEARCH AND |
| STRENGTHEN RESEARCH CAPACITY ACROSS TECHNICAL, ECONOMIC AND PUBLIC |
| POLICY TOPICS. |
| EXPENSES \$ 300,847. INCLUDING GRANTS OF \$ 228,508. REVENUE \$ 0. |
| |
| FORM 990, PART VI, SECTION A, LINE 6: |
| THE SOLE MEMBER OF THE INTERNET SOCIETY FOUNDATION SHALL BE THE INTERNET |
| SOCIETY (THE "MEMBER"). |
| |
| FORM 990, PART VI, SECTION A, LINE 7A: |
| THE INTERNET SOCIETY FOUNDATION IS GOVERNED BY A BOARD OF TRUSTEES COMPOSED |
| |

OF THE CURRENT MEMBERS OF THE INTERNET SOCIETY BOARD OF TRUSTEES.

| Name of the organization INTERNET SOCIETY FOUNDATION | Employer identification number 82-3285688 |
|---|---|
| -THE MEMBERSHIP OF THE BOARD OF TRUSTEES INCLUDES: | |
| -FOUR MEMBERS ELECTED BY INTERNET SOCIETY CHAPTERS | |
| -FOUR MEMBERS ELECTED BY INTERNET SOCIETY ORGANIZATION MEMBERS | _ |
| -FOUR MEMBERS APPOINTED FROM THE INTERNET ENGINEERING TASK FORCE (IETF) | |
| | |
| FORM 990, PART VI, SECTION A, LINE 7B: | |
| THE TRUSTEES SHALL BE APPOINTED BY THE MEMBER (INTERNET SOCIETY). TRUSTEES | |
| MAY BE REMOVED WITH OR WITHOUT CAUSE BY THE MEMBER. | |
| FORM 990, PART VI, SECTION B, LINE 11B: | |
| THE INTERNET SOCIETY FOUNDATION'S ACCOUNTING FIRM PREPARES AND SIGNS THE | |
| RETURN AS PAID PREPARER AND DELIVERS THE RETURN TO THE INTERNET SOCIETY | |
| FOUNDATION. PRIOR TO FILING, THE CFO AND THE CEO OF THE INTERNET SOCIETY | |
| FOUNDATION REVIEW THE RETURN WITH THE AUDIT COMMITTEE. A REPRESENTATIVE OF | |
| THE INDEPENDENT ACCOUNTING FIRM'S TAX TEAM IS PRESENT TO ADDRESS ANY | |
| QUESTIONS FROM THE AUDIT COMMITTEE MEMBERS. AFTER REVIEW, A COPY OF THE | |
| RETURN IN ITS FINAL FORM IS SENT TO EACH MEMBER OF THE BOARD OF TRUSTEES | |
| PRIOR TO FILING THE RETURN. THE CEO OR THE CFO SIGNS FORM 8879-EO, THE IRS | |
| E-FILE SIGNATURE AUTHORIZATION FORM, AND RETURNS THIS FORM TO THE INTERNET | |
| SOCIETY FOUNDATION'S ACCOUNTING FIRM. THE ACCOUNTING FIRM THEN | |
| ELECTRONICALLY FILES THE RETURN WITH THE INTERNAL REVENUE SERVICE. | |
| | |
| FORM 990, PART VI, SECTION B, LINE 12C: | |
| ON AN ANNUAL BASIS, TRUSTEES AND OFFICERS OF INTERNET SOCIETY FOUNDATION | |
| SHALL FILL OUT A CONFLICT OF INTEREST QUESTIONNAIRE. THESE COMPLETED | |
| QUESTIONNAIRES WILL BE REVIEWED AND MONITORED BY THE CHAIR OF THE AUDIT | |
| COMMITTEE, AND THE RESULTS ARE REPORTED TO THE BOARD OF TRUSTEES. THE | |
| AUDIT COMMITTEE AND THE CHAIR OF THE INTERNET SOCIETY FOUNDATION'S BOARD OF | |

