** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

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

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

A	For ti	ne 2017 calendar year, or tax year beginning and end	dina		3211	Participation (Contraction)
			unig	ъ =	1	
D (Check I applica	O Name of organization		D Emp	noyer identifi	cation number
	Add	ess MORTELA HOUNDANTON				
<u> </u>	Char Nam Char	MOZILLA FOUNDATION				
L	char					097189
<u></u>	retur	 Number and street (or P.O. box if mail is not delivered to street address) 	om/suite	E Telep	phone numbe	
L	□Fina retur	331 E. EVELYN AVENUE			(650) 903-0800
	term			G Gross	receipts \$	20,586,446.
	Ame	MOUNTAIN VIEW, CA 94041		H(a) is t	this a group r	eturn
	App	F Name and address of principal officer: MARK SURMAN		for	subordinates	? Yes X No
	pend	SAME AS C ABOVE		H(b) Are	all subordinates is	ncluded? Yes No
1	Tax-e	cempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or [527	lf *	No." attach a	list. (see instructions)
		ite: ► WWW.MOZILLA.ORG			oup exemptio	
K f	orm o	of organization: X Corporation Trust Association Other	I Year o			A State of legal domicile: CA
	art I		1 = 100,10	, Torringer	211	or Clate or logar destriction. G-14
·	1	Briefly describe the organization's mission or most significant activities: IMPROV	E ANI	PRC	ייי פייים אין	HE INTERNET
9	i .	AS A PUBLIC RESOURCE OPEN AND ACCESSIBLE TO			JIHOI II	111 11111111111
Activities & Governance	2	Check this box I if the organization discontinued its operations or disposed		~~~~~	C = 6 th = +	
Ę.					1	
õ	3	Number of voting members of the governing body (Part VI, line 1a)				8
৵	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	6
es	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)			5	65
7	6	Total number of volunteers (estimate if necessary)			6	10000
5	7 a	Total unrelated business revenue from Part VIII, column (C), line 12				0.
_	b	Net unrelated business taxable income from Form 990-T, line 34	*************		7b	0.
				Prior	Year	Current Year
d)	8	Contributions and grants (Part VIII, line 1h)	:	12,45	55,200.	9,841,565.
Ž	9	Program service revenue (Part VIII, line 2g)		8,49	3,431.	10,193,707.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		35	3,181.	458,546.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4	4,589.	92,628.
	12	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)			6,401.	20,586,446.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			3,818.	3,628,846.
	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)		9.87	9,890.	11,243,277.
Ses		Professional fundraising fees (Part IX, column (A), line 11e)	···		2,000.	10,670.
Expenses		Total fundraising expenses (Part IX, column (D), line 25) 1,166,347				
Ä		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		9 04	7.489.	9,323,608.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			3,197.	24,206,401.
	19				3,204.	
- 2	เข	Revenue less expenses. Subtract line 18 from line 12				-3,619,955.
Assets or Balances		Total access (Doct V. Page 40)			Current Year	End of Year
SSe		Total assets (Part X, line 16)			5,899.	33,419,850.
₽ Egg	21	Total liabilities (Part X, line 26)			4,162.	3,145,473.
즲	rt II	Net assets or fund balances. Subtract line 21 from line 20		1,90	1,737.	30,274,377.
		Signature Block				
		alties of perjury, I declare that I have examined this return, including accompanying schedules and				knowledge and belief, it is
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which p	preparer h	as any kno	owledge.	
		0: 4.1/1/0:1/4			Date Date	115/18
Sign	1	Signature of Officer		ι	Jate	, ,
Here	2	MARK SÜRMAN, EXECUTIVE DIRECTOR				
		Type or print name and title				
		Print/Type preparer's name Preparer's signature	Da	ite	Check	PTIN
Paid		MIKE SCHLECT Mike Sullet	11	1-14-18	seif-employe	P00967848
Prep	arer	Firm's name ▶ DELOITTE TAX LLP	F	irm's EIN ▶	86-1065772	
Use I	Only	Firm's address 555 MISSION STREET		7		
		SAN FRANCISCO, CA 94105		l F	Phone no. (4 1	5) 783-4000
May	the II	RS discuss this return with the preparer shown above? (see instructions)				X Yes No
73200	1 11-2			-		Form 990 (2017)

Form **8868**

(Rev. January 2017)

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.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

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 th	nis form, visit www.irs.gov/efile, click on Charities & Non-	Profits, an	d click on <i>e-file</i> for <i>Charities and Noi</i>	n-Profits.					
Automa	atic 6-Month Extension of Time. Only subm	nit origina	al (no copies needed).						
All corpo	rations required to file an income tax return other than Fo	orm 990-T	(including 1120 C filers), partnership	s, REMICs	s, and trusts				
must use	Form 7004 to request an extension of time to file incom-	e tax retur	ns.						
				Enter file	er's identifying num	her			
Type or	Name of exempt organization or other filer, see instru-	ctions			identification numb				
print	I make or ones, pronganization or other most, occurrence								
	MOZILLA FOUNDATION				20-009718	.9			
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, so 331 E. EVELYN AVENUE	Social se	curity number (SSN)					
return. See instructions.	City, town or post office, state, and ZIP code. For a fo								
ii isa ucaons.	MOUNTAIN VIEW, CA 94041	reign addi	ress, see instructions.						
Enter the	Return Code for the return that this application is for (file	e a separat	te application for each return)			0 1			
Applicati	on	Return	Application			Return			
Is For		Code	Is For			Code			
	or Form 990-EZ	01	Form 990-T (corporation)			07			
Form 990	I-BL	02	Form 1041-A			08			
Form 472	0 (individual)	03	Form 4720 (other than individual)	Form 4720 (other than individual)					
Form 990	-PF	04	Form 5227			10			
Form 990	I-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
Form 990	I-T (trust other than above)	06	Form 8870			12			
	ANGELA PLOHMAN								
		VENUE	E - MOUNTAIN VIEW,	CA 94	041				
	none No. (650)903-0800		Fax No.						
	organization does not have an office or place of business								
	is for a Group Return, enter the organization's four digit (
box 🕨	If it is for part of the group, check this box	_	ich a list with the names and EINs of MBER $15,2018$, to file						
	quest an automatic 6-month extension of time until			tne exem	npt organization retu	.m			
101	the organization named above. The extension is for the o	organizatio	on's return for.						
▶	X calendar year 2017 or								
	tax year beginning	. an	d ending						
2 If th	ne tax year entered in line 1 is for less than 12 months, cl			Final retur	· n				
	Change in accounting period								
3a If th	nis application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any						
nor	nrefundable credits. See instructions.	3a	\$	0.					
b If th	nis application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and						
<u>est</u>	imated tax payments made. Include any prior year overp	ayment all	owed as a credit.	3b	\$	0.			
c Ba	ance due. Subtract line 3b from line 3a. Include your pa	yment witl	h this form, if required,						
by	using EFTPS (Electronic Federal Tax Payment System). S	See instruc	ctions.	3с	\$	0.			
Caution: instruction	If you are going to make an electronic funds withdrawal ns.	(direct deb	oit) with this Form 8868, see Form 84	153-EO an	d Form 8879-EO for	payment			

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

Form 8868 (Rev. 1-2017)

723841 04-01-17

17020508 149058 MOZILLA

Form	m 990 (2017) MOZILLA FOUNDATION 20-0097189	Page 2
Pa	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	Х
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	77
		s X No
_	If "Yes," describe these new services on Schedule O.	₩
3	3 3 7 1 3	s 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 expense Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses,	
	revenue, if any, for each program service reported.	anu
4a	066 365	0.)
Tu	AGENDA SETTING	
	MOZILLA DEPLOYS ITS EXPERTISE TO IDENTIFY THREATS TO AND OPPORTUNIT	IES
	FOR A HEALTHY INTERNET. WE CURRENTLY ASSESS INTERNET HEALTH ACROSS	
	CATEGORIES: PRIVACY AND SECURITY; OPEN INNOVATION; DECENTRALIZATION	
	WEB LITERACY; AND DIGITAL INCLUSION. MOZILLA THEN WORKS TO MAKE	
	INTERNET HEALTH ISSUES PART OF MAINSTREAM, PUBLIC DISCOURSE. MOZILL	A
	PUBLISHES AN ANNUAL INTERNET HEALTH REPORT, AN OPEN-SOURCE DOCUMENT	
	THAT EXPLORES THESE ISSUES. IN 2017, MOZILLA SPENT \$ 966,365 TO SUP	PORT
	ITS AGENDA-SETTING WORK.	
	2 722 016 102 450	0 .
4b	(Code:) (Expenses \$ 2,733,016. including grants of \$ 182,458.) (Revenue \$ MOVEMENT BUILDING	<u> </u>
	MOZILLA'S ORGANIZING TEAM MOBILIZES MILLIONS OF PEOPLE TO STAND UP	FOR
	A HEALTHY INTERNET. IT RAISES AWARENESS, INSPIRES ACTION AND RUNS L	
	SCALE PUBLIC EDUCATION CAMPAIGNS AROUND TOPICS LIKE ONLINE PRIVACY	
	DIGITAL INCLUSION. IN 2017, MOZILLA'S ONLINE MOBILIZATION WORK INCL	
	PUBLIC EDUCATION AND ADVOCACY CAMPAIGNS AROUND DATA PROTECTION, THE	
	SECURITY OF CONNECTED PRODUCTS, COPYRIGHT AND NET NEUTRALITY. THESE	-
	CAMPAIGNS REACHED MILLIONS OF PEOPLE IN DOZENS OF COUNTRIES. IN 201	7,
	MOZILLA SPENT \$2,733,016 TO SUPPORT ITS MOVEMENT BUILDING WORK.	
	10.050.001	0.70
4c	·	<u>,878.</u>)
	LEADERSHIP DEVELOPMENT	
	MOZILLA PROVIDES SUPPORT AND A GATHERING PLACE FOR A BROAD GLOBAL COMMUNITY WORKING ON INTERNET HEALTH. THIS INCLUDES A SET OF PROJEC	mc .
	TO IDENTIFY, CONNECT AND SUPPORT LEADERS FROM DIVERSE FIELDS LIKE	10
	TECHNOLOGY, SCIENCE, EDUCATION AND INTERNET POLICY. MOZILLA CARRIE	g
	OUT THIS WORK THROUGH FELLOWSHIPS AND OPEN LEADERSHIP TRAINING	
	PROGRAMS. WE ALSO CARRY OUT THIS WORK THROUGH GRANT PROGRAMS LIKE T	HE
	MOZILLA GIGABIT COMMUNITY FUND, WHICH SUPPORTS COMMUNITY INNOVATORS	
	AND EVENTS LIKE THE MOZILLA FESTIVAL, WHICH GATHERS 2,500 LIKE-MIND	
	INTERNET HEALTH ADVOCATES ANNUALLY. IN 2017, MOZILLA SPENT \$ 13,256	
	TO SUPPORT THE MOZILLA LEADERSHIP PROGRAM.	
4d	Other program services (Describe in Schedule O.)	_
	(Expenses \$ 1,733,242. including grants of \$ 15,649.) (Revenue \$ 6,750.)	
4e	Total program service expenses ► 19,285,447.	

