

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2018

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.

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization MOZILLA FOUNDATION		D Employer identification number 20-0097189
	Doing business as		E Telephone number (650) 903-0800
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	331 E. EVELYN AVENUE		G Gross receipts \$ 27,531,742.
	City or town, state or province, country, and ZIP or foreign postal code MOUNTAIN VIEW, CA 94041		
F Name and address of principal officer: MARK SURMAN SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶	

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.MOZILLA.ORG**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **2003** **M** State of legal domicile: **CA**

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: IMPROVE AND PROTECT THE INTERNET AS A PUBLIC RESOURCE OPEN AND ACCESSIBLE TO ALL		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	60
	6 Total number of volunteers (estimate if necessary)	6	10000
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 38	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	9,841,565.	13,991,926.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,193,707.	13,148,125.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	458,546.	390,654.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	92,628.	1,037.
		20,586,446.	27,531,742.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,628,846.	5,440,182.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,243,277.	10,613,138.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	10,670.	4,673.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,415,330.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	9,323,608.	7,218,279.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	24,206,401.	23,276,272.	
19 Revenue less expenses. Subtract line 18 from line 12	-3,619,955.	4,255,470.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	33,419,850.	46,429,229.
	22 Net assets or fund balances. Subtract line 21 from line 20	3,145,473.	2,588,395.
		30,274,377.	43,840,834.

Part II Signature Block

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

Sign Here	Signature of officer	Date			
	MARK SURMAN, EXECUTIVE DIRECTOR Type or print name and title	11/15/19			
Paid Preparer Use Only	Print/Type preparer's name MIKE SCHLECT	Preparer's signature <i>Mike Schlect</i>	Date 11-15-19	Check if self-employed <input type="checkbox"/>	PTIN P00967848
	Firm's name ▶ DELOITTE TAX LLP	Firm's EIN ▶ 86-1065772	Phone no. (415) 783-4000		
Firm's address ▶ 555 MISSION STREET		SAN FRANCISCO, CA 94105			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

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.

		Enter filer's identifying number
Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. MOZILLA FOUNDATION	Employer identification number (EIN) or 20-0097189
	Number, street, and room or suite no. If a P.O. box, see instructions. 331 E. EVELYN AVENUE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MOUNTAIN VIEW, CA 94041	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	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)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

ANGELA PLOHMAN

- The books are in the care of ▶ **331 E. EVELYN AVENUE - MOUNTAIN VIEW, CA 94041**
Telephone No. ▶ **(650)903-0800** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year **2018** or
 ▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 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.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c 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.	3c	\$	0.

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 instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: MOZILLA FOUNDATION IMPROVES AND PROTECTS THE INTERNET AS A PUBLIC RESOURCE BY WORKING WITH THOUSANDS OF VOLUNTEERS TO (1) KEEP THE INTERNET A UNIVERSAL OPEN PLATFORM AND (2) PROMOTE CONTINUED INNOVATION ON THE INTERNET.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 625,650. including grants of \$) (Revenue \$) AGENDA SETTING MOZILLA USES ITS EXPERTISE TO IDENTIFY THREATS TO AND OPPORTUNITIES FOR A HEALTHY INTERNET, AND THEN MAKE THESE ISSUES MAINSTREAM. IN 2018, WE PUBLISHED OUR FIRST-EVER FULL-LENGTH INTERNET HEALTH REPORT, WHICH DETAILS THESE THREATS AND OPPORTUNITIES. THE REPORT USES DATA AND ORIGINAL REPORTING TO ASSESS INTERNET HEALTH ACROSS FIVE CATEGORIES: PRIVACY AND SECURITY, OPENNESS, DECENTRALIZATION, WEB LITERACY, AND DIGITAL INCLUSION. IN 2018, MOZILLA SPENT \$625,650 TO SUPPORT ITS AGENDA-SETTING WORK.

4b (Code:) (Expenses \$ 3,083,020. including grants of \$ 130,750.) (Revenue \$) MOVEMENT BUILDING MOZILLA'S ADVOCACY WORK MOBILIZES TENS OF MILLIONS OF PEOPLE AROUND THE GLOBE TO STAND UP FOR A HEALTHY INTERNET, USING TACTICS LIKE GRASSROOTS ORGANIZING AND PUBLIC EDUCATION CAMPAIGNS. IN 2018, MOZILLA'S ADVOCACY WORK CALLED ON MAJOR COMPANIES LIKE AMAZON, TARGET, AND VENMO TO BETTER PROTECT CONSUMERS' ONLINE PRIVACY AND SECURITY. IN 2018, MOZILLA SPENT \$3,083,020 TO SUPPORT ITS MOVEMENT-BUILDING WORK.

4c (Code:) (Expenses \$ 12,253,306. including grants of \$ 5,309,432.) (Revenue \$ 148,125.) LEADERSHIP DEVELOPMENT MOZILLA PROVIDES SUPPORT TO PEOPLE AND PROJECTS ON THE FRONT LINES OF THE INTERNET HEALTH MOVEMENT. WE PROVIDE THIS SUPPORT THROUGH FELLOWSHIPS TO LIKE-MINDED THINKERS IN THE REALMS OF TECHNOLOGY, POLICY, AND RESEARCH. WE ALSO PROVIDE THIS SUPPORT THROUGH AWARDS TO LIKE-MINDED PROJECTS IN THE REALMS OF DECENTRALIZATION, DIGITAL INCLUSION, OPENNESS, PRIVACY AND SECURITY, AND WEB LITERACY. AND EACH YEAR, MOZILLA CONVENES THE BROADER INTERNET HEALTH MOVEMENT IN LONDON FOR THE MOZILLA FESTIVAL. IN 2018, MOZILLA SPENT \$12,253,306 TO SUPPORT ITS LEADERSHIP-DEVELOPMENT WORK.

4d Other program services (Describe in Schedule O.) (Expenses \$ 2,402,059. including grants of \$) (Revenue \$ 1,037.)