| Name of the organization INTERNET SOCIETY FOUNDATION | Employer identification number 82-3285688 |
|---|---|
| TRUSTEES RELY ON THE TRUSTEES AND OFFICERS TO INFORM THEM OF ISSUES THAT | |
| MIGHT ARISE IN THE INTERIM PERIOD BETWEEN QUESTIONNAIRE SUBMISSIONS. THE | |
| CHAIR SOLICITS ALL TRUSTEES TO DISCLOSE ANY CONFLICTS WITH THE AGENDA ITEMS | |
| FOR THAT BOARD MEETING. TRUSTEES WHO REPORT POTENTIAL CONFLICTS MAY BE | |
| REQUIRED TO ABSTAIN FROM ANY FORMAL DECISION BY THE BOARD OF TRUSTEES, AND | |
| MAY BE REQUIRED TO RETIRE FROM ANY DISCUSSION OR DELIBERATION. THE BOARD | |
| OF TRUSTEES, ACTING AS A BODY LED BY THE CHAIR, MAKES THE DETERMINATION OF | |
| WHETHER A CONFLICT EXISTS AND THE PARTICIPATION RESTRICTIONS TO BE IMPOSED. | |
| WHENEVER THERE IS REASON TO BELIEVE THAT A POTENTIAL CONFLICT OF INTEREST | |
| EXISTS BETWEEN THE INTERNET SOCIETY FOUNDATION AND THE CHAIR OF THE BOARD, | |
| THE POTENTIAL CONFLICT SHALL BE REPORTED TO THE BOARD AS A WHOLE. THE | |
| BOARD BY MAJORITY VOTE WILL DETERMINE THE APPROPRIATE RESPONSE. | |
| | |
| FORM 990, PART VI, SECTION C, LINE 19: | |
| ALL INFORMATION IS AVAILABLE ON THE ORGANIZATION'S WEBSITE. | |
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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

• Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

| INTERNET SOCIETY FO | 82-3285688 | | | | | | | |
|---|--|---|---------------------|---------------------------|--|--|--|--|
| Part I Identification of Disregarded Entities. Comple | ete if the organization answered "Yes" o | n Form 990, Part IV, line 33. | | | | | | |
| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity | | | |
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| Identification of Related Tay, Evennt Organizations. Complete if the organization answered "Ves" on Form 900, Part IV, line 34, because it had one or more related tay evennt | | | | | | | | |

organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section | (f) Direct controlling entity | | g) 512(b)(13) rolled tity? |
|--|--------------------------|---|-------------------------------|---------------------------------------|-------------------------------|-----|--|
| | | | | 501(c)(3)) | | Yes | No |
| INTERNET SOCIETY - 54-1650477 | | | | | | | |
| 11710 PLAZA AMERICA DRIVE, SUITE 400 | | | | | | | |
| RESTON, VA 20190 | EDUCATION | DISTRICT OF COLUMBIA | 501(C)(3) | LINE 7 | N/A | | Х |
| PUBLIC INTEREST REGISTRY - 33-1025119 | | | | | | | |
| 1775 WIEHLE AVENUE, SUITE 100 | | | | | | | |
| RESTON, VA 20190 | OPERATOR OF DOMAIN NAMES | PENNSYLVANIA | 501(C)(3) | LINE 12B, II | INTERNET SOCIETY | | Х |
| INTERNET SOCIETY ASIA LIMITED | PROVIDES SUPPORT & | | | | | | |
| 9 TEMASEK BLVD, SUNTEC TOWER TWO #09-01 | VISIBILITY IN THE | | | | | | |
| 038989, SINGAPORE | ASIA-PACIFIC REGION | SINGAPORE | | | INTERNET SOCIETY | | Х |
| CONNECTED GIVING FOUNDATION - 84-3558614 | | | | | | | |
| 11710 PLAZA AMERICA DRIVE, SUITE 400 | TO SUPPORT ACTIVITIES OF | | | | | | |
| RESTON, VA 20190 | INTERNET SOCIETY | PENNSYLVANIA | 501(C)(3) | LINE 12A, I | INTERNET SOCIETY | | Х |