Form **990** (2017)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			١
	public office? If "Yes," complete Schedule C, Part I	3		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? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			.,
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			٦,
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			٠.,
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а			3,7	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		37	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	١		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	l		Х
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е,	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_^
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			x
	Schedule D, Parts XI and XII	12a		
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	401	х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a	Х	Δ
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	148		
ь	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		14b	х	
15	or more? If "Yes," complete Schedule F, Parts I and IV	140	- 21	
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13	- 21	
10		16	х	
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
"		17		x
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''		
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	"		
.5	complete Schedule G. Part III	19		x
	complete Concadio G. Fait III			

Form **990** (2017)

	·		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			İ
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			İ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			İ
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			İ
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			İ
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			İ
	any tax-exempt bonds?	24c		
	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			İ
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			İ
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			İ
	Schedule L, Part 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			İ
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			٠,,
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			İ
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			1,7
	of any of these persons? If "Yes," complete Schedule L, Part III	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):			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		├^
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		х
00	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30		30		x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		<u> </u>
31		31		x
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete	-		
02		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
•	Part V, line 1	34	х	İ
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)? If "Yes," complete Schedule R, Part V, line 2	35b	х	ĺ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2017)

732004 11-28-17

Form 990 (2017) MOZILLA FOUNDATION | 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			X					
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 37								
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0								
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?	1c	Х						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 65								
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х						
b	b If "Yes," enter the name of the foreign country: ▶ SEE SCHEDULE O								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
	Organizations that may receive deductible contributions under section 170(c).	7a		Х					
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			х					
	to file Form 8282?	7c							
	If "Yes," indicate the number of Forms 8282 filed during the year	7e		Х					
		7f		X					
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/						
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	N/						
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A	711	-1/						
	sponsoring organization have excess business holdings at any time during the year?	8							
	Sponsoring organizations maintaining donor advised funds.								
	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a							
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b							
	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders N/A 11a								
	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
	Section 501(c)(29) qualified nonprofit health insurance issuers.								
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a							
	Note. See the instructions for additional information the organization must report on Schedule O.								
	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
	Enter the amount of reserves on hand 13c			37					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b	990	(0047					

732005 11-28-17

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, X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 8 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 6 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 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? Х Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Х 5 Х Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b Х Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х 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.) Yes No 10a **10a** Did the organization have local chapters, branches, or affiliates? Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? Х 13 Did the organization have a written document retention and destruction policy? Х 14 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? The organization's CEO, Executive Director, or top management official 15a Х Х **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х 16a b If "Yes." did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 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 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 Other (explain in Schedule O) Another's website X Upon request 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. 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

SEE SCHEDULE O FOR FULL LIST OF STATES

Form **990** (2017)

Form 990 (2017) MOZILLA FOUNDATION 20 - 0 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.

(A)	(B)			_ (0				(D)	(E)	(F)
Name and Title	Average	(do	not c	Posi heck r	ition more) than d	one	Reportable	Reportable	Estimated
	hours per	box, unless person is both a officer and a director/trustee			s both	an	compensation	compensation	amount of	
	week	\vdash	T a			T		from the	from related	other
	(list any hours for	direct				_		organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(11 2) 1000 111100)	organization
	organizations	trust	nal tru		oyee	ompe		,		and related
	below	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	IPI	ısı	∰.	Key	E.E	For			
(1) MITCHELL BAKER, CHAIR	1.00								0 004 665	F4 3F0
PAID ONLY BY RELATED FOR-PROFIT	40.00	Х						0.	2,294,667.	51,359
(2) BRIAN BEHLENDORFF	1.00								•	•
DIRECTOR	0.00	Х						0.	0.	0.
(3) BOB LISBONNE, DIRECTOR	1.00								06 000	•
PAID ONLY BY RELATED FOR-PROFIT	4.00	Х						0.	96,000.	0
(4) CATHY DAVIDSON	1.00	٠,							0	0
DIRECTOR (5) RONALDO LEMOS	1.00	Х						0.	0.	0 .
DIRECTOR	0.00	x						0.	0.	0 .
(6) HELEN TURVEY	1.00	^						0.	0.	0.
DIRECTOR	0.00	x						0.	0.	0 .
(7) MOHAMED NANABHAY (FROM 4/5/17)	1.00	^						0.	0.	0 .
DIRECTOR	0.00	x						0.	0.	0.
(8) NICOLE WONG (FROM 4/5/17)	1.00							•	•	•
DIRECTOR	0.00	x						0.	0.	0.
(9) MARK SURMAN	40.00							-		-
EXECUTIVE DIRECTOR/PRESIDENT	0.00	1		х				235,829.	0.	28,716
(10) JIM COOK, TREAS (THRU 5/31/17)	1.00									
PAID ONLY BY RELATED FOR-PROFIT	40.00			Х				0.	1,222,250.	53,909
(11) ANGELA PLOHMAN	40.00									
EXECUTIVE VP, SECRETARY, TREASURER	0.00			Х				163,862.	0.	22,079
(12) CHRISTOPHER LAWRENCE	40.00									
VP LEADERSHIP NETWORK	0.00				Х			206,000.	0.	89,325
(13) ASHLEY BOYD (FROM 01/03/17)	40.00									
VP ADVOCACY	0.00				Х			179,511.	0.	51,806
(14) MICHAEL AUKLAND	40.00								_	
DIRECTOR, HUMAN RESOURCES	0.00					X		126,412.	0.	54,943
(15) AN-ME CHUNG	40.00								_	
SR. FELLOW, INTERNET HEALTH ISSUES	0.00			Ш		Х		154,369.	0.	71,019
(16) HIRAM PAUL JOHNSON	40.00								_	
DIRECTOR, ISSUES MARKETING	0.00			Ш		Х		142,941.	0.	70,310.
(17) MATTHEW WILLSE	40.00	-						100 000	_	
DESIGN MANAGER	0.00					Х		109,232.	0.	79,450.

12041114 149058 MOZILLA

2017.05000 MOZILLA FOUNDATION

MOZILLA1

Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A)	(B)	(C)						(D)	(E)			(F)	
	Name and title	Average	(do		Pos heck		ነ than d	ne	Reportable	Reportable				
		hours per week	box	, unle	ss pe	rson	is both or/trus	an	compensation	compensatio			ount	of
		(list any				T	T I IIII I IIII I		from related organization			other pensa	tion	
		hours for	direct				р		organization	(W-2/1099-MIS			om th	
		related	tee or	ustee			ensate		(W-2/1099-MISC)	,	´	org	anizat	ion
		organizations	altrus	nal tr		loyee	comp						d relat	
		below line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	ınizati	ons
/10)	MILLIAM BACKON		ĭ	<u>=</u>	8	ê.	ΞΈ	요						
LEAD	WILLIAM EASTON FUND & EMAIL STRAT	40.00 0.00					x		117,271.		0.	6	7 1	38.
DEAD	, FUND & EMAIL STRAI	0.00					^		111,211.		٠.	- 0	/ , _	50.
									1 425 405	2 610 0		<u> </u>		
	Sub-total							>	1,435,427.	3,612,93		64	J , U	<u>54.</u>
	Total from continuation sheets to Part VII	, Section A						•	0.	3,612,93	0.	611	2 0	<u>0.</u> 54.
	Total (add lines 1b and 1c)						·····	_	1,435,427.	- , - , -		04	J , U	54.
2	Total number of individuals (including but no	ot limited to the	ose	ııste	a ar	oove) wn	o re	eceived more than \$100,	000 of reportable	•			41
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director or tru	oto	. ko	v or	nnlo		orl	highest componented or	nnlovoo on	ſ		103	110
3	line 1a? If "Yes," complete Schedule J for so				-		-		-			3		х
4	For any individual listed on line 1a, is the su								ner compensation from t			Ŭ		
	and related organizations greater than \$150									-		4	х	
5	Did any person listed on line 1a receive or a													
	rendered to the organization? If "Yes." com	•							•			5		Х
Sec	ion B. Independent Contractors													
1	Complete this table for your five highest cor	mpensated ind	ере	nder	nt co	ontr	acto	s th	nat received more than \$	100,000 of comp	ensat	ion fro	m	
	the organization. Report compensation for t	he calendar ye	ar e	endir	ng w	ith o	or wi	hin	the organization's tax y	ear.				
	(A)								(B)			(C	;)	
	Name and business								Description of s	ervices	С	omper	nsatio	n
	ILLA CORPORATION, 331		\mathbf{EL}	ΥN										
	NUE, MOUNTAIN VIEW, CA								SERVICE AGRE	EMENT		46	9,4	04.
	GAIL S. PHILLIPS, 331	E. EVEL	YN	A.	VE	NU	Ε,							
_	NTAIN VIEW, CA 94041							_	LEGAL SERVIC	ES		20	3,0	00.
	EARCH ACTION DESIGN	a	^						00110111 E T110 ~			00		0.0
	PO BOX 519, JOSHUA TREE, CA 92252 CONSULTING SERVICES 203,100.													
	KWOOD LEADERSHIP	03 EE 333	_	~	7	۰,	<i>-</i> 1	ľ	STAFF	er obverse		10	- ^	0.0
<u> 1 </u>	2 BROADWAY, SUITE 700,	UAKLAN	υ,	Ċ.	A	サ4	οТ	4_[TRAINING/DEV.	PPONKENT,		ΤЭ:	ο, υ	00.

441 LOGUE AVENUE, MOUNTAIN VIEW, CA 94043 CONTRACT SERVICES

2 Total number of independent contractors (including but not limited to those listed above) who received more than

19

732008 11-28-17

UPWORK

178,383.

Form **990** (2017)

\$100,000 of compensation from the organization

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

(A) (C) Unrelated business (B) Revenue excluded from tax under sections 512 - 514 Related or exempt function Total revenue revenue revenue 1 a Federated campaigns **b** Membership dues 1b c Fundraising events d Related organizations 1d 2,112,433. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 7,729,132. Q Noncash contributions included in lines 1a-1f: \$ 9,841,565. h Total. Add lines 1a-1f \blacktriangleright Business Code 2 a LICENSING ROYALTIES 10,073,509. 10,073,509. 900099 Program Service Revenue b SPONSORSHIPS 900099 73,622. 73,622. c MOZFEST & OTHER EVENTS 900099 25,556. 25,556. d WORKSHOP & TRAINING FEES 900099 21,020. 21,020. f All other program service revenue ... 10,193,707. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 458,546 458,546. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory **b** Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) ${\bf 8}\ {\bf a}\ \ {\rm Gross}$ income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory \triangleright Miscellaneous Revenue Business Code 11 a DIVIDENDS - MOZILLA CORPORATION 91,198 91,198. 523000 b OTHER INCOME 900099 1,430. 1,430. d All other revenue 92,628. e Total. Add lines 11a 11d 12 Total revenue. See instructions. 20,586,446. 121,628. 10,623,253.