4e Total program service expenses 18,364,035.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>	X	
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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	X	
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
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? <i>If "Yes," complete Schedule J</i>	23 X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 X	
35a 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
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	

Part 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	1a 83	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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 in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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 in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, CT, FL, GA, IL, KS, KY, MA, MD, MI
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) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 ANGELA PLOHMAN - (650)903-0800
331 E. EVELYN AVENUE, MOUNTAIN VIEW, CA 94041

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MITCHELL BAKER, CHAIR PAID ONLY BY RELATED FOR-PROFIT	1.00 40.00	X					0.	2,458,350.	27,399.	
(2) BRIAN BEHLENDORFF DIRECTOR	1.00 0.00	X					0.	0.	0.	
(3) BOB LISBONNE DIRECTOR	1.00 0.00	X					0.	0.	0.	
(4) CATHY DAVIDSON (THRU JULY 2018) DIRECTOR	1.00 0.00	X					0.	0.	0.	
(5) RONALDO LEMOS DIRECTOR	1.00 0.00	X					0.	0.	0.	
(6) HELEN TURVEY DIRECTOR	1.00 0.00	X					0.	0.	0.	
(7) MOHAMED NANABHAY DIRECTOR	1.00 0.00	X					0.	0.	0.	
(8) NICOLE WONG DIRECTOR	1.00 0.00	X					0.	0.	0.	
(9) MARK SURMAN EXECUTIVE DIRECTOR/PRESIDENT	40.00 0.00			X			295,741.	0.	26,512.	
(10) ANGELA PLOHMAN EXECUTIVE VP, SECRETARY, TRESURER	40.00 0.00			X			208,501.	0.	18,310.	
(11) ASHLEY BOYD VP ADVOCACY	40.00 0.00				X		243,020.	0.	65,241.	
(12) JUAN BARAJAS DIRECTOR, PARTNERSHIPS	40.00 0.00					X	165,628.	0.	49,038.	
(13) SARA HAGHDOOSTI DIRECTOR, CAMPAIGNS	40.00 0.00					X	144,682.	0.	64,818.	
(14) JESSE VON DOOM JAMES INT DIRECTOR, DIGITAL	40.00 0.00					X	145,826.	0.	61,947.	
(15) MICHAEL AUKLAND DIRECTOR, HUMAN RESOURCES	40.00 0.00					X	156,016.	0.	47,347.	
(16) MEGHAN MCDERMOTT SENIOR FELLOW	40.00 0.00					X	140,025.	0.	50,203.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total							1,499,439.	2,458,350.	410,815.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							1,499,439.	2,458,350.	410,815.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **43**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
UPWORK 441 LOGUE AVENUE, MOUNTAIN VIEW, CA 94043	CONTRACT SERVICES	553,324.
MOZILLA CORPORATION, 331 EAST EVELYN AVENUE, MOUNTAIN VIEW, CA 94041	SERVICE AGREEMENT	540,426.
KIRTON MCCONKIE, 36 S. STATE STREET #1900, SALT LAKE CITY, UT 84111	CONTRACT SERVICES	180,202.
TATE & TRYON 2021 L STREET NW #400, WASHINGTON, DC 20036	CONTRACT SERVICES	170,782.
UNIVISION COMMUNICATIONS INC PO BOX 740520, LOS ANGELES, CA 90074	CONTRACT SERVICES	150,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **8**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	3,342,673.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	10,649,253.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		13,991,926.				
Program Service Revenue	2 a LICENSING ROYALTIES	Business Code 900099	13,000,000.			13,000,000.	
	b SPONSORSHIPS	900099	100,859.	100,859.			
	c MOZFEST & OTHER EVENTS	900099	29,254.	29,254.			
	d WORKSHOP & TRAINING FEES	900099	18,012.	18,012.			
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		13,148,125.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		390,654.			390,654.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
		c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a OTHER INCOME	900099	1,037.	1,037.				
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		1,037.				
12 Total revenue. See instructions		27,531,742.	149,162.	0.	13,390,654.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	2,982,104.	2,982,104.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	842,134.	842,134.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,615,944.	1,615,944.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,991,100.	1,042,041.	558,156.	390,903.
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	6,490,200.	5,401,565.	664,495.	424,140.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	421,981.	356,203.	38,767.	27,011.
9 Other employee benefits	1,178,324.	931,641.	59,760.	186,923.
10 Payroll taxes	531,533.	453,860.	45,392.	32,281.
11 Fees for services (non-employees):				
a Management	2,642,565.	1,888,662.	629,006.	124,897.
b Legal	395,860.	55,109.	340,751.	
c Accounting	350,847.		350,847.	
d Lobbying	46,235.	46,235.		
e Professional fundraising services. See Part IV, line 17	4,673.			4,673.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	72,192.	21,494.	46,825.	3,873.
14 Information technology	222,465.	192,153.	12,716.	17,596.
15 Royalties				
16 Occupancy	273,483.	217,392.	36,440.	19,651.
17 Travel	1,998,740.	1,542,280.	416,746.	39,714.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	799,619.	621,771.	177,359.	489.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	25,414.	1,881.	23,533.	
23 Insurance	12,770.	729.	12,041.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a COMM. AND MARKETING	321,309.	99,076.	79,054.	143,179.
b FEDERAL/STATE TAX EXP	54,776.	50,000.	4,776.	
c MEMB. DUES AND LICENSES	2,004.	1,761.	243.	
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	23,276,272.	18,364,035.	3,496,907.	1,415,330.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	803,639.	1	1,966,794.
	2 Savings and temporary cash investments	4,492,751.	2	6,754,321.
	3 Pledges and grants receivable, net	1,684,368.	3	1,297,937.
	4 Accounts receivable, net	2,037,353.	4	13,147,955.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	5,256.	9	40,817.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 277,983.		
	b Less: accumulated depreciation	10b 269,249.	30,371.	10c 8,734.
	11 Investments - publicly traded securities	19,310,817.	11	20,505,880.
	12 Investments - other securities. See Part IV, line 11	4,055,285.	12	1,706,781.
	13 Investments - program-related. See Part IV, line 11	1,000,010.	13	1,000,010.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	33,419,850.	16	46,429,229.	
Liabilities	17 Accounts payable and accrued expenses	3,035,473.	17	2,588,395.
	18 Grants payable	110,000.	18	0.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	3,145,473.	26	2,588,395.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	26,345,173.	27	37,070,992.
	28 Temporarily restricted net assets	3,929,204.	28	6,769,842.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	30,274,377.	33	43,840,834.	
34 Total liabilities and net assets/fund balances	33,419,850.	34	46,429,229.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	27,531,742.
2	Total expenses (must equal Part IX, column (A), line 25)	2	23,276,272.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,255,470.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	30,274,377.
5	Net unrealized gains (losses) on investments	5	-1,240,345.
6	Donated services and use of facilities	6	
7	Investment expenses	7	-208,449.
8	Prior period adjustments	8	10,776,749.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-16,968.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	43,840,834.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____
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? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2018)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization MOZILLA FOUNDATION	Employer identification number 20-0097189
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 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: _____
- 5 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).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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.
 - f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	12570258.	12429238.	12455200.	9913657.	13991926.	61360279.
2 Tax revenues levied for the organization'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	12570258.	12429238.	12455200.	9913657.	13991926.	61360279.
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)						16237456.
6 Public support. Subtract line 5 from line 4.						45122823.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	12570258.	12429238.	12455200.	9913657.	13991926.	61360279.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	437,665.	445,798.	353,181.	458,546.	390,654.	2085844.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	45,850.					45,850.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		2,533.	11,891.	92,628.	1,037.	108,089.
11 Total support. Add lines 7 through 10						63600062.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	70.95 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	66.28 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, 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 organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 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 five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section 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).		