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

Schedule R (Form 990) 2020

Schedule R (Form 990) INTERNET SOCIETY FOUNDATION 82-3285688

Part II Continuation of Identification of Related Tax-Exempt Organizations

| CHIPMBREE HIGHWAY M3 ROAD RESEARCH ON INTERNET'S ZOMBA, MALAWI MPACT ON THE ENVIRONMENT TO TOTE TO THE ENVIRONMENT MEDICIAN ANTIQUIA, COLOMBIA COOPERATION, TECHNOLOGY CTIC DAKAR 3 RUB BERANGER FERAUD DAKAR, SENEGAL BF 368 CONNECTIVITY DASC ROSERTO MOTA P CAPITAL PLUZA PIGO 1 TECHNOLOGY TO IMPROVE FUNDACION CAPITAL FUNDAM BOIL FUNDACION LA VOZ FUBLICA CHEQUEADO AV CORDOBA 5635 3A CIUDAD AUTONOMA DE BUENOS AIRES, AKGENTINA ISOC HAITI SE ROUTE DE CANAPE VERT CHAPTER OF THE INTERNET FORT-AU-PRINCE, HAITI FORT-AU-PRINCE, HAITI FORT-AU-PRINCE, HAITI FORT-AU-PRINCE, HAITI FERNOLOGY DEVELOPMENT TO ENDERSERVED PRACTICAL ACTION THE ROBEINS BUILDING 25 ALBERT STREET RUGBY CHOOLOGY AND THE RESEARCH AND EDUCATION ON NO. 154, ZND C CROSS, DOMLER, ZND STAGE BURGAL STREET STEE 703 LIMPS VORK, NY 10004 AMERICAN Y 10004 APRICAN YOUR HEALTHCARE IN NEW YORK, NY 10004 APRICAN IN DEW YORK, NY 10004 APRICAN YOUR HEALTHCARE IN NEW YORK, NY 10004 APRICAN YOUR WAY WAS ALLERED TO THE MEANT AND AND THE RESEARCH AND ELUCATION ON NEW YORK, NY 10004 APRICAN YOUR HEALTHCARE IN NEW YORK \$01(0)(3) LINE 7 | (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section | (f) Direct controlling entity | cont | g) 512(b)(13) rolled zation? |
|--|--|---------------------------------|---|-------------------------------|---------------------------------------|--------------------------------------|------|---------------------------------------|
| CHIPEMBERE HIGHWAY M3 ROAD RESEARCH ON INTERNET'S ZOMBA, MALAWI (IMPACT ON THE ENVIRONMENT TO 1 TORRE NORTE ALMACENTRO SOCIAL DEVELOPMENT THROUGH COCAFORACION MAKALA ASESORIA INTERNACIONAL TO 1 TORRE NORTE ALMACENTRO SOCIAL DEVELOPMENT THROUGH COCHEATION, TECHNOLOGY COLOMBIA | | | | | 501(c)(3)) | | Yes | No |
| ZOMEA, MALAWI CORPORACION MAKAIA ASESORIA INTERNACIONAL STEENGHEN CAPACITIES FOR MEDELLIAN ANTIOQUIA, COLOMBIA COOPERATION, TECHNOLOGY COCID BEVALOPRENT THROUGH COOPERATION, TECHNOLOGY COLOMBIA COLO | CHOMORA MIKEKA | | | | | | | |
| CORPORACION MAKAIA ASESORIA INTERNACIONAL 701 TORRE MORTE ALMACENTRO SOCIAL DEVELOPMENT THROUGH MEDELLIAN ANTIQUIA, COLOMBIA COOPERATION, TECHNOLOGY CTIC DAKAR 3 RUB BERANGER FERAUD SUPPORTS IT AND MOBILE DAKAR, SENEGAL BY 368 CONNECTIVITY SENEGAL PURDACION CAPITAL PUNDAK PASEO ROBERTO MOTTA P H CAPITAL PLAZA PISO 1 ECUDAD DE PANAMA, PANAMA 0801 ECONOMIC AND FINANCIAL PURDACION LA VOZ PUBLICA CHEQUEADO AV CORDOBA 5635 3A CIUDAD AUTONOMA DE BUENOS AIRES, ARGENTINA ISOC HAITI SISC CHAITI SOC HAITI PARADIOM INITIATIVE FOR INFORMATION PROMOTINO AND PROTECTINO TECHNOLOGY DEVELOPMENT, 374 BORNO WAY YARA, LAGOS, NIGERTA ARRICAN YOUTH AND ROCKTON AND PROTECTINO THE ROBBINS BUILDING 25 ALBERT STREET RUGBY BOOK AND PROTECTING THE ROBBINS BUILDING 25 ALBERT STREET RUGBY THE ROBBINS BUILDING 25 ALBERT STREET RUGBY BOOK AND CROSS, DOMUUR, 2ND STAGE BOOK AND CROSS, DOMUUR, 2ND STAGE BENGALURU KARNATAKA, INDIA MAREP HEALTH AFRICA INC - 13-1867411 NEW YORK, NY 10004 AFRICAN NOW YORK SOLICATION NEW YORK SOLICO SOLOMBIA COLOMBIA SULDMIA SULDMIA SERBGAL SULDMIA SERBGAL PANAMA | CHIPEMBERE HIGHWAY M3 ROAD | RESEARCH ON INTERNET'S | | | | | | |
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| NEW YORK, NY 10004 AFRICA NEW YORK 501(C)(3) LINE 7 | AMREF HEALTH AFRICA INC - 13-1867411 | | | | | | | |
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| BRAC IISA INC - 20-8456741 EDIICATION IINDERSERVED | NEW YORK, NY 10004 | - AFRICA | NEW YORK | 501(C)(3) | LINE 7 | | | х |
| DIGIO ODII INO 20 0100/II PUDONIIION ONDUNOUNIU | BRAC USA INC - 20-8456741 | EDUCATION UNDERSERVED | | | | | | |
| 110 WILLIAM STREET 18TH FLOOR COMMUNITIES TO COMBAT | | ┪ | | | | | | |
| NEW YORK, NY 10038 POVERTY, ILITERACY, NEW YORK 501(C)(3) LINE 7 | | 4 | NEW YORK | 501(C)(3) | LINE 7 | | | х |
| ENVIRONMENTAL LAW INSTITUTE - 52-0901863 | | ,, | | | | | 1 | |
| 1730 M STREET NW STE 700 EDUCATION ON ENVIRONMENTAL | | - EDUCATION ON ENVIRONMENTAL | | | | | | |
| WASHINGTON, DC 20036 LAW DISTRICT OF COLUMBIA 501(C)(3) LINE 7 | | ┪ | DISTRICT OF COLUMBIA | 501(C)(3) | LINE 7 | | | х |