732009 11-28-17

Form 990 (2017) MOZILLA FOUNDATION Part IX Statement of Functional Expenses

Do.	Check if Schedule O contains a respon- not include amounts reported on lines 6b,	(A)	(B) Program service	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	1 005 716	1 005 716		
_	and domestic governments. See Part IV, line 21	1,235,716.	1,235,716.		
2	Grants and other assistance to domestic	786,900.	706 000		
_	individuals. See Part IV, line 22	700,900.	786,900.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	1,606,230.	1,606,230.		
	individuals. See Part IV, lines 15 and 16	1,000,230.	1,000,230.		
4 5	Benefits paid to or for members Compensation of current officers, directors,				
9	trustees, and key employees	977,129.	445,642.	332,131.	199,356
6	Compensation not included above, to disqualified	511,125.	443,042.	332,131.	100,000
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,677,608.	5,860,136.	545,827.	271,645
8	Pension plan accruals and contributions (include	0,0,,,000	3,000,200	313,0270	2,2,010
٠	section 401(k) and 403(b) employer contributions)	618,595.	494,153.	73,024.	51,418
9	Other employee benefits	2,378,763.	1,914,838.	202,894.	261,031
10	Payroll taxes	591,182.	486,640.	66,449.	38,093
11	Fees for services (non-employees):	001,101	100,010	00,111	00,000
a		3,207,875.	2,731,738.	464,939.	11,198
b		449,805.	40,448.	394,358.	14,999
	Accounting	207,897.		207,897.	
	Lobbying	378,838.	378,838.	·	
	Professional fundraising services. See Part IV, line 17	10,670.			10,670
f	Investment management fees	163,637.		163,637.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	103,779.	103,779.		
12	Advertising and promotion	38,113.	37,869.	244.	
13	Office expenses	98,401.	60,157.	32,904.	5,340
14	Information technology	415,654.	340,100.	45,155.	30,399
15	Royalties				
16	Occupancy	382,834.	313,308.	41,552.	27,974
17	Travel	2,302,004.	1,673,120.	582,401.	46,483
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	728,451.	687,832.	40,619.	
20	Interest				
21	Payments to affiliates	02.622		10 251	2 624
22	Depreciation, depletion, and amortization	23,630.	7,578.	12,371.	3,681
23	Insurance	13,086.		13,086.	
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.)				
а	CONTRACTOR OF THE CONTRACTOR O	450,683.	73,513.	365,924.	11,246
b	TRANSACTION FEES	175,153.	,	,	175,153
c	DECENTENCE EXPENSES	169,093.		169,093.	-,
d		•			
e	All other expenses	14,675.	6,912.	102.	7,661
25	Total functional expenses. Add lines 1 through 24e	24,206,401.	19,285,447.	3,754,607.	1,166,347
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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Form **990** (2017)

rm 99 art)		2017) MOZILLA FOUNDATION Balance Sheet		20-	0097189 Page
<u>,</u>	•	Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing		1	
:	2	Savings and temporary cash investments	10,104,164.	2	5,296,390
;	3	Pledges and grants receivable, net	842,987.	3	1,684,368
4	4	Accounts receivable, net	1,641,805.	4	2,037,353
4	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	
١,	9	Prepaid expenses and deferred charges	26,783.	9	5,25
10	0a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 274, 206.			
	b	Less: accumulated depreciation 10b 243,835.	18,040.	10c	30,37
1.		Investments - publicly traded securities	16,937,163.	11	19,310,81
12		Investments · other securities. See Part IV, line 11	4,074,947.	12	4,055,28
13		Investments - program-related. See Part IV, line 11	1,000,010.	13	1,000,01
14		Intangible assets	, ,	14	, , .
1		Other assets. See Part IV, line 11		15	
10		Total assets. Add lines 1 through 15 (must equal line 34)	34,645,899.	16	33,419,85
1		Accounts payable and accrued expenses	2,689,162.	17	3,035,47
18		Grants payable	55,000.	18	110,00
19		Deferred revenue	33,000	19	
20		Tax-exempt bond liabilities		20	
2		Escrow or custodial account liability. Complete Part IV of Schedule D		21	
10		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	
i 2:	•	Secured mortgages and notes payable to unrelated third parties		23	
2		Unsecured notes and loans payable to unrelated third parties		24	
2		Other liabilities (including federal income tax, payables to related third		24	
-	9	parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
20	6	Total liabilities. Add lines 17 through 25	2,744,162.	26	3,145,47
1-		Organizations that follow SFAS 117 (ASC 958), check here X and	2,,11,1020	20	3/113/1/
		complete lines 27 through 29, and lines 33 and 34.			
2	7	Unrestricted net assets	26,105,443.	27	26,345,17
2		Temporarily restricted net assets	5,796,294.	28	3,929,20
25 25 25 36 37 37 37 37 37 37 37 37 37 37 37 37 37		Permanently restricted net assets	-,.50,-51	29	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	_	Organizations that do not follow SFAS 117 (ASC 958), check here			
:		and complete lines 30 through 34.			
3 3	n	Capital stock or trust principal, or current funds		30	
3		Paid-in or capital surplus, or land, building, or equipment fund		31	
3				32	
3		Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	31,901,737.	33	30,274,37
~	ა 4	Total liabilities and net assets/fund balances	34,645,899.	34	33,419,85

Form **990** (2017)

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

Form 990 (2017)

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За

3b

Act and OMB Circular A-133?

SCHEDULE A

(Form 990 or 990-EZ)

12041114 149058 MOZILLA

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.

Open to Public Inspection

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

Pa	rt I	Reason for Public (Charity Status (All organizations must co	mplete th	is part.) Se	ee instructions.	0 000,200					
The	organ	ization is not a private found											
1		A church, convention of ch	,	•	•		1VAVi)						
2	Ħ	A school described in secti					·,,,-,,,,						
3	Ħ	A hospital or a cooperative					ii\						
4	H	A medical research organiz					-	the hospital's name					
-	ш	city, and state:	allon operated in con	ijanotion with a noophal	4000	000110	m motor introduction	the neepital e name,					
5		An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	vernmental unit describe	ed in					
٠	ш	section 170(b)(1)(A)(iv). (C		logo or anivorsity owned	or operat	od by a go	vormionia ami accomb	JG 111					
6		A federal, state, or local go		nental unit described in	coction 17	70/6\/ 1\/ 4\	(v)						
7	X		•				• •	oublic described in					
•		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	Ħ	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-				-		-					
		university:	grant college or agrici	ulture (see iristructions).	Litter tile i	name, city	, and state of the college	; OI					
10		An organization that norma	Ilv receives: (1) more	than 33 1/3% of its sun	ort from o	ontributio	ns membershin fees ar	nd aross receipts from					
		activities related to its exen					•	•					
		income and unrelated busin			. ,			•					
		See section 509(a)(2). (Con		(1000 000tion on really inc	20000	ooo aoqa.	iod by the organization t						
11		An organization organized a		vely to test for public sat	etv See	section 50	09(a)(4).						
12	一	An organization organized a	•		•			purposes of one or					
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section :	509(a)(2)	See section 509(a)(3),	Check the box in					
		lines 12a through 12d that	-	, ,, ,									
а		Type I. A supporting orga	= -				=	aivina					
		the supported organization		•		-							
		organization. You must o	., .		, ,								
b		Type II. A supporting org	•		ion with its	s supporte	ed organization(s), by hav	/ing					
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the sup	ported					
		organization(s). You mus	t complete Part IV,	Sections A and C.									
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally integrate	ed with,					
		its supported organization	n(s) (see instructions)	You must complete F	Part IV, Se	ctions A,	D, and E.						
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	vith its supported organi	zation(s)					
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and an attenti	veness					
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.						
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III						
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.							
f		er the number of supported o											
g		vide the following information			(iv) Is the orga	nization lieted	1 () 4						
	,	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
		organization .		above (see instructions))	Yes	No	cappert (coo monactions)	capport (see mendenone)					
_													
_													
Tota	ıL_												
LHA	For F	Paperwork Reduction Act N	lotice, see the Instri	uctions for Form 990 or	990-EZ.	732021 10-	06-17 Schedule A (For	m 990 or 990-EZ) 2017					

Schedule A (Form 990 or 990-EZ) 2017 MOZILLA FOUNDATION 20-0097189 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6909597.	12570258.	12429238.	12455200.	9913657.	54277950.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	6909597.	12570258.	12429238.	12455200.	9913657.	54277950.
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,						
	a alumn (f)						16784029.
6	Public support. Subtract line 5 from line 4.						37493921.
	ction B. Total Support						0,1303211
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 4		12570258.				54277950.
	Gross income from interest,						
Ü	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	446,218.	437,665.	445,798.	353,181.	458,546.	2141408.
۵	Net income from unrelated business	110,210.	137,003.	113,7300	333,101.	130,310.	21111001
9	activities, whether or not the						
	· ·		45,850.				45,850.
40	business is regularly carried on		43,030.				43,030.
10	Other income. Do not include gain						
	or loss from the sale of capital			2,533.	11,891.	92,628.	107,052.
	assets (Explain in Part VI.)			2,333.	11,091.	92,020.	56572260.
	Total support. Add lines 7 through 10	-1- (!1				40	D03/2200•
12	Gross receipts from related activities,	•	,			12	
13	First five years. If the Form 990 is for	=	s tirst, second, thir		•		
Sec	organization, check this box and stop ction C. Computation of Publi		centage				P
	•			olumn (fl)		14	66.28 %
	Public support percentage for 2017 (li					15	
	Public support percentage from 2016 33 1/3% support test - 2017. If the o						/0
168		-					
	stop here. The organization qualifies		-		li 15 i- 00 1/00/		
b	33 1/3% support test - 2016. If the c	•					
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	_					
	and if the organization meets the "fac			•			
	meets the "facts-and-circumstances"	-			-		
b	10% -facts-and-circumstances test	-					
	more, and if the organization meets the				•		
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b		nd see instructions	

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Schedule A (Form 990 or 990-EZ) 2017 MOZILLA FOUNDATION 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.)