Section 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?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section 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).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a 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.		
b Did the activities described in (a) 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.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a 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? Provide details in Part VI .		
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

1 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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule B

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

Department of the Treasury
Internal Revenue Service

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

2018

Name of the organization

MOZILLA FOUNDATION

Employer identification number

20-0097189

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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.

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 ▶ \$ _____

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).

Name of organization MOZILLA FOUNDATION	Employer identification number 20-0097189
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Part 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	_____ _____ _____	\$ <u>1,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>989,540.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>3,316,324.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ <u>1,112,140.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ <u>1,800,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MOZILLA FOUNDATION	Employer identification number 20-0097189
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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
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization MOZILLA FOUNDATION	Employer identification number 20-0097189
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of organization MOZILLA FOUNDATION	Employer identification number 20-0097189
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 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-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2018

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	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 excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
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 excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

Yes No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?	X		47,164.
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		18,892.
j Total. Add lines 1c through 1i			66,056.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "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?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

IN 2018, MOZILLA PROVIDED MATERIAL DISCUSSING COPYRIGHT REFORM IN THE EUROPEAN UNION FOR USE BY ACTIVISTS AND INDEPENDENT GROUPS. IT ALSO PROVIDED MATERIAL AND METHODS FOR ACTIVISTS TO CONTACT MEMBERS OF CONGRESS REGARDING NET NEUTRALITY LEGISLATION IN THE UNITED STATES. IN INDIA, IT DEVELOPED MATERIALS AND METHODS FOR ACTIVISTS TO CONTACT

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

2018

Open to Public Inspection

Name of the organization **MOZILLA FOUNDATION** Employer identification number **20-0097189**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified 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
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Temporarily restricted endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		277,983.	269,249.	8,734.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				8,734.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. 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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. 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
(1)		
(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 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(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 organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE FOUNDATION QUALIFIES AS A PUBLIC BENEFIT CHARITABLE ORGANIZATION EXEMPT FROM INCOME TAXES ON RELATED INCOME UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND APPLICABLE SECTIONS OF THE CALIFORNIA REVENUE AND TAXATION CODE. THE FOUNDATION PROVIDES FOR TAX, IF ANY, ON UNRELATED BUSINESS INCOME.

IN ACCORDANCE WITH THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, NO PORTION OF AN UNCERTAIN TAX POSITION WILL BE RECOGNIZED IF THE POSITION HAS LESS THAN A 50% LIKELIHOOD OF BEING SUSTAINED UPON AUDIT BY THE RELEVANT TAXING AUTHORITY. ALSO, INTEREST EXPENSE, IF ANY, IS RECOGNIZED ON THE FULL AMOUNT OF DEFERRED BENEFITS FOR

**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.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization MOZILLA FOUNDATION	Employer identification number 20-0097189
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EAST ASIA AND THE PACIFIC	0	7	PROGRAM SERVICES	GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, CONSULTANTS	51,550.
SOUTH AMERICA	0	16	PROGRAM SERVICES	GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, CONSULTANTS	138,400.
EUROPE (INCLUDING ICELAND & GREENLAND)	1	249	PROGRAM SERVICES	GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, MANAGEMENT, OPERATIONS, EVENTS,	2,492,067.
NORTH AMERICA (CANADA)	2	184	PROGRAM SERVICES	GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, MANAGEMENT, OPERATIONS, EVENTS,	3,331,478.
SUB-SAHARAN AFRICA	0	29	PROGRAM SERVICES	GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, CONSULTANTS	155,936.
CENTRAL AMERICA/CARIBBEAN	0	19	PROGRAM SERVICES	GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, CONSULTANTS	48,198.
MIDDLE EAST AND NORTH AFRICA	0	9	PROGRAM SERVICES	GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, CONSULTANTS	43,573.
SOUTH ASIA	0	28	PROGRAM SERVICES	GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, CONSULTANTS	83,151.
3 a Subtotal	3	541			6,344,353.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	3	541			6,344,353.

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

Schedule F (Form 990) 2018

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Part II 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	TO RAISE AWARENESS ON THE IMPACTS OF CITY SURVEILLANCE FOR PRIVACY	10,000.		0.		CASH VALUE
		EUROPE (INCLUDING ICELAND & GREENLAND)	TO EDUCATE THE PUBLIC ON THREATS TO PRIVACY AND SECURITY ONLINE	8,750.		0.		CASH VALUE
		EUROPE (INCLUDING ICELAND & GREENLAND)	TO SUPPORT A STUDY ON NET NEUTRALITY ENFORCEMENT IN EUROPE	24,000.		0.		CASH VALUE
		SOUTH AMERICA	SPONSORSHIP OF THE OPEN SCIENCE FORUM AT CILAC 2018	15,000.		0.		CASH VALUE
		EUROPE (INCLUDING ICELAND & GREENLAND)	TO RAISE AWARENESS ABOUT HOW AI IMPLEMENTS AND IMPACTS CENSORSHIP	47,500.		0.		CASH VALUE
		SUB-SAHARAN AFRICA	TO SUPPORT TRAVEL OF AFRICAN PARTICIPANTS TO THE 2018 IFF	10,000.		0.		CASH VALUE
		EUROPE (INCLUDING ICELAND & GREENLAND)	TO SUPPORT THE EUROPEAN DIGITAL RIGHTS COMMUNITY	10,000.		0.		CASH VALUE
		NORTH AMERICA	TO EDUCATE STUDENTS ON OPEN SOURCE AND COMMUNITY DEVELOPMENT	7,800.		0.		CASH VALUE