Schedule R (Form 990) INTERNET SOCIETY FOUNDATION 82-3285688

Part II Continuation of Identification of Related Tax-Exempt Organizations

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section | (f) Direct controlling entity | contr | g) 512(b)(13) rolled zation? |
|--|--------------------------------|---|-------------------------------|---------------------------------------|--------------------------------------|-------|--|
| | | | | 501(c)(3)) | | Yes | No |
| HELP NGO - 82-2095809 | | | | | | | |
| 123 N PLAZA CT | PROVIDES DISASTER RESPONSE | | | | | | |
| MOUNT PLEASANT, SC 29464 | | SOUTH CAROLINA | 501(C)(3) | LINE 7 | | | Х |
| HIAS INC - 13-5633307 | PROVIDES HUMANITARIAN AID | | | | | | |
| 1300 SPRING STREET STE 500 | AND ASSISTANCE TO | | | | | | |
| SILVER SPRING, MD 20910 | REFUGREES | MARYLAND | 501(C)(3) | LINE 7 | | | Х |
| ONESKY - 95-4714047 | EARLY CHILDHOOD EDUCATION | | | | | | |
| 2246B SIXTH STREET | AND CARE TO UNDERSERVED | | | | | | |
| BERKELEY, CA 94710 | CHILDREN | CALIFORNIA | 501(C)(3) | LINE 7 | | | х |
| TEACH FOR BANGLADESH - 45-4476715 | EARLY CHILDHOOD EDUCATION | | | | | | |
| 532 WALKER RD | AND CARE TO UNDERSERVED | | | | | | |
| GREAT FALLS, VA 22066 | CHILDREN | VIRGINIA | 501(C)(2) | LINE 7 | | | х |
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Page 2

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

| (a) | (b) | (c) | (d) | (e) | (f) | (g) | 1 | h) | (i) | (j) | (k) | | | | | | | | | | | | | | | |
|--|------------------|--|--------------------|--------------------------|---|---|--------------------------|--------------------|--------------------|--------------------|--------------------|--|--|---|--|---|----------------|-------------------------------------|---------------------------------|----------------------|-------------------------------|-----------------------------------|-----------|--|-----------|------------|
| Name, address, and EIN of related organization | Primary activity | Legal Direct controlling Predominant income Share of total | Direct controlling | Legal Direct controlling | Direct controlling Predominant income Share | Direct controlling Predominant income | Legal Direct controlling | Predominant income | Predominant income | Predominant income | Predominant income | | Predominant income Share of total Share of | Predominant income Share of total Share | | Predominant income Share of total S | Share of total | ominant income Share of total S | ominant income Share of total | Share of total Share | of total Share of end-of-year | (h) Disproportionate allocations? | ortionata | | General (| Percentage |
| | | foreign country) | | sections 512-514) | | assets | Yes | No | K-1 (Form 1065) | Yes No | | | | | | | | | | | | | | | | |
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Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a) | (b) | (c) | (d) | (e) | (f) | (g) | (h) | Sec. | i) ction |
|--|------------------|--|---------------------------|---|-----------------------|-----------------------------------|-------------------------|----------|--|
| Name, address, and EIN of related organization | Primary activity | Legal domicile (state or foreign country) | Direct controlling entity | Type of entity (C corp, S corp, or trust) | Share of total income | Share of end-of-year assets | Percentage ownership | | (i) ction (b)(13) rolled tity? |
| | | Couriery) | | | | | | Yes | No |
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Schedule R (Form 990) 2020