Sec	ction A. Public Support	, ,	,				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
C	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
_	ction B. Total Support	1		1	1		
	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
• • •	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3) organiz	ation,
Sad	check this box and stop here ction C. Computation of Publi	ic Support De	rcentage				>
	Public support percentage for 2017 (olumn (fl)		15	0,
	Public support percentage from 2016					16	9
	ction D. Computation of Inves					1 10 1	
-	Investment income percentage for 20			ne 13 column (fl)		17	0,
	Investment income percentage from					18	0,
	33 1/3% support tests - 2017. If the						
136	more than 33 1/3%, check this box a						
Ŀ	33 1/3% support tests - 2016. If the						
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization			•		-	
	23 10-06-17	sid fiet offoot d	227 011 1110 17, 19	_, 51 100, 01100K ti		edule A (Form 99	0 or 990-F7\ 201
					3011		

Yes No

(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	4. Ali	Supporting	Organizations
-----------	--------	------------	---------------

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

1 2 За 3b Зс 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9с 10a 10b

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Schedule A (Form 990 or 990-EZ) 2017

- 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

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Schedule A (Form 990 or 990-EZ) 2017

2a

2b

За

3b

Pai	[↑] V │ Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on I	Nov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	- mplete Se	ctions A through E.	
Sect	ion 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		
	ion 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):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	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		
Sect	ion 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	Check here if the current year is the organization's first as a non-functional		ed Type III supporting orga	anization (see
•	instructions)	.,	, _F = capps, ig orge	

Schedule A (Form 990 or 990-EZ) 2017

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Schedule A (Form 990 or 990-EZ) 2017 MOZILLA FOUNDATION

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 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. 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. Distributable amount for 2017 from Section C, line 6 10 Line 8 amount divided by line 9 amount (i) Underdistributions Pre-2017 Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Amount for 2017 1 Distributable amount for 2017 from Section C, line 6 2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2017 **b** From 2013 **c** From 2014 **d** From 2015 e From 2016 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2017 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2017 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2018. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2013 **b** Excess from 2014 c Excess from 2015 d Excess from 2016 e Excess from 2017

Schedule A (Form 990 or 990-EZ) 2017

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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.

Name of the organization		Employer identification number			
MC	ZILLA FOUNDATION	20-0097189			
Organization type (check o	ne):				
Filers of:					
Form 990 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e. See instructions.			
General Rule					
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's				
Special Rules					
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount line 1. Complete Parts I and II.	or 16b, and that received from			
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a titions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ cruelty to children or animals. Complete Parts I, 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					
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its For he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				
LHA For Paperwork Redu	ction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule	B (Form 990, 990-EZ, or 990-PF) (2017)			

Employer identification number

MOZILLA FOUNDATION

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Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$ \$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		ss	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

MOZILLA FOUNDATION

12041114 149058 MOZILLA

20-0097189

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

Employer identification number

MOZILL Part III	A FOUNDATION Exclusively religious, charitable, etc., con	tributions to organizations described in sec	20-0097189 tion 501(c)(7), (8), or (10) that total more than \$1,000 for
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religion Use duplicate copies of Part III if addition	s, charitable, etc., contributions of \$1,000 or less for	tion 501(c)(7), (8), or (10) that total more than \$1,000 for ine entry. For organizations the year. (Enter this info. once.)
(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, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
() N			
(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, a	nd ZIP + 4	Relationship of transferor to transferee
(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, a		Relationship of transferor to transferee
			0

12041114 149058 MOZILLA

SCHEDULE C

(Form 990 or 990-EZ)

Internal Revenue Service

Political Campaign and Lobbying Activities

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.

Open to Public Inspection

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

• s	Section 501(c)(4), (5), or (6) organization	tions: Complete Part III.			
Name	e of organization			Empl	oyer identification number
		FOUNDATION			20-0097189
Par	t I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa	ures		in Part IV. ▶\$	
Par	t I-B Complete if the org	janization is exempt und	ler section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955	▶\$	
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 4955	5 ▶\$	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720) for this year?		Yes No
	Was a correction made?				Yes No
	If "Yes," describe in Part IV.		law a a atiana FO4/a)		1/01
		janization is exempt und		-	
	Enter the amount directly expended		·		
	Enter the amount of the filing organ		•		
	exempt function activities Total exempt function expenditures				
	line 17b				
	Did the filing organization file Form				
5 I	Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If	nployer identification number (E tion listed, enter the amount pa omptly and directly delivered to	IN) of all section 527 po id from the filing organi a separate political org	olitical organizations to which zation's funds. Also enter the anization, such as a separate	the filing organization amount of political
	(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) 2017

LHA 732041 11-09-17

12041114 149058 MOZILLA

2017.05000 MOZILLA FOUNDATION

MOZILLA1

	Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(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								
Schedule C (Form 990 or 990-EZ) 2017								

12041114 149058 MOZILLA

Schedule C (Form 990 or 990-EZ) 2017 MOZILLA FOUNDATION 20-0097189 Page 3 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)).

or e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)		(b)
of th	e lobbying activity.	Yes	١	10	Am	ount
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:					
а	Volunteers?			<u>X</u>		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X				
	Media advertisements?	X			208	3,475
	Mailings to members, legislators, or the public?		_	X		
	Publications, or published or broadcast statements?	v		X		E 2 1
	Grants to other organizations for lobbying purposes?	Х		х		531
g		х		^	231	0,923
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X				3,387
	Other activities?					3,316
	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			x	44.	, <u>, , , , , , , , , , , , , , , , , , </u>
				^		
	If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912			1		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	rt III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5	5). o	r sec	tion	
	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			3		
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5	5), o	r sec	tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No," OR	(b)	Part l	III-A, line	e 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	cal				
	expenses for which the section 527(f) tax was paid).					
	Current year			2a		
b	Carryover from last year			2b		
	Total			2c		
3	33 3 1 (7,7)			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p					
_	expenditure next year?			4		
5 Pai	Taxable amount of lobbying and political expenditures (see instructions) rt IV Supplemental Information			5		
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	liot\: Dort II	Λ lin	00 1 01	nd 2 (000	
	ide the descriptions required for Fart PA, line 1, Fart PB, line 4, Fart PB, line 3, Fart PA (animated group	iist), rait ii-	А, ш	es i ai	iu z (see	
	ections); and Part II.R. line 1. Also, complete this part for any additional information					
	uctions); and Part II B, line 1. Also, complete this part for any additional information. RT TT-B. I.TNE 1. I.OBBYTNG ACTIVITIES:					
	uctions); and Part II-B, line 1. Also, complete this part for any additional information. RT II-B, LINE 1, LOBBYING ACTIVITIES:					
ΙN	RT II-B, LINE 1, LOBBYING ACTIVITIES:	REFOR		IN '	гне	
ΙN		REFOR	RM	IN '	гне	
	RT II-B, LINE 1, LOBBYING ACTIVITIES: 2017, MOZILLA PROVIDED MATERIAL REGARDING COPYRIGHT					
	RT II-B, LINE 1, LOBBYING ACTIVITIES:					
ΞUI	RT II-B, LINE 1, LOBBYING ACTIVITIES: 2017, MOZILLA PROVIDED MATERIAL REGARDING COPYRIGHT	VIDUAL	s.	IT	ALSO	
ΞUI	RT II-B, LINE 1, LOBBYING ACTIVITIES: 2017, MOZILLA PROVIDED MATERIAL REGARDING COPYRIGHT ROPEAN UNION FOR VARIOUS INDEPENDENT GROUPS AND INDI	VIDUAL	s.	IT	ALSO	
Ά	RT II-B, LINE 1, LOBBYING ACTIVITIES: 2017, MOZILLA PROVIDED MATERIAL REGARDING COPYRIGHT ROPEAN UNION FOR VARIOUS INDEPENDENT GROUPS AND INDI	VIDUAL	s.	IT	ALSO	
Ά	RT II-B, LINE 1, LOBBYING ACTIVITIES: 2017, MOZILLA PROVIDED MATERIAL REGARDING COPYRIGHT ROPEAN UNION FOR VARIOUS INDEPENDENT GROUPS AND INDI	VIDUAL	s.	IT	ALSO	

Schedule C (Form 990 or 990-EZ) 2017

732043 11-09-17

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

Name of the organization

MOZILLA FOUNDATION

Employer identification number 20-0097189

Pa	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors 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?		Yes No_
Pa	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired at	fter 7/25/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ease	·	
5	Does the organization have a written policy regarding the period		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing con	servation easements during the year
_	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conserva	ation easements during the year
_	> \$		(L) (A) (D) (C)
8	Does each conservation easement reported on line 2(d) above	•	
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservatio	•	
	include, if applicable, the text of the footnote to the organizationservation easements.	on's illiancial statements that describes	the organization's accounting for
Pa	t III Organizations Maintaining Collections of	Art. Historical Treasures, or O	ther Similar Assets
	Complete if the organization answered "Yes" on Form	· ·	
	If the organization elected, as permitted under SFAS 116 (ASC		ment and balance sheet works of art
	historical treasures, or other similar assets held for public exhi	•	
	the text of the footnote to its financial statements that describ		ande of public dervice, provide, in Fait Ain,
h	If the organization elected, as permitted under SFAS 116 (ASC		t and halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	**	
	relating to these items:		ss, provide and following amounts
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical trea		
-	the following amounts required to be reported under SFAS 11		
а	Revenue included on Form 990, Part VIII, line 1		> \$
b			· .
	For Panerwork Peduction Act Notice see the Instructions		Schedule D (Form 990) 2017

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		FOUNDATION						009718		
Pai	rt III Organizations Maintaining C	ollections of Art	, Hist	orical Tre	asures, or	Other	Similar Ass	sets (con	inued)	
3	Using the organization's acquisition, accessi	on, and other records	, check	any of the f	ollowing that	are a sigr	nificant use of	its collectio	n items	3
	(check all that apply):									
а	Public exhibition	d		Loan or excl	hange progra	ıms				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how th	ey further th	e organizatio	n's exem _l	pt purpose in I	Part XIII.		
5	During the year, did the organization solicit o	r receive donations o	f art, hi	storical treas	sures, or othe	r similar a	ıssets			
	to be sold to raise funds rather than to be ma							Yes		No
Pai	rt IV Escrow and Custodial Arran		te if the	e organizatio	n answered "	Yes" on F	orm 990, Part	t IV, line 9, d	r	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi	an or other intermedia	ary for o	contributions	s or other ass	ets not in	cluded	_	_	_
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing t	able:						
								Amou	nt	
	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f							1f			
	Did the organization include an amount on Fo						y?	Yes	_	_ No
	If "Yes," explain the arrangement in Part XIII.									
Га	rt V Endowment Funds. Complete i	ı i								
	B	(a) Current year	(b) ⊦	Prior year	(c) Two year	s back (d) Three years b	oack (e) Fo	ur years	раск
	Beginning of year balance					-		_		
b										
C	3,3,,									
d										
е	Other expenditures for facilities									
	and programs									
f										
g	End of year balance Provide the estimated percentage of the curr		/line 1	- aalumn (a)) hald as					
2 a		•	0/	y, coluitiii (a)) Helu as.					
b	_									
C										
·	The percentages on lines 2a, 2b, and 2c short									
За	Are there endowment funds not in the posse	•	tion tha	t are held an	nd administer	ed for the	organization			
-	by:					04.101.41.10	organization.		Yes	No
	(i) unrelated organizations							3a(i	1	110
	(ii) related organizations									
b	If "Yes" on line 3a(ii), are the related organiza									
4	Describe in Part XIII the intended uses of the								•	
Pai	rt VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990,	Part IV	/, line 11a. S	ee Form 990	, Part X, l i	ne 10.			
	Description of property	(a) Cost or ot	her	(b) Cost	or other	(c) Ac	cumulated	(d) Bo	ok valu	ie
		basis (investm		basis			reciation			
1a	Land									
b										
С	Leasehold improvements									
d	Equipment			27	4,206.	2	43,835.	3	30,3	71.
		1		1				1		

Schedule D (Form 990) 2017

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value

1.	(a) Description of hability	(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.)	
	170 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