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 10

3 Enter total number of other organizations or entities 1

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL OPERATING SUPPORT	20,000.		0.		CASH VALUE
		ASIA	GENERAL OPERATING SUPPORT	15,000.		0.		CASH VALUE
		EUROPE (INCLUDING ICELAND & GREENLAND)	TO HELP PRACTITIONERS DEVELOP AN IOT TRUSTMARK	25,000.		0.		CASH VALUE

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIP STIPENDS	NORTH AMERICA	6	188,798.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
FELLOWSHIP STIPENDS	SOUTH AMERICA	4	138,432.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
FELLOWSHIP STIPENDS	EUROPE (INCLUDING ICELAND & GREENLAND)	14	536,254.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
FELLOWSHIP STIPENDS	SUB-SAHARAN AFRICA	3	117,386.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
FELLOWSHIP STIPENDS	SOUTH ASIA	2	58,211.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
FELLOWSHIP STIPENDS	MIDDLE EAST AND NORTH AFRICA	1	36,000.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
FELLOWSHIP STIPENDS	EAST ASIA AND THE PACIFIC	1	27,001.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
CREATIVE MEDIA AND SCIENCE MINI GRANT	EUROPE (INCLUDING ICELAND & GREENLAND)	4	40,000.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
CREATIVE MEDIA AND SCIENCE MINI GRANT	SOUTH AMERICA	2	10,000.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE

Schedule F (Form 990) 2018

Part III Continuation of Grants and Other Assistance to Individuals Outside the United States. (Schedule F (Form 990), Part III)

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CREATIVE MEDIA AND SCIENCE MINI GRANT	EAST ASIA AND THE PACIFIC	1	22,500.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE

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 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 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 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 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 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 No

Schedule F (Form 990) 2018

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:

WE MAINTAIN INFORMATION ON GRANTS, INCLUDING SUPPORTING DOCUMENTATION SUCH AS GRANT PROPOSALS, SIGNED AGREEMENTS, REPORTS FROM GRANTEES, ETC.

FOR FELLOWSHIP GRANTEES, GRANTS ARE MADE PURSUANT TO AGREEMENTS WITH THE FELLOWS AND/OR HOST INSTITUTIONS TO ENSURE THAT THE FELLOWSHIP RECIPIENTS WILL BE PURSUING A DEFINED RESEARCH PROGRAM THAT WILL AID THE DEVELOPMENT OF THE FELLOWSHIP RECIPIENT AS WELL AS ADVANCING RESEARCH IN AREAS MATCHING MOZILLA'S EXEMPT PURPOSES. IN OTHER CASES, WE ENTER INTO APPROPRIATE CONTRACTUAL AGREEMENTS WITH INDIVIDUAL OR CORPORATE GRANTEES REQUIRING THEM TO ACCOMPLISH CHARITABLE WORK OF DIRECT BENEFIT TO THE PUBLIC AND SPECIFICALLY DESCRIBED IN A STATEMENT OF WORK.

FOR GRANTS TO NON-U.S. NON-PROFIT ORGANIZATIONS, WE GENERALLY USE A GRANT AGREEMENT THAT RESTRICTS THE USE OF THE FUNDS TO SPECIFIC CHARITABLE PROJECTS AND INCLUDES REQUIREMENTS FOR RECORDKEEPING AND REPORTING ON THE USE OF FUNDS. IF WE WISH TO PROVIDE GENERAL UNRESTRICTED SUPPORT, WE DO SO ONLY AFTER DETERMINING THAT THE GRANTEE QUALIFIES AS THE EQUIVALENT OF A U.S. SECTION 501(C)(3) ORGANIZATION, TYPICALLY BY RELYING ON THE ADVICE OF A QUALIFIED TAX PRACTITIONER SUCH AS THAT PROVIDED BY NGOSOURCE.ORG. THE GRANT AGREEMENTS WE USE INCLUDE REQUIREMENTS FOR THE GRANTEE TO REPORT ON USE OF THE FUNDS.

PART I, LINE 3, COLUMN (E):

REGION: EUROPE (INCLUDING ICELAND & GREENLAND)

(E) SPECIFIC TYPES OF SERVICES IN REGION: GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, MANAGEMENT, OPERATIONS, EVENTS,

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.

CONSULTANTS, SALARIES

REGION: NORTH AMERICA (CANADA)

(E) SPECIFIC TYPES OF SERVICES IN REGION: GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, MANAGEMENT, OPERATIONS, EVENTS, CONSULTANTS, SALARIES

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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.

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

MOZILLA FOUNDATION

Employer identification number
20-0097189

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (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
ACADIANA CENTER FOR THE ARTS 101 W VERMILION STREET LAFAYETTE, LA 70501	51-0138288	501(C)(3)	24,000.	0.	CASH VALUE		TO USE GIGABIT TECHNOLOGY TO PROVIDE ARTS EDUCATION ACROSS CITIES
ACCESS NOW 34 W 27TH STREET, 6TH FLOOR NEW YORK, NY 10001	27-0597430	501(C)(3)	35,000.	0.	CASH VALUE		SPONSORSHIP OF DIGITAL RIGHTS LEADERSHIP MEETING AT RIGHTSCON
ALLIED MEDIA PROJECT 4126 THIRD STREET DETROIT, MI 48201	01-0559608	501(C)(3)	311,500.	0.	CASH VALUE		SPONSORSHIP OF THE ALLIED MEDIA CONFERENCE AND TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO
BETHEL EDUCATION FOUNDATION 4640 BARGER DRIVE EUGENE, OR 97402	27-0745177	501(C)(3)	20,000.	0.	CASH VALUE		TO PROVIDE STEM EDUCATION TO AT-RISK HIGH SCHOOL STUDENTS
BIG BANG IO LLC 1712 MAIN STREET, SUITE 324 KANSAS CITY, MO 64108	49-5880015	N/A	10,250.	0.	CASH VALUE		TO ALLOW STUDENTS TO BUILD DIGITAL LITERACY WHILE LEARNING HISTORY
BRANGER BRIZ INC 261 NE 1ST STREET, 3RD FLOOR MIAMI, FL 33132	26-3587776	N/A	20,000.	0.	CASH VALUE		TO INCREASE DIGITAL LITERACY THROUGH A FREE ONLINE VIDEO GAME