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

| | Part V | Transactions With Related Organizations. | Complete if the organization answered | "Yes" on Form 990, Part IV, line 34, 35b, or 36. |
|--|--------|--|---------------------------------------|--|
|--|--------|--|---------------------------------------|--|

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

| а | Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | | | | 1a | | X |
|-----------|--|-----------|------------------------------|--|------------|--------|------|
| | Gift, grant, or capital contribution to related organization(s) | | | | 1b | Х | |
| С | Gift, grant, or capital contribution from related organization(s) | | | | 1c | Х | |
| | Loans or loan guarantees to or for related organization(s) | | | | 1d | | Х |
| | Loans or loan guarantees by related organization(s) | | | | 1e | | Х |
| | | | | | | | |
| f | Dividends from related organization(s) | | | | 1f | | Х |
| | g Sale of assets to related organization(s) | | | | 1g | | X |
| h | n Purchase of assets from related organization(s) | | | | 1h | | X |
| i | Exchange of assets with related organization(s) | | | | 1i | | X |
| j | Lease of facilities, equipment, or other assets to related organization(s) | | | | 1j | | X |
| | | | | | | | |
| | Lease of facilities, equipment, or other assets from related organization(s) | | | | 1k | | Х |
| | Performance of services or membership or fundraising solicitations for related organization(s) | | | | 11 | | X |
| m | n Performance of services or membership or fundraising solicitations by related organization(s) | | | | 1m | | X |
| n | n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | | 1n | | X |
| 0 | Sharing of paid employees with related organization(s) | | | | 10 | | X |
| | | | | | | | |
| р | Reimbursement paid to related organization(s) for expenses | | | | 1 p | | X |
| q | Reimbursement paid by related organization(s) for expenses | | | | 1q | | Х |
| | | | | | | | |
| r | Other transfer of cash or property to related organization(s) | | | | 1r | | X |
| | Other transfer of cash or property from related organization(s) | | | | 1s | | Х |
| 2 | If the answer to any of the above is "Yes," see the instructions for information on who must con | mplete th | is line, including covered r | elationships and transaction thresholds. | | | |
| | (a) (b) Name of related organization Transactype (a) | ction | (c) Amount involved | (d) Method of determining amount invo | olved | | |
| 4\ | | | | | | | |
| 1) | | | | | | | |
| 2) | | | | | | | |
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| 3) | | | | | | | |
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| 5) | | | | | | | |
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| 6) | | | | | | | |
| 3216 | 63 10-28-20 | | | Schedule F | (Forn | n 990) | 2020 |

Schedule R (Form 990) 2020 INTERNET SOCIETY FOUNDATION 82-3285688 Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| (a) | (b) | (c) | (d) | (e) Are a |) | (f) | (g) | (| h) | (i) | (j) | (k) |
|------------------------|------------------|-------------------|---|-----------------------------|---------------|-------|-------------|--------|-----------------|------------------|----------|---------------|
| Name, address, and EIN | Primary activity | Legal domicile | | Are a partners | ıll s sec. | | Share of | Disp | ropor- nate | | General | or Percentage |
| of entity | , , | (state or foreign | (related, unrelated, | partners 501(c) orgs. |)(3) | total | end-of-year | alloca | nate ations? | amount in box 20 | managi | ownership |
| | | country) | sections 512-514) | Yes I | | | assets | | No | (Form 1065) | Yes N | |
| | | | 300000000000000000000000000000000000000 | 165 1 | NO | | | 165 | INO | (1 01111 1000) | 1es IV | ` |
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Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print INTERNET SOCIETY FOUNDATION 82-3285688 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 11710 PLAZA AMERICA DRIVE, NO. 400 return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. RESTON, VA 20190 Enter the Return Code for the return that this application is for (file a separate application for each return) 1 Application Return **Application** Return Code Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 1041-A Form 990-BL 02 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 SAE PARK, ACTING CFO The books are in the care of > 11710 PLAZA AMERICA DRIVE, NO. 400 - RESTON, VA 20190 Telephone No. ▶ 703-439-2767 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 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2021 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2020 or ___ tax year beginning , and ending Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

instructions