^{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 X

Schedule D (Form 990) 2017

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	edule D (Form 990) 2017 MOZILLA FOUNDATION		20-0097189	Page 4
Pai	rt XI Reconciliation of Revenue per Audited Financial Staten		nue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.		
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:	1 - 1		
a	J			
b	***************************************	2b		
		1 1		
d	,			
	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
С				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pai	rt XII Reconciliation of Expenses per Audited Financial State		enses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.		
1			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	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:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
Pa	rt XIII Supplemental Information.			
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art IV, lines 1b and 2b	; Part V, line 4; Part X, line 2; Part X	⟨1,
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	dditional information.		
PAF	RT X, LINE 2:			
THE	E FOUNDATION QUALIFIES AS A PUBLIC BENEFI	T CHARITABL	E ORGANIZATION	
EXI	EMPT FROM INCOME TAXES ON RELATED INCOME	UNDER SECTI	ON $501(C)(3)$ OF T	HE
IN'	TERNAL REVENUE CODE AND APPLICABLE SECTIO	NS OF THE C	ALIFORNIA REVENUE	
ANI	D TAXATION CODE. THE FOUNDATION PROVIDES	FOR TAX, IF	ANY, ON UNRELATE	D
BUS	SINESS INCOME.			
THE	E CORPORATION IS A C CORPORATION. INCOME	TAXES ARE A	CCOUNTED FOR USING	<u> </u>
AN	ASSET AND LIABILITY APPROACH, WHICH REQU	IRES THE RE	COGNITION OF	
DEI	FERRED TAX LIABILITIES AND ASSETS FOR THE	EXPECTED F	UTURE TAX	
COI	NSEQUENCES OF TEMPORARY DIFFERENCES BETWE	EN THE FINA	NCIAL STATEMENT A	ND
ΓΑΣ	X BASIS OF ASSETS AND LIABILITIES AT THE .	APPLICABLE	ENACTED TAX RATES	
73205	4 10-09-17		Schedule D (Form	990) 2017

Schedule D (Form 990) 2017

732055 10-09-17

SCHEDULE F

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.

OMB No. 1545-0047

Name of the organization

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

Employer identification number MOZILLA FOUNDATION 20-0097189 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? 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 (c) Number of (d) Activities conducted in the region (e) If activity listed in (d) (f) Total offices employees, agents, and (by type) (such as, fundraising, prois a program service, expenditures for and in the region gram services, investments, grants to describe specific type independent contractors investments recipients located in the region) of service(s) in the region in the region in the region GRANTS AND STIPENDS TO EAST ASIA AND THE RECIPIENTS LOCATED IN PACIFIC PROGRAM SERVICES THE REGION 51,058. GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN SOUTH AMERICA PROGRAM SERVICES THE REGION 244,778. GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN EUROPE (INCLUDING THE REGION, PROGRAM MANAGEMENT, OPERATIONS ICELAND & GREENLAND) PROGRAM SERVICES 1,929,019. GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN NORTH AMERICA THE REGION, MANAGEMENT, OPERATIONS, WEB 3,250,604. (CANADA) PROGRAM SERVICES GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION 30,184. NORTH AFRICA PROGRAM SERVICES GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN SUB-SAHARAN AFRICA 0 PROGRAM SERVICES THE REGION 157,110. 174 5,662,753. 3 3 a Sub-total **b** Total from continuation 0 0. sheets to Part I

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

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Schedule F (Form 990) 2017

732071 10-06-17

5,662,753.

c Totals (add lines 3a

and 3b)

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, FM\ appraisal, other)
		EUROPE (INCLUDING	TO STRENGTHEN CIVIL					
		ICELAND &	SOCIETY ENGAGEMENT AT					
		GREENLAND)	THE 2017 ICDPPC.	13,562.		0.		CASH VALUE
		EUROPE (INCLUDING	TO EDUCATE THE PUBLIC					
		ICELAND &	ON THREATS TO PRIVACY					
		GREENLAND)	AND SECURITY ONLINE	26,250.		0.		CASH VALUE
		GREENDAND /	SPONSORSHIP OF	20,230.		٠.		CASII VALUE
		EUROPE (INCLUDING	DISRUPTION NETWORK					
		ICELAND &	LAB'S FEAR MACHINES					
		GREENLAND)	EVENT	10,000.		0.		CASH VALUE
			TO PROVIDE DIGITAL LITERACY TRAINING IN			_		
		NORTH AMERICA	RWANDA	50,000.		0.		CASH VALUE
		EUROPE (INCLUDING ICELAND & GREENLAND)	SPONSORSHIP OF THE 2017 COPYCAMP EVENT	10,000.		0.		CASH VALUE
		EUROPE (INCLUDING ICELAND & GREENLAND)	TO RESEARCH THE IMPACT OF DIGITAL ADVERTISING	12,500.		0.		CASH VALUE
		GREENLAND)	ADVERTISING	12,500.		0.		CASH VALUE
		EUROPE (INCLUDING ICELAND & GREENLAND)	SPONSORSHIP OF THE GIG CONFERENCE TRACK AT RE:PUBLICA 2017	12,000.		0.		CASH VALUE
		NORTH AMERICA	TO PROVIDE HANDS-ON EDUCATION ON OPEN SOURCE DEVELOPMENT	97,235.		0.		CASH VALUE

1:
:

Schedule F (Form 990) 2017

Schedule F (Form 990) MOZILLA FOUNDATION 20-0097189 Page 2

ochedule	F (FOIIII 990)	110211	LA FOUNDATIO	±1		20 00	J 1 ± 0 J		Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Nam	e 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)
				TO OFFER FREE					
				COMPUTER EDUCATION					
			NORTH AMERICA	WORKSHOPS TO YOUTH	5,042.		0.		CASH VALUE
				SPONSORSHIP OF THE					
			SUB-SAHARAN	2017 INTERNET FREEDOM					
			AFRICA	FORUM	10,000.		0.		CASH VALUE
			L						
			EUROPE (INCLUDING ICELAND &	TO SUPPORT THE					
			GREENLAND)	EUROPEAN DIGITAL RIGHTS COMMUNITY	10,000.		0.		CASH VALUE
			,						
				TO CREATE A LOW COST,					
				AFTERSCHOOL HANDS-ON					
			NORTH AMERICA	MAKING PROGRAM	8,062.		0.		CASH VALUE
			EUROPE (INCLUDING	SPONSORSHIP OF THE					
			ICELAND &	2017 CITIZEN MEDIA					
			GREENLAND)	SUMMIT	50,000.		0.		CASH VALUE
				TO RESEARCH ISPS AND					
			SUB-SAHARAN AFRICA	CENSORSHIP IN KENYA, ETHIOPIA, AND UGANDA	10,000.		0.		CASH VALUE
			AFRICA	TO EXPLORE HOW IOT	10,000.		0.		CASH VALUE
			EUROPE (INCLUDING	BRINGS THE ISSUE OF					
			ICELAND &	ONLINE PRIVACY INTO					
			GREENLAND)	тне номе	250,000.		0.		CASH VALUE
				gnovgongurn on					
			EUROPE (INCLUDING ICELAND &	SPONSORSHIP OF EUROPEAN GET ONLINE					
			GREENLAND)	WEEK 2017	10,838.		0.		CASH VALUE
					,				
			EUROPE (INCLUDING	TO SUPPORT A					
			ICELAND &	COLLABORATIVE IOT					
			GREENLAND)	RESEARCH PROJECT	130,000.		0.		CASH VALUE

Schedule	F (Form 990)	MOZIL	LA FOUNDATIO	N		20-009/189 Page						
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)				
1 (a) Nam	ne 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)			
				TO MAP CYBER-BULLYING								
				WHILE TEACHING DIGI								
				LITERACY TO YOUTH &								
			NORTH AMERICA	SKILLS TO SENIORS	6,134.		0.		CASH VALUE			
				TO MAP CYBER-BULLYING								
				WHILE TEACHING								
				DIGITAL LITERACY TO								
			NORTH AMERICA	YOUTH	5,806.		0.		CASH VALUE			
			1	I .	1	ı		1	1			

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	d					
(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)
				ELECTRONIC FUND/WIRE			
FELLOWSHIP STIPENDS	NORTH AMERICA	4		TRANSFER	0.		CASH VALUE
FELLOWSHIP STIPENDS	SOUTH AMERICA	5	176,682.	ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
	EUROPE (INCLUDING						
	ICELAND &			ELECTRONIC FUND/WIRE			
FELLOWSHIP STIPENDS	GREENLAND)	8	266,653.	TRANSFER	0.		CASH VALUE
	SUB-SAHARAN			ELECTRONIC FUND/WIRE			
FELLOWSHIP STIPENDS	AFRICA	3	106,209.		0.		CASH VALUE
FELLOWSHIP STIPENDS	SOUTH ASIA	1		ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE
FELLOWSHIP STIPENDS	MIDDLE EAST AND NORTH AFRICA	1		ELECTRONIC FUND/WIRE TRANSFER	0.		CASH VALUE

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)	X 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	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	X 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)	X 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)	X 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	X No

Schedule F (Form 990) 2017

732074 10-06-17

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 RECEIPIENTS 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, PROGRAM MANAGEMENT, OPERATIONS, WEB

732075 10-06-17

732075 10-06-17 Schedule F (Form 990) 2017

SCHEDULE I (Form 990)

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.

Department of the Treasury Internal Revenue Service

Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information. Inspection

Name of the organization	EO1131D 3 ET O31						Employer identification number
MOZILLA . Part I General Information on Grants	FOUNDATION						20-0097189
1 Does the organization maintain records				augusta agi ali alialita	. for the growth or and	-t	
ě .		•		, ,			
criteria used to award the grants or ass 2 Describe in Part IV the organization's p	recodures for monit	oring the use of grant	funds in the United	States			Zī fes No
Part II Grants and Other Assistance to					anization answered "\	/es" on Form 990 Part	IV line 21 for any
recipient that received more than	_				ariizatiori ariswered	103 0111 01111 000, 1 011	TV, III C Z T, TOT dity
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 noncash assistance	(h) Purpose of grant or assistance
ASIAN AMERICAN JOURNALISTS							
ASSOCIATION - 5 THIRD STREET,							SPONSORSHIP OF THE AAJA
SUITE 1108 - SAN FRANCISCO, CA							EXECUTIVE LEADERSHIP
94103	95-3755203	501 (C) (3)	5,000.	0.	CASH VALUE		PROGRAM.
AUSTIN FREE-NET 2209 ROSEWOOD AVENUE AUSTIN, TX 78702	74-2743446	501 (C) (3)	5,000.	0.	CASH VALUE		TO PROVIDE STEM EDUCATION TO YOUNG LATINAS AND THEIR MOTHERS.
BIG BANG IO LLC							TO BUILD A LOW COST IOT
1712 MAIN SUITE 324							ROBOTICS PLATFORM FOR USE
KANSAS CITY, MO 64108	49-5880015	N/A	24,000.	0.	CASH VALUE		IN K-12 EDUCATION.
BROOKLYN ON TECH 25 BROADWAY, 12TH FLOOR NEW YORK, NY 10004	46-5336001	501 (C) (3)	20,000.	0.	CASH VALUE		TO PILOT AN OPEN DIGITAL STORYTELLING CURRICULUM WITH NYC STUDENTS.
CAPITAL OF TEXAS MEDIA FOUNDATION 1512 BROADMOOR DRIVE	46, 2200420	504 (6) (0)	20.000				TO CREATE AN ONLINE MOCK CITY COUNCIL FOR STUDENTS TO LEARN CIVICS; AND TO
AUSTIN, TX 78723	46-3398438	501 (C) (3)	39,000.	0.	CASH VALUE		DEVELOP ACTIVITIES AND
CATOOSA COUNTY P.O. BOX 130 RINGGOLD, GA 30736	58-2646207	501 (C) (3)	10,000.	0.	CASH VALUE		TO PROVIDE INTERACTIVE SCIENCE EDUCATION USING TECHNOLOGY.
2 Enter total number of section 501(c)(3)	and government org	ganizations listed in th	ne line 1 table			-	▶ _ 65.
3 Enter total number of other organizatio	ns listed in the line	1 table					▶ 8.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2017)