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **38.**

3 Enter total number of other organizations listed in the line 1 table **10.**

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2018)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(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
BRONX RIVER ADVENTURES 359 13TH STREET, APARTMENT 2F BROOKLYN, NY 11215	09-8729298	N/A	47,500.	0.	CASH VALUE		TO EDUCATE AUDIENCES ON HOW AI CAN SECRETLY COLLECT AND USE DATA
CDM TELECOM CONSULTANTS 220 COPPER AVENUE NW, SUITE 250 ALBUQUERQUE, NM 87102	52-5278077	N/A	10,000.	0.	CASH VALUE		TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED
CDT 1401 K STREET NW, SUITE 200 WASHINGTON, DC 20005	52-1905358	501(C)(3)	5,000.	0.	CASH VALUE		SPONSORSHIP OF CDT TECH PROM
CODE FOR SCIENCE AND SOCIETY INC. 1221 SE 34TH AVENUE PORTLAND, OR 97214	81-3791683	501(C)(3)	5,000.	0.	CASH VALUE		SPONSORSHIP OF THE HANDBOOK HACKATHON EVENT
COMMUNITY INITIATIVE 1000 BROADWAY, SUITE 480 OAKLAND, CA 94607	94-3255070	501(C)(3)	12,500.	0.	CASH VALUE		SPONSORSHIP OF CARPENTRYCON
CREATIVE COMMONS PO BOX 1866 MOUNTAIN VIEW, CA 94042	04-3585301	501(C)(3)	35,000.	0.	CASH VALUE		SPONSORSHIP OF THE GLOBAL SUMMIT AND TO SUPPORT THE BASSEL KHARTABIL FREE CULTURE FELLOWSHIP
CUNY SCHOOL OF PROFESSIONAL STUDIES FOUNDATION - 19 WEST 31ST STREET, 10TH FLOOR - NEW YORK, NY 10001	45-2579691	501(C)(3)	50,000.	0.	CASH VALUE		TO PROVIDE PROFESSIONAL DEVELOPMENT TO HIVE NYC MEMBERS
DIGITAL C 1375 EUCLID AVENUE, 2ND FLOOR CLEVELAND, OH 44115	81-1731053	501(C)(3)	10,000.	0.	CASH VALUE		TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED
EDUCATIONAL SERVICE UNIT NO. 5 900 WEST COURT STREET BEATRICE, NE 68310	47-0498239	170(C)(1)	50,000.	0.	CASH VALUE		TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(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
EUGENE PUBLIC LIBRARY 100 WEST 10TH AVENUE EUGENE, OR 97401	93-0681430	170(C)(1)	15,000.	0.	CASH VALUE		TO PROVIDE FREE TRAINING ON VR AND GAME DEVELOPMENT
GOTENNA INC. 81 WILLOUGHBY STREET, SUITE 302 BROOKLYN, NY 11201	46-2501472	N/A	10,000.	0.	CASH VALUE		TO WIRELESSLY CONNECT COMMUNITIES TO THE INTERNET AFTER A DISASTER
HACKS HACKERS 1300 17TH STREET NORTH, 11TH FLOOR ARLINGTON, VA 22209	45-5351484	501(C)(3)	12,500.	0.	CASH VALUE		TO EDUCATE ON AND COMBAT MISINFORMATION ONLINE
HIGHLAND RESEARCH 1959 HIGHLANDER WAY NEW MARKET, TN 37820	62-0646373	501(C)(3)	430,000.	0.	CASH VALUE		TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED
INTEGRATED ARTS 30893 BLANTON ROAD EUGENE, OR 97405	47-2571430	501(C)(3)	23,500.	0.	CASH VALUE		TO PROVIDE STEM EDUCATION TO UNDERSERVED STUDENTS
ISOC-NY PO BOX 1599, MADISON SQUARE STATION NEW YORK, NY 10159	11-3461318	501(C)(3)	10,000.	0.	CASH VALUE		TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED
KIWI COMPUTE LLC 437 RICHMOND PARK DRIVE MASON, OH 45040	81-4862216	N/A	20,000.	0.	CASH VALUE		TO BUILD A FREE IN-BROWSER PLATFORM FOR STUDENTS TO LEARN PYTHON
LAFAYETTE PARISH SCHOOL BOARD 113 CHAPLIN ROAD LAFAYETTE, LA 70508	72-6000625	170(C)(1)	30,000.	0.	CASH VALUE		TO PROVIDE STEM EDUCATION TO LPSS STUDENTS
LANE ARTS COUNCIL 1590 WILLAMETTE STREET, SUITE 200 EUGENE, OR 97401	93-0681430	501(C)(3)	15,000.	0.	CASH VALUE		TEACH THE ART OF STORYTELLING IN SCHOOLS USING GIGABIT TECHNOLOGY

Schedule I (Form 990)