732101 11-01-17

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (c) IRC section (d) Amount of (e) Amount of (f) Method of (a) Name and address of (b) EIN (a) Description of (h) Purpose of grant or assistance organization or government , if applicable cash grant non-cash valuation non-cash assistance (book, FMV, appraisal, other) assistance CHANGING EXPECTATIONS PO BOX 1965 TO PREPARE BOYS OF COLOR ROUND ROCK, TX 78680 20-3122281 501 (C) (3) 15,000. 0. CASH VALUE FOR THE VR WORKFORCE. CIVIC HALL, LLC 118 WEST 22ND STREET, 12TH FLOOR NEW YORK, NY 10011 47-4897004 501 (C) (3) 6,000. 0. CASH VALUE MEMBERSHIP PAYMENT. CIVICUS WORLD ALLIANCE FOR TO PROVIDE DIGITAL SKILLS PARTICIPATION INC. - 1775 EYE TRAINING TO CIVIL SOCIETY STREET, NW SUITE 1150 -ORGS; AND FOR CAMPAIGNCON 52-1847010 501 (C) (3) WASHINGTON, DC 20006 11,600. 0. CASH VALUE PARTICIPATION FEE FOR NON CLEVELAND PUBLIC LIBRARY TO PROVIDE DIGITAL 325 SUPERIOR AVENUE LITERACY TRAINING TO 34-6565428 501 (C) (3) 10,000. LIBRARIANS. CLEVELAND, OH 44114 0. CASH VALUE CODE/INTERACTIVE TO PROVIDE PEER TECH EDUCATION TO NYC 25 BROADWAY, 12TH FLOOR NEW YORK, NY 10004 13-4162016 501 (C) (3) 14,000 STUDENTS. 0. CASH VALUE COMMUNITY PARTNERS 1000 N. ALAMEDA STREET, SUITE 240 SPONSORSHIP OF 2017 LOS ANGELES, CA 90012 95-4302067 501 (C) (3) 15,000. 0. CASH VALUE SRCCON: WORK. CONTEXTURE MEDIA NETWORK 913 N MARKET STREET, SUITE 200 SPONSORSHIP OF CREATIVE 36-3467921 501 (C) (3) WILMINGTON, DE 19801 5,000, 0. CASH VALUE TECH EXPO. CREATIVE COMMONS SPONSORSHIP OF 2017 PO BOX 741107 CREATIVE COMMONS GLOBAL LOS ANGELES, CA 90074 04-3585301 501 (C) (3) 10,000. 0. CASH VALUE SUMMIT. TO EXPOSE STUDENTS TO E4 YOUTH 4302 AIRPORT BOULEVARD DESIGN THINKING AND TECH CAREERS THROUGH VR. AUSTIN, TX 78722 46-2878544 501 (C) (3) 15,000. 0. CASH VALUE

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 (c) IRC section (d) Amount of (f) Method of (b) EIN (e) Amount of (h) Purpose of grant (a) Description of organization or government , if applicable cash grant non-cash valuation non-cash assistance or assistance assistance (book, FMV, appraisal, other) EDUCATION VIDEO CENTER TO BRING URBAN AND RURAL YOUTH TOGETHER TO BRIDGE 16 CLARKSON STREET, NO. 401 NEW YORK, NY 10014 13-3378456 501 (C) (3) 26,000. 0. CASH VALUE DIGITAL DIVIDES. TRAVEL GRANT FOR STAFF EYEBEAM ATELIER, INC. MEMBER AND STUDENT TO PO BOX 220532 ATTEND MOZFEST; AND TO BROOKLYN, NY 11222 13-3378456 501 (C) (3) 6,000. 0. CASH VALUE PURCHASE EQUIPMENT FOR TO PILOT A MODEL FOR GLOBAL ACTION PROJECT YOUTH-PRODUCED RAPID 130 WEST 25TH STREET, SUITE 2C RESPONSE MEDIA IN NYC; 11-3425000 501 (C) (3) NEW YORK, NY 10001 23,000. 0. CASH VALUE AND TO HELP INCREASE TO SUPPORT A STEM PROGRAM GLOBAL KIDS INC FOR YOUTH AGES 14-18; AND EVIE HANTZOPOULOS, 137 EAST 25TH ST FOR A TRAVEL GRANT TO 13-3629485 501 (C) (3) 17,990. ATTEND THE 2017 ESRI NEW YORK, NY 10010 0. CASH VALUE SPONSORSHIP OF A HACKS HACKERS MISINFOCON AT MIT; AND TO PRODUCE GLOBAL EVENTS ON 61 JANE STREET 45-53514<u>84</u> 501 (C) (3) NEW YORK, NY 10014 25,000 THE TOPIC OF 0. CASH VALUE TO USE GIG TECHNOLOGY FOR HAMILTON COUNTY 3074 HICKORY VALLEY ROAD TEACHER PROFESSIONAL 62-0929459 501 (C) (3) 10,000. 0. CASH VALUE LEARNING. CHATTANOOGA, TN 37421 TO SPONSOR ANNUAL IMS GLOBAL LEARNING 801 INTERNATIONAL PARKWAY, 5TH FLR MEMBERSHIP DUES FOR A 04-3489277 501 (C) (3) LAKEMARY, FL 32746 15,000. 0. CASH VALUE CONTRIBUTING MEMBER. INNOVATE OREGON 123 NE 3RD AVENUE, SUITE 210 TO INCREASE THE NUMBER OF WOMEN IN THE TECH SECTOR. 34-1996112 501 (C) (3) 12,000 0. CASH VALUE EUGENE, OR 97232 TO CREATE AN INTERACTIVE INTEGRATED ARTS MIXED-MEDIA ART 30893 BLANTON ROAD INSTALLATION IN EUGENE, EUGENE, OR 97405 47-2571430 501 (C) (3) 16,000. 0. CASH VALUE OR.

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 (c) IRC section (e) Amount of (f) Method of (b) EIN (d) Amount of (h) Purpose of grant (a) Description of organization or government , if applicable cash grant non-cash valuation non-cash assistance or assistance (book, FMV, appraisal, other) assistance INTERNATIONAL RESEARCH AND EXCHANGES BOARD - 1275 K STREET NW, SUITE 600 - WASHINGTON, DC SPONSORSHIP OF THE 2017 20005 22-3087809 501 (C) (3) 20,000. 0. CASH VALUE INTERNET FREEDOM FORUM. INTERNATIONAL SOCIETY FOR COMPUTATIONAL BIOLOGY - 9650 SPONSORSHIP OF 2017 ICSB ROCKVILLE PIKE - BETHESDA, MD AFRICA ASBCB CONFERENCE 20814 52-2093854 501 (C) (3) 5,000. 0. CASH VALUE ON BIOINFOMATICS. INTERNET SYSTEM CONSORTIUM TO CONNECT DIGITAL 950 CHARTER STREET SECURITY EXPERTS TO CIVIL 20-0141248 501 (C) (3) REDWOOD CITY, CA 94063 10,000. 0. CASH VALUE SOCIETY ORGANIZATIONS. INVESTIGATIVE REPORTERS AND EDITORS INC - 141 NEFF ANNEX -SPONSORSHIP OF 2017 51-0166741 501 (C) (3) 9,400. COLUMBIA, MO 65211 0. CASH VALUE NICAR TO SUPPORT TRAVEL OF INVESTIGATIVE REPORTERS AND SESSION HOSTS TO THE EDITORS INC - 1275 K STREET NW, INTERNET FREEDOM SUITE 600 - WASHINGTON, DC 20005 51-0166741 501 (C) (3) 10,000. FESTIVAL. 0. CASH VALUE KC METROPOLITAN EDTECHNET TO PARTNER EDUCATORS AND 7606 NW 73RD COURT CERN SCIENTISTS TO CREATE 20-5496239 501 (C) (3) KANSAS CITY, MO 64152 24,000. 0. CASH VALUE STEM LESSONS. TO RESEARCH HOW SMART HOUSING DESIGN CAN KII ENDOWMENT PO BOX 928 SUPPORT POPULATION 20-0317170 501 (C) (3) LAWRENCE, KS 66044 21,000. 0. CASH VALUE HEALTH. LAFAYETTE PARISH SCHOOL SYSTEM TO DEVELOP STEM EDUCATION 805 TEURLINGS DRIVE CURRICULUM FOR DTSMA 72-6000625 170 (C) (1) LAFAYETTE, LA 70501 15,000. 0. CASH VALUE STUDENTS. LAFAYETTE SCIENCE MUSEUM TO DEVELOP A VR GAME FOR FOUNDATION - 433, JEFFERSON STREET STUDENTS TO LEARN ABOUT - LAFAYETTE, LA 70501 COASTAL EROSION. 23-7086419 501 (C) (3) 15,000. 0. CASH VALUE

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (c) IRC section (d) Amount of (e) Amount of (f) Method of (b) EIN (g) Description of (h) Purpose of grant (a) Name and address of organization or government , if applicable cash grant non-cash valuation non-cash assistance or assistance (book, FMV, appraisal, other) assistance LANE ARTS COUNCIL TO TEACH STUDENTS 1590 WILLAMETTE STREET, SUITE 200 STORYTELLING USING EUGENE, OR 97401 93-0681430 501 (C) (3) 15,000. 0. CASH VALUE GIGABIT TECHNOLOGY LANE EDUCATION SERVICE DISTRICT TO DEVELOP ELEMENTARY 1200 HIGHWAY 99 NORTH SCHOOL STEM EDUCATION EUGENE, OR 97402 31-1622209 501 (C) (3) 28,000. 0. CASH VALUE CURRICULA. TO PROVIDE STEM LESSONS LATINITAS INC. TO GIRLS LIVING IN AUSTIN 4926 E. CESAR CHAVEZ STREET PUBLIC HOUSING; AND TO 77-0603754 501 (C) (3) AUSTIN, TX 78702 10,000. 0. CASH VALUE ALLOW LATINA GIRLS TO MASSACHUSETTS INSTITUTE OF SPONSORSHIP WORLD WIDE TECHNOLOGY - 77 MASSACHUSETTS WEB CONSORTIUM MEMBER 04-2103594 501 (C) (3) AVENUE - CAMBRIDGE, MA 02139 7,900. 0. CASH VALUE EVENTS. MEDCOGNITION TO PILOT EMERGENCY FIRST RESPONDER TRAINING USING 18106 SETTLEMENT WAY AR TECHNOLOGY. SAN ANTONIO, TX 78258 82-1181278 N/A 15,000 0. CASH VALUE SPONSORSHIP OF MEDIA MEDIA FACTORY LLC 57 EAST 11TH STREET PARTY BUENOS AIRES FAKE 32-0449898 N/A NEW YORK, NY 10003 20,000. 0. CASH VALUE NEWS TRACK. METROPOLITAN NEW YORK LIBRARY TO PROVIDE DIGITAL COUNCIL - 57 EAST 11TH STREET, LITERACY TRAINING TO 13-6210582 170 (C) (1) FOURTH FLOOR - NEW YORK, NY 10003 10,000. 0. CASH VALUE LIBRARIANS. MIT MEDIA LAB 77 MASSACHUSETTS AVENUE, E14-245 04-2103594 501 (C) (3) 20,000. 0. CASH VALUE GENERAL SUPPORT. CAMBRIDGE, MA 02139 MOTION MEDIA ARTS CENTER TO CONNECT STUDENTS FROM 2200 TILLERY STREET TEXAS AND MEXICO TO 36-4533347 501 (C) (3) AUSTIN, TX 78723 15,000. 0. CASH VALUE CREATE A 4K SHORT FILM.

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (c) IRC section (d) Amount of (e) Amount of (f) Method of (b) EIN (g) Description of (h) Purpose of grant (a) Name and address of organization or government , if applicable cash grant non-cash valuation non-cash assistance or assistance assistance (book, FMV, appraisal, other) TO PROVIDE TECHNOLOGY MOUSE INC EDUCATION TRAINING TO NYC 55 BROAD STREET, 16TH FLOOR TEACHERS; TO SUPPORT NEW YORK, NY 10004 13-3973196 501 (C) (3) 12,894. 0. CASH VALUE PROFESSIONAL DEVELOPMENT TO EXPAND FINANCIAL NEIGHBORHOOD ECONOMIC DEVELOPMENT EDUCATION PROGRAM LOW-INCOME YOUTH THROUGH FORUM - 212 MAIN STREET -SPRINGFIELD, OR 97477 93-0739188 501 (C) (3) 12,000. 0. CASH VALUE TECH. NETROOTS FOUNDATION TO SUPPORT THE 2017 4741 CENTRAL STREET, SUITE 377 NETROOTS NATION TRAINING 20-8672843 501 (C) (3) KANSAS CITY, MO 64112 10,000. 0. CASH VALUE PROGRAM. TO CONDUCT RESEARCH ON NEW AMERICA 740 15TH STREET, NW SUITE 900 PUBLIC INTEREST 52-2096845 501 (C) (3) 20,700. TECHNOLOGY. WASHINGTON, DC 20005 0. CASH VALUE NORTHWESTERN UNIVERSITY SPONSORSHIP OF 1800 SHERIDAN ROAD COMPUTATION & JOURNALISM EVANSTON, IL 60208 36-2167817 170 (C) (1) 10,000. 2017 SYMPOSIUM. 0. CASH VALUE ONLINE NEWS ASSOCIATION 1111 NORTH CAPITOL ST NE, 6TH FLR 51-0389878 501 (C) (3) WASHINGTON, DC 20002 12,500. 0. CASH VALUE SPONSORSHIP OF ONA17. TO ENGAGE STUDENTS IN VR PENPAL SCHOOLS 411 WEST MONROE STREET FIELD TRIPS TO LEARN 03-0609146 501 (C) (3) AUSTIN, TX 78704 40,000. 0. CASH VALUE ABOUT THE WORLD. PERSONAL DEMOCRACY MEDIA 118 WEST 22ND STREET, 12TH FLOOR SPONSORSHIP OF PERSONAL 13-3981027 N/A 25,000 0. CASH VALUE DEMOCRACY FORUM 2017. NEW YORK, NY 10011 PROVIDENCE PUBLIC LIBRARY TO PROVIDE DIGITAL 150 EMPIRE STREET LITERACY TRAINING TO PROVIDENCE, RI 02903 05-0262713 501 (C) (3) 14,000. 0. CASH VALUE LIBRARIANS.

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 (c) IRC section (f) Method of (b) EIN (e) Amount of (h) Purpose of grant (d) Amount of (a) Description of organization or government , if applicable cash grant non-cash valuation non-cash assistance or assistance assistance (book, FMV, appraisal, other) RIVER CITY YOUTH FOUNDATION PO BOX 17923 TO PROVIDE STEM EDUCATION AUSTIN, TX 78760 74-2270453 501 (C) (3) 15,000. 0. CASH VALUE TO LOW-INCOME STUDENTS, SOFTWARE FREEDOM CONSERVANCY 137 MONTAGUE STREET, SUITE 380 BROOKLYN, NY 11201 41-2203632 501 (C) (3) 10,000. 0. CASH VALUE GENERAL SUPPORT. STEM FROM DANCE TO PROVIDE STEM EDUCATION 590 FLATBUSH AVENUE, APT 10 K TO LOW-INCOME, MINORITY 46-1793936 501 (C) (3) BROOKLYN, NY 11225 12,200. 0. CASH VALUE GIRLS. STUDIO MINDSTRIDE TO SUPPORT PEER EDUCATION 100 CHEROKEE BOULEVARD, SUITE 3003 FOR YOUTH TO LEARN CODING 81-4026359 N/A 12,000. AND BUILD TOOLS. CHATTANOOGA, TN 37405 0. CASH VALUE TO PILOT A TECH TECH KIDS UNLIMITED INTERNSHIP FOR TEENS WITH AUTISM SPECTRUM DISORDER; 2 METROTECH CENTER, 8TH FLOOR 46-24517<u>47</u>501(C)(3) BROOKLYN, NY 11201 TRAVEL GRANT TO ATTEND 23,960. 0. CASH VALUE TO PILOT THE DIGITAL CITY THE CENTER FOR URBAN PEDAGOGY STUDIES PROGRAM FOR YOUTH 232 THIRD STREET, D201 IN NYC; AND TO PURCHASE 11-3625306 501 (C) (3) RECORDING EQUIPMENT TO BROOKLYN, NY 11215 22,201. 0. CASH VALUE TO USE 4K TECHNOLOGY TO THE ENTERPRISE CENTER STREAM EDUCATIONAL 1100 MARKET STREET, SUITE 500 CONTENT TO CLASSROOMS; 23-2575901 501 (C) (3) CHATTANOOGA, TN 37402 42,000. 0. CASH VALUE AND TO EXPAND ACCESS TO SPONSORSHIP OF 2017 22X20 THE FUND FOR THE CITY OF NEW YORK SUMMIT ; TRAVEL GRANT TO 121 AVENUE OF THE AMERICAS, 6TH FLF ATTEND THE 97TH NCSS NEW YORK, NY 10013 13-2612524 501 (C) (3) 28,500. ANNUAL CONFERENCE; TO 0. CASH VALUE THE KNOWLEDGE HOUSE TO PROVIDE PEER TECH 1231 LAFAYETTE AVENUE EDUCATION TO NYC BRONX, NY 10474 47-2747713 501 (C) (3) 26,000. 0. CASH VALUE STUDENTS.

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 (c) IRC section (d) Amount of (f) Method of (b) EIN (e) Amount of (h) Purpose of grant (a) Description of organization or government , if applicable cash grant non-cash valuation non-cash assistance or assistance assistance (book, FMV, appraisal, other) TO PROVIDE HANDS-ON STEM THE POINT CDC EDUCATION TO NYC YOUTH: 940 GARRISON AVENUE AND TO PROVIDE TECH BRONX, NY 10474 13-3765140 501 (C) (3) 26,000. 0. CASH VALUE RESOURCES/TRAINING IN PR THE UNIVERSITY OF NORTH TEXAS TO STUDY OF BEHAVIOR PO BOX 76203 WOMEN OF COLOR ON NEWS DENTON, TX 76203 23-7232618 170 (C) (1) 15,649. 0. CASH VALUE WEBSITE COMMUNITIES. THEATRE ACTION PROJECT TO DEVELOP VR EXPERIENCES 2921 E. 17TH STREET, BLDG. B, BOX 7 TO ENHANCE YOUTH 95-4710054 501 (C) (3) AUSTIN, TX 78702 5,000. 0. CASH VALUE LEARNING. TOLEDO LUCAS COUNTY PUBLIC TO PROVIDE DIGITAL LLIBRARY - 35 NORTH MICHIGAN LITERACY TRAINING TO 34-1632308 50<u>1 (C) (3)</u> STREET - TOLEDO, OH 43604 10,000. 0. CASH VALUE LIBRARIANS. TRINITY ANIMATION TO DEVELOP A VR ENVIRONMENT FOR MEDICAL 672 SE BAYBERRY LANE KANSAS CITY, MO 64063 43-1801531 N/A 5,000. EDUCATION. 0. CASH VALUE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - 3420 WALNUT STREET, SPONSORSHIP OF DATA SUITE 240 - PHILADELPHIA, PA 19104 23-1352685 501 (C) (3) 20,000. 0. CASH VALUE RESCUE EVENTS AT UPENN. UNIVERSITY OF LOUISIANA AT TO PROVIDE COLLEGE LAFAYETTE - ASHLEY DUGAS, SUITE ORIENTATION TO STUDENTS 307, FG MOUTON HALL - LAFAYETTE, USING A 4K VIDEO STREAM; LA 70504 72-6023836 501 (C) (3) 25,000. 0. CASH VALUE AND TO PROMOTE LEARNING UNIVERSITY OF TEXAS FOUNDATION TO CREATE VR EXPERIENCES РО ВОХ 250 TO INTEREST MIDDLE 74-1587488 170 (C) (1) <u>AUSTIN</u>, TX 78767 5,000. SCHOOLERS IN STEM. 0. CASH VALUE TO USE IOT TO EDUCATE THE URBAN FARMING GUYS 3700 EAST 12TH STREET COMMUNITY ON FOOD SYSTEMS KANSAS CITY, MO 64127 45-4946198 501 (C) (3) 23,000. 0. CASH VALUE AND URBAN FARMS.