MOZILLA FOUNDATION

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(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
NEW AMERICA 740 15TH STREET NW, SUITE 900 WASHINGTON, DC 20005	52-2096845	501(C)(3)	50,000.	0.	CASH VALUE		SUPPORT M-LAB'S OPEN SOURCE DATA VISUALIZATION & ANALYSIS TOOLS.
NEW HOPE COMMUNITY DEVELOPMENT OF ACADIANA - PO BOX 53654 - LAFAYETTE, LA 70505	45-5187648	501(C)(3)	14,500.	0.	CASH VALUE		TO PROVIDE STEM EDUCATION TO AT-RISK STUDENTS IN LAFAYETTE, LA
NJ INSTITUTE OF TECHNOLOGY FOUNDATION - 323 MARTIN LUTHER KING JR. BOULEVARD - UNIVERSITY HEIGHTS, NJ 07102	22-1714037	501(C)(3)	10,850.	0.	CASH VALUE		GENERAL OPERATING SUPPORT
OLIVER COADY INC 20 BROADWAY, SUITE 6 VAHALLA, NY 10595	26-3972852	N/A	60,000.	0.	CASH VALUE		TO WIRELESSLY CONNECT COMMUNITIES TO THE INTERNET AFTER A DISASTER
ORGANIZATION FOR HUMAN BRAIN MAPPING - 5841 CEDAR LAKE ROAD, SUITE 204 - MINNEAPOLIS, MN 55416	04-3290623	501(C)(3)	5,000.	0.	CASH VALUE		SPONSORSHIP OF THE 2018 OPEN SCIENCE SIG
PAPER EQUATOR 437 NORTH STREET PITTSFIELD, MA 01201	02-3666946	N/A	310,000.	0.	CASH VALUE		TO WIRELESSLY CONNECT COMMUNITIES TO THE INTERNET AFTER A DISASTER
PARTNERSHIP FOR AFTERSCHOOL EDUCATION - 120 BROADWAY, SUITE 230 - NEW YORK, NY 10271	13-3976066	501(C)(3)	250,000.	0.	CASH VALUE		TO PROVIDE TRAINING AND RESOURCES TO THE HIVE NYC NETWORK
PEACE DEVELOPMENT FUND PO BOX 1280, AMHERST, MA 01002	04-2738794	501(C)(3)	10,750.	0.	CASH VALUE		SPONSORSHIP OF THE 2018 DECOLONIZING THE INTERNET CONFERENCE
RED BANK HIGH SCHOOL 640 MORRISON SPRINGS ROAD CHATTANOOGA, TN 37415	62-6000638	170(C)(1)	14,750.	0.	CASH VALUE		TO ALLOW STUDENTS TO BUILD DIGITAL LITERACY WHILE LEARNING HISTORY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(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
REGENTS OF UNIVERSITY OF COLORADO 2055 REGENT DRIVE, 45 UCB BOULDER, CO 80309	84-6000555	501(C)(3)	10,000.	0.	CASH VALUE		TO WIRELESSLY CONNECT COMMUNITIES TO THE INTERNET AFTER A DISASTER
RHIZOMATICA COMMUNICATIONS 241 SOUTHW 6TH STREET, #605 PHILADELPHIA, PA 19106	82-2312281	501(C)(3)	440,000.	0.	CASH VALUE		TO WIRELESSLY CONNECT COMMUNITIES TO THE INTERNET AFTER A DISASTER
SAN ANTONIO HOUSING AUTHORITY 818 S FLORES SAN ANTONIA, TX 78204	74-6002108	170(C)(1)	110,000.	0.	CASH VALUE		TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED
SOFTWARE FREEDOM CONSERVANCY 137 MONTAGUE STREET, SUITE 380 BROOKLYN, NY 11201	41-2203632	501(C)(3)	10,000.	0.	CASH VALUE		GENERAL OPERATING SUPPORT
SUDO MESH 1721 BROADWAY, SUITE 201 OAKLAND, CA 94612	46-4226376	501(C)(3)	10,000.	0.	CASH VALUE		TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED
THE CHICAGO COMMUNITY TRUST 225 NORTH MICHIGAN AVENUE # 220 CHICAGO, IL 60601	36-3432023	501(C)(3)	150,000.	0.	CASH VALUE		TO SUPPORT DIGITAL EQUITY THROUGH THE CHICAGO LEARNING EXCHANGE
THE ENTERPRISE CENTER 1100 MARKET STREET, SUITE 500 CHATTANOOGA, TN 37402	20-0062024	501(C)(3)	70,000.	0.	CASH VALUE		TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED AND TO PROVIDE STEM EDUCATION
THE KNOWLEDGE HOUSE 1231 LAFAYETTE AVENUE BRONX, NY 10474	47-2747713	501(C)(3)	5,950.	0.	CASH VALUE		TO PROVIDE DIGITAL SKILLS TO YOUNG PEOPLE IN NYC
THRONELESS LLC PO BOX 21113 WASHINGTON, DC 20009	47-5643760	N/A	10,000.	0.	CASH VALUE		TO WIRELESSLY CONNECT COMMUNITIES TO THE INTERNET AFTER A DISASTER

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(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
TREADWELL VENTURES LLC 832236 NORTH 6TH STREET CREWELL, OR 97426	25-4068216	N/A	16,500.	0.	CASH VALUE		TO TRAIN TEACHERS ON IMPLICIT BIAS USING VR
TRIBECA FILM INSTITUTE 32 AVENUE OF THE AMERICAS, 27TH FLR NEW YORK, NY 10013	80-0006057	501(C)(3)	20,000.	0.	CASH VALUE		TO CREATE EQUITABLE DIGITAL MEDIA LEARNING OPPORTUNITIES FOR YOUTH
UNIVERSITY OF LOUISIANA AT LAFAYETTE - SUITE 307, PG MOUTON HALL, PO BOX 42570 - LAFAYETTE, LA 70504	72-6000820	170(C)(1)	24,104.	0.	CASH VALUE		TO USE VR TECHNOLOGY AS A TEACHING TOOL
UNIVERSITY OF WASHINGTON, CSE 185 STEVENS WAY NE, AC101 SEATTLE, WA 98195	91-6001537	115 (1)	140,000.	0.	CASH VALUE		TO WIRELESSLY CONNECT COMMUNITIES TO THE INTERNET AFTER A DISASTER
WEB DUBOIS LEARNING 4510 EAST LINWOOD BOULEVARD KANSAS CITY, MO 64128	43-1225401	501(C)(3)	10,000.	0.	CASH VALUE		TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED
YOUTH LITERACY FOUNDATION OF ACADIANA - 601 LOIRE AVENUE, SUITE G - LAFAYETTE, LA 70507	47-5439940	501(C)(3)	11,500.	0.	CASH VALUE		TO EXPAND DIGITAL LITERACY IN UNDERSERVED COMMUNITIES

Schedule I (Form 990)

MOZILLA FOUNDATION

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(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
CHARITABLE PROJECT SUPPORT	7	85,000.	0.	CASH VALUE	
FELLOWSHIP STIPENDS	21	756,389.	0.	CASH VALUE	

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

MOZILLA FOUNDATION MAINTAINS INFORMATION ON GRANTS, INCLUDING SUPPORTING DOCUMENTATION SUCH AS GRANT PROPOSALS, SIGNED AGREEMENTS, REPORTS FROM GRANTEEES, ETC. FOR FELLOWSHIP GRANTEEES, GRANTS ARE MADE PURSUANT TO AGREEMENTS WITH THE FELLOWS AND/OR HOST INSTITUTIONS TO ENSURE THAT THE FELLOWSHIP RECIPIENTS WILL BE PURSUING A DEFINED RESEARCH PROGRAM THAT WILL AID THE DEVELOPMENT OF THE FELLOWSHIP RECIPIENT AS WELL AS ADVANCING RESEARCH IN AREAS MATCHING MOZILLA FOUNDATION'S EXEMPT PURPOSES. ALTHOUGH MOST OF OUR OTHER GRANTS ARE TO IRS-RECOGNIZED 501(C)(3) ORGANIZATIONS, WE

Part IV Supplemental Information

SOMETIMES MAKE GRANTS TO OTHER ENTITIES AND INDIVIDUALS TO ACCOMPLISH SPECIFIC WORK IN FURTHERANCE OF MOZILLA FOUNDATION'S PURPOSES. IN THOSE CASES, WE ENTER INTO APPROPRIATE CONTRACTUAL AGREEMENTS REQUIRING THE GRANTEE TO ACCOMPLISH CHARITABLE WORK OF DIRECT BENEFIT TO THE PUBLIC AND SPECIFICALLY DESCRIBED IN THE STATEMENT OF WORK. THESE AGREEMENTS REQUIRE THE GRANTEE TO REPORT ON THEIR USE OF FUNDS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ALLIED MEDIA PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: SPONSORSHIP OF THE ALLIED MEDIA CONFERENCE AND TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED

NAME OF ORGANIZATION OR GOVERNMENT: THE ENTERPRISE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE QUALITY WIRELESS CONNECTIVITY TO COMMUNITIES IN NEED AND TO PROVIDE STEM EDUCATION IN CHATTANOOGA, TN AND LAFAYETTE, LA

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2018

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

MOZILLA FOUNDATION

Employer identification number

20-0097189

Part I Questions Regarding Compensation

1a 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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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 compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- 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 compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2018

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-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MITCHELL BAKER, CHAIR	0.	0.	0.	0.	0.	0.	0.
PAID ONLY BY RELATED FOR-PROFIT	450,000.	2,008,350.	0.	24,500.	2,899.	2,485,749.	0.
(2) MARK SURMAN	295,741.	0.	0.	21,783.	4,729.	322,253.	0.
EXECUTIVE DIRECTOR/PRESIDENT	0.	0.	0.	0.	0.	0.	0.
(3) ANGELA FLOHMAN	208,501.	0.	0.	15,211.	3,099.	226,811.	0.
EXECUTIVE VP, SECRETARY, TRESURER	0.	0.	0.	0.	0.	0.	0.
(4) ASHLEY BOYD	243,020.	0.	0.	36,391.	28,850.	308,261.	0.
VP ADVOCACY	0.	0.	0.	0.	0.	0.	0.
(5) JUAN BARAJAS	165,628.	0.	0.	30,833.	18,205.	214,666.	0.
DIRECTOR, PARTNERSHIPS	0.	0.	0.	0.	0.	0.	0.
(6) SARA HAGHDOOSTI	144,682.	0.	0.	29,430.	35,388.	209,500.	0.
DIRECTOR, CAMPAIGNS	0.	0.	0.	0.	0.	0.	0.
(7) JESSE VON DOOM JAMES	145,826.	0.	0.	9,780.	52,167.	207,773.	0.
INT DIRECTOR, DIGITAL	0.	0.	0.	0.	0.	0.	0.
(8) MICHAEL AUKLAND	156,016.	0.	0.	10,472.	36,875.	203,363.	0.
DIRECTOR, HUMAN RESOURCES	0.	0.	0.	0.	0.	0.	0.
(9) MEGHAN MCDERMOTT	140,025.	0.	0.	9,500.	40,703.	190,228.	0.
SENIOR FELLOW	0.	0.	0.	0.	0.	0.	0.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

MOZILLA FOUNDATION

Employer identification number

20-0097189

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CORAL AND OTHER PROJECTS

AS A LEGACY OF PROGRAMS STARTED PRIOR TO 2018, MOZILLA CONTINUES TO
PROVIDE SUPPORT TO A SET OF COMMUNITIES DEVELOPING OPEN-SOURCE SOFTWARE
TO ADDRESS KEY INTERNET HEALTH ISSUES. THE PRIMARY ACTIVITIES IN THIS
AREA DURING 2018 WERE SUPPORT FOR THE THUNDERBIRD PROJECT, A COMMUNITY
WORKING ON OPEN SOURCE EMAIL, AND THE CORAL PROJECT, A COMMUNITY OF
DEVELOPERS CREATING TOOLS FOR MORE CIVIC ONLINE DIALOGUE.

EXPENSES \$ 2,402,059. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,037.

FORM 990, PART V, LINE 7

THE ORGANIZATION RECEIVED SEVERAL PAYMENTS FROM SPONSORS IN RETURN FOR
RECOGNITION AT, AND IN SOME CASES ADMISSION TO, ITS EVENTS. TO THE
BEST OF ITS KNOWLEDGE, THESE PAYMENTS WERE DEDUCTIBLE AS ORDINARY AND
NECESSARY BUSINESS EXPENSES RATHER THAN AS CHARITABLE CONTRIBUTIONS,
AND NO GOOD FAITH ESTIMATE OF THE VALUE OF THESE BENEFITS WAS PROVIDED
TO SUCH SPONSORS.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

CANADA, FRANCE, UNITED KINGDOM, DENMARK,
FINLAND, GERMANY, BELGIUM, SPAIN,
AUSTRALIA, TAIWAN, JAPAN

FORM 990, PART VI, SECTION A, LINE 4:

THE BYLAWS WERE AMENDED TO REFLECT THE ORGANIZATION'S EXISTING PRACTICE OF
TREATING ALL DIRECTORS OF THE ORGANIZATION, INCLUDING THE CHAIR, AS

Name of the organization MOZILLA FOUNDATION	Employer identification number 20-0097189
--	--

INDEPENDENT FIDUCIARIES AND NOT AS EMPLOYEES OR OFFICERS OF THE ORGANIZATION.

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

THE AUDIT COMMITTEE PERIODICALLY MEETS IN EXECUTIVE SESSION. ALTHOUGH SEPARATE MEETING MINUTES ARE NOT KEPT, IT REPORTS BACK TO THE FULL BOARD WHERE MEETING MINUTES ARE KEPT.

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

SEVERAL INDIVIDUALS ASSOCIATED WITH THE ORGANIZATION DILIGENTLY GATHER AND PREPARE ALL DATA AND NARRATIVE EXPLANATIONS TO ACCURATELY COMPLETE IRS FORM 990. DRAFTS OF THE FORM 990 ARE REVIEWED AND EDITED BY MANAGEMENT, OFFICERS AND ITS OUTSIDE COUNSEL AND ACCOUNTANTS. ALL DIRECTORS RECEIVE A FINAL COPY OF THE 990 PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE FOUNDATION ANNUALLY ASKS BOARD MEMBERS AND KEY EMPLOYEES TO RESPOND TO A QUESTIONNAIRE DETAILING POTENTIAL CONFLICTS OF INTEREST. INDIVIDUALS ARE TO REPORT ANY POTENTIAL CONFLICTS WITH RESPECT TO PARTICULAR DECISIONS AS THEY ARISE, AND IF THE BOARD DETERMINES THAT A CONFLICT EXISTS, THE CONFLICTED INDIVIDUAL DOES NOT PARTICIPATE IN VOTING ON THAT DECISION (AND IN SOME CASES THE FOUNDATION MAY NOT PURSUE THE TRANSACTION AT ALL). WHILE THE FOUNDATION HAS NOT ENGAGED IN ADDITIONAL MONITORING OR ENFORCEMENT BEYOND THIS, IT BELIEVES ITS EXISTING MECHANISMS HAVE BEEN ADEQUATE TO PROTECT AGAINST CONFLICTS OF INTEREST AFFECTING THE BOARD'S DECISION MAKING.

FORM 990, PART VI, SECTION B, LINE 15A:

Name of the organization MOZILLA FOUNDATION	Employer identification number 20-0097189
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THE BOARD OF DIRECTORS DETERMINED THE EXECUTIVE DIRECTOR'S COMPENSATION AFTER TAKING INTO ACCOUNT ASSESSMENTS OF HIS INDIVIDUAL PERFORMANCE AND THAT OF THE ORGANIZATION AS A WHOLE, ALONG WITH MARKET DATA ABOUT EXECUTIVE COMPENSATION AT SIMILAR ORGANIZATIONS DRAWN FROM BOTH GENERAL SURVEYS AND THE FORMS 990 FOR A SET OF PEER INSTITUTIONS. THE EXECUTIVE DIRECTOR AND INTERESTED PARTIES WERE ABSENT FROM THE FINAL BOARD DISCUSSION, AND THE DETERMINATION WAS ULTIMATELY APPROVED BY A QUORUM OF THE BOARD OF DIRECTORS NOT INCLUDING ANYONE WITH A CONFLICT OF INTEREST REGARDING THE COMPENSATION PACKAGE. THE PROCESS AND THE DATA ON WHICH THE DECISION WAS MADE IS DOCUMENTED IN THE MINUTES OF THE ORGANIZATION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, CT, FL, GA, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NY, OR, PA, RI, SC, TN, UT, VA
WI, WV, ND, OH

FORM 990, PART VI, SECTION C, LINE 19:

THE FORMS 990, 990-T, AND THE FORM 1023 IN THEIR ORIGINAL FORM ARE AVAILABLE UPON REQUEST. WE ALSO MAKE THESE FORMS AVAILABLE ONLINE, ALONG WITH OUR FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS, EXCEPT THAT TO PROTECT INDIVIDUAL PRIVACY SOME PERSONAL ADDRESS INFORMATION IS REDACTED FROM THE VERSION MADE AVAILABLE ONLINE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

FOREIGN EXCHANGE GAIN/(LOSS) -16,968.

FORM 990, PART XI, LINE 8

THE PRIOR PERIOD ADJUSTMENT SHOWN HERE IS A SECTION 481(A) ADJUSTMENT OF \$10,795,940 THAT CONSTITUTES AN INCREASE TO INCOME THAT WAS REPORTED

Name of the organization MOZILLA FOUNDATION	Employer identification number 20-0097189
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AS A PRIOR YEAR ADJUSTMENT IN THE ORGANIZATION'S FINANCIAL STATEMENTS. THE SECTION 481(A) ADJUSTMENT IS EQUAL TO THE ACCRUED BUT UNPAID ROYALTIES AS OF 12/31/17, WHICH WOULD HAVE BEEN REPORTED WHEN ACTUALLY PAID THIS YEAR UNDER THE ORGANIZATION'S PREVIOUS METHOD OF ACCOUNTING FOR ROYALTIES. THE ORGANIZATION HAS SHIFTED TO REPORT ROYALTIES IN THE YEAR OF ACCRUAL, IN ACCORDANCE WITH ITS FINANCIAL STATEMENTS AND SECTION 451(B) OF THE CODE, AND HAS FILED FORM 3115 WITH THE IRS IN CONNECTION WITH THIS CHANGE.

TANGIBLE PROPERTY REGULATIONS:

SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION :

TAXPAYER IS MAKING THE DE MINIMIS SAFE HARBOR ELECTION UNDER TREAS. REG. 1.263(A)-1(F) FOR ALL ELIGIBLE AMOUNTS PAID OR INCURRED DURING THE TAXABLE YEAR.

SECTION 1.263(A)-3(N) CAPITALIZATION ELECTION :

TAXPAYER HEREBY ELECTS TO CAPITALIZE REPAIR AND MAINTENANCE COSTS UNDER TREAS. REG. 1.263(A)-3(N). THE COSTS WERE INCURRED DURING THE TAXABLE YEAR IN THE ELECTING TAXPAYER'S TRADE OR BUSINESS AND THE ELECTING TAXPAYER TREATS SUCH COSTS AS CAPITAL EXPENDITURES ON ITS BOOKS AND RECORDS.

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.

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

2018

Open to Public
Inspection

Name of the organization

MOZILLA FOUNDATION

Employer identification number
20-0097189

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on 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

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt 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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

Schedule R (Form 990) 2018

Part III 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
							Yes	No			

Part IV 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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
MOZILLA CORPORATION - 20-3226186 331 EAST EVELYN AVENUE MOUNTAIN VIEW, CA 94041	INTERNET SERVICES	CA	MOZILLA FOUNDATION	C CORP	443,117,000.	480,697,000.	100%	X	

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

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

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?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	X	
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses	X	
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) MOZILLA CORPORATION	A	13,000,000.	TRADEMARK LICENSE AGREEMENT
(2) MOZILLA CORPORATION	M	383,429.	SERVICE AGREEMENT
(3) MOZILLA CORPORATION	N	246,600.	SERVICE AGREEMENT
(4) MOZILLA CORPORATION	P	173,254.	CASH VALUE
(5)			
(6)			

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

SCHEDULE R, PART V, LINE 1

THE FOUNDATION LICENSES CERTAIN TRADEMARKS TO ITS WHOLLY-OWNED
SUBSIDIARY, MOZILLA CORPORATION, IN RETURN FOR A LICENSE FEE. THE
AMOUNT ACTUALLY ACCRUED BY THE FOUNDATION IS REPORTED ON PART V LINE
2(1).

THE FOUNDATION ALSO HAS AN ADMINISTRATIVE SERVICES AGREEMENT UNDER
WHICH MOZILLA CORPORATION PROVIDES LEGAL AND CERTAIN OTHER SERVICES, AS
WELL AS ALLOWING IT TO USE SPACE IN MOZILLA CORPORATION'S OFFICES. ITS
PAYMENT FOR SERVICES IS REPORTED ON PART V LINE 2, AND THE COMPONENT OF
THE PAYMENT FOR OFFICE SPACE IS REPORTED ON LINE 3.