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (c) IRC section if applicable (d) Amount of cash grant (f) Method of (g) Description of non-cash assistance (a) Name and address of organization or government (b) EIN (e) Amount of non-cash (h) Purpose of grant or assistance valuation (book, FMV, appraisal, other) assistance VIATOR VR LLC TO DEVELOP A CURRICULUM USING VR FOR LANGUAGE 1102-621 MEMORIAL DRIVE CHATTANOOGA, TN 37415 81-4171923 N/A 15,000. 0. CASH VALUE LEARNING. WILDLIFE CONSERVATION SOCIETY TO PILOT THE DIGITAL CITY STUDIES PROGRAM FOR YOUTH 2300 SOUTHERN BOULEVARD BRONX, NY 10460 13-1740011 501 (C) (3) 19,704. 0. CASH VALUE IN NYC. TO PROVIDE DIGITAL WILLOUGHBY-EASTLAKE PUBLIC LIBRARY 35150 LAKESHORE BOULEVARD LITERACY TRAINING TO 47-3623281 501 (C) (3) 10,000. EASTLAKE, OH 44095 0. CASH VALUE LIBRARIANS. YOUTH POWERED LLC TO CREATE VR FIELD TRIPS 3518 WAYNE AVENUE TO LANDMARKS IMPORTANT TO 47-1428936 N/A KANSAS CITY, MO 64109 19,000. 0. CASH VALUE BLACK HISTORY.

Page 2

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.			T	T	Γ
(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	5	50,000.	0.	CASH VALUE	
FELLOWSHIP STIPENDS	18	705,956.	0.	CASH VALUE	
Part IV Supplemental Information. Provide the information rec	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	l dditional information.	
PART I, LINE 2:					
MOZILLA FOUNDATION MAINTAINS INFOR	MATION ON	GRANTS, I	NCLUDING S	UPPORTING	
DOCUMENTATION SUCH AS GRANT PROPOS.	ALS, SIGN	ED AGREEME	NTS, REPOR	TS FROM	
GRANTEES, ETC. FOR FELLOWSHIP GRA	NTEES GR	ANTS ARE M	IADE PURSUA	.NТ ТО	
·	•				
AGREEMENTS WITH THE FELLOWS AND/OR	HOST INS	TITUTIONS	TO ENSURE	THAT THE	
FELLOWSHIP RECIPIENTS WILL BE PURS	UING A DE	FINED RESE	ARCH PROGR	AM THAT WILL	
AID THE DEVELOPMENT OF THE FELLOWS	HIP RECIP	IENT AS WE	LL AS ADVA	NCING	
RESEARCH IN AREAS MATCHING MOZILLA	FOUNDATI	ON'S EXEMP	T PURPOSES	. ALTHOUGH	
MOST OF OUR OTHER GRANTS ARE TO IR					
MOSI OF OUR OIDER GRANIS ARE TO IR	O-VECOGNT	TED SOT(C)	(2) OKGANI	THITOMO, WE	

Schedule I (Form 990) MOZIL
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: CAPITAL OF TEXAS MEDIA FOUNDATION (H) PURPOSE OF GRANT OR ASSISTANCE: TO CREATE AN ONLINE MOCK CITY COUNCIL FOR STUDENTS TO LEARN CIVICS; AND TO DEVELOP ACTIVITIES AND APPS TO FOSTER WEB LITERACY LEARNING.

NAME OF ORGANIZATION OR GOVERNMENT:

CIVICUS WORLD ALLIANCE FOR PARTICIPATION INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE DIGITAL SKILLS TRAINING TO CIVIL SOCIETY ORGS; AND FOR CAMPAIGNCON PARTICIPATION FEE FOR NON PROFIT LEADERS.

NAME OF ORGANIZATION OR GOVERNMENT: EYEBEAM ATELIER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TRAVEL GRANT FOR STAFF MEMBER AND STUDENT TO ATTEND MOZFEST; AND TO PURCHASE EQUIPMENT FOR EYEBEAM'S DIGITAL LEARNING PROGRAM STUDIO.

NAME OF ORGANIZATION OR GOVERNMENT: GLOBAL ACTION PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PILOT A MODEL FOR YOUTH-PRODUCED RAPID RESPONSE MEDIA IN NYC; AND TO HELP INCREASE FUNDRAISING CAPACITY AND DIVERSIFY FUNDING STREAMS.

Schedule I (Form 990)

732291 04-01-17

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE TECHNOLOGY EDUCATION TRAINING TO NYC TEACHERS; TO SUPPORT PROFESSIONAL DEVELOPMENT ACTIVITIES

NAME OF ORGANIZATION OR GOVERNMENT: TECH KIDS UNLIMITED

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PILOT A TECH INTERNSHIP FOR TEENS WITH AUTISM SPECTRUM DISORDER; TRAVEL GRANT TO ATTEND 2017 CROSSROADS STEM CONFERENCE.

NAME OF ORGANIZATION OR GOVERNMENT: THE CENTER FOR URBAN PEDAGOGY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PILOT THE DIGITAL CITY STUDIES

PROGRAM FOR YOUTH IN NYC; AND TO PURCHASE RECORDING EQUIPMENT TO EXPAND

732291 04-01-17

12041114 149058 MOZILLA

2017.05000 MOZILLA FOUNDATION

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732291 04-01-17

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

MOZILLA FOUNDATION

Employer identification number 20-0097189

Pa	Great Questions Regarding Compensation			
			Yes	No
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.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account 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	1b		
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?	2		
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.			
	X Compensation committee X Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	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:			
	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		X
b	Any related organization?	6b		X
	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	7		X
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	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) MITCHELL BAKER, CHAIR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	450,000.	180,000.	1,664,667.	24,000.	27,359.	2,346,026.	0.
(2) MARK SURMAN	(i)	235,829.	0.	0.	16,218.	12,498.	264,545.	0.
EXECUTIVE DIRECTOR/PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JIM COOK, TREAS (THRU 5/31/17)	(i)	0.	0.	0.	0.	0.	0.	0.
PAID ONLY BY RELATED FOR-PROFIT	(ii)	401,250.	160,500.	660,500.	24,000.	29,909.	1,276,159.	0.
(4) ANGELA PLOHMAN	(i)	163,862.	0.	0.	11,204.	10,875.	185,941.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CHRISTOPHER LAWRENCE	(i)	206,000.	0.	0.	14,894.	74,431.	295,325.	0.
VP LEADERSHIP NETWORK	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ASHLEY BOYD (FROM 01/03/17)	(i)	179,511.	0.	0.	12,566.	39,240.	231,317.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MICHAEL AUKLAND	(i)	126,412.	0.	0.	9,050.	45,893.	181,355.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) AN-ME CHUNG	(i)	154,369.	0.	0.	10,937.	60,082.	225,388.	0.
SR. FELLOW, INTERNET HEALTH ISSUES	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) HIRAM PAUL JOHNSON	(i)	142,941.	0.	0.	10,242.	60,068.	213,251.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	109,232.	0.	0.	8,113.	71,337.	188,682.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) WILLIAM EASTON	(i)	117,271.	0.	0.	7,975.	59,163.	184,409.	0.
LEAD, FUND & EMAIL STRAT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2017		FOUNDATION	20-0097189	Page 3
Part III Supplemental Informati				
Provide the information, explanatio	n, or descriptions	equired for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and fo	or Part II. Also complete this part for any additional information.	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047 2017 Open to Public Inspection

MOZILLA1

Department of the Treasury ternal Revenue Service 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 2016, MOZILLA CONTINUES TO PROVIDE SUPPORT TO A SET OF COMMUNITIES DEVELOPING OPEN-SOURCE SOFTWARE TO ADDRESS KEY INTERNET HEALTH ISSUES SUCH AS DIGITAL INCLUSION AND EDUCATION. THE PRIMARY ACTIVITY IN THIS AREA DURING 2017 WAS SUPPORT FOR THE CORAL PROJECT, A COMMUNITY OF DEVELOPERS CREATING TOOLS FOR MORE CIVIC ONLINE DIALOGUE. INCLUDING GRANTS OF \$ 15,649. EXPENSES \$ 1,733,242. REVENUE \$ 6,750. 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, CHINA, AUSTRALIA, TAIWAN, JAPAN FORM 990, PART VI, SECTION A, LINE 4: THE FOUNDATION AMENDED ITS BYLAWS TO CLARIFY THAT ITS TREASURER DOES NOT HAVE A DUTY TO MANAGE OR OVERSEE THE FINANCIAL AFFAIRS OF MOZILLA LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017) 732211 09-07-17

MOZILLA FOUNDATION

Employer identification number 20-0097189

CORPORATION, AND IS ALLOWED TO RELY ON INFORMATION PROVIDED BY MOZILLA CORPORATION'S MANAGEMENT ABOUT MOZILLA CORPORATION'S FINANCIAL AFFAIRS.

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. SEVERAL 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:

732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

MOZILLA FOUNDATION

Employer identification number 20-0097189

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 COMMITTEE 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, DC, HI, NM

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:

BENEFIT (PROVISION) FOR INCOME TAXES 60,000.

TANGIBLE PROPERTY REGULATIONS:

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

732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization MOZILLA FOUNDATION	Employer identification number 20-0097189
TAXPAYER IS MAKING THE DE MINIMIS SAFE HARBOR ELECTION UND	ER TREAS.
REG. 1.263(A)-1(F) FOR ALL ELIGIBLE AMOUNTS PAID OR INCURR	ED DURING THE
TAXABLE YEAR.	
SECTION 1.263(A)-3(N) CAPITALIZATION ELECTION:	
TAXPAYER HEREBY ELECTS TO CAPITALIZE REPAIR AND MAINTENANCE	E 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.	

732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

OMB No. 1545-0047 2017

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection Employer identification number 20-0097189

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	r Total inco	eme End-of-yea		(f) Direct controlling entity		
Identification of Related Tax-Exempt Organiorganizations during the tax year.	zations. Complete if the organization	on answered "Yes" on Form 990	, Part IV, line 34, t	pecause it had one	e or more	related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section		(f) ct controlling entity	cont	g) 512(b)(13) tro ll ed tity?
				501(c)(3))			Yes	No
	+		<u> </u>		1		_	\vdash

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

MOZILLA FOUNDATION

Schedule R (Form 990) 2017

732161 09-11-17 LHA

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.

- · J - · · · · · · · · · · · · · · · ·		. ,										
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	ո)	(i)	(j	j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Disprop alloca		Code V-UBI amount in box 20 of Schedule	mana	ral or laging	Percentage ownership
		foreign country)		sections 512-514)		assets	Yes	No	K-1 (Form 1065)			
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Part IV Identification of Related Organizations treated as a se	ganizations Taxable a	s a Corpo	oration or Trust. Co	emplete if the organizat	ion answered "Yes	s" on Form 990, Pa	art IV, I	ine 34	, because it had c	ne or	r moi	re related

(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	centage Section 512(b)(controll entity	
MOZILLA CORPORATION - 20-3226186		**						Yes	No
331 EAST EVELYN AVENUE	1		MOZILLA						
MOUNTAIN VIEW, CA 94041	INTERNET SERVICES	CA	FOUNDATION	C CORP	540,076,115.	569,032,234.	100%	Х	

Schedule R (Form 990) 2017 732162 09-11-17 63

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?						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X				
	Gift, grant, or capital contribution to related organization(s)	1b		Х			
С	Gift, grant, or capital contribution from related organization(s)	1c		Х			
	Loans or loan guarantees to or for related organization(s)	1d		Х			
е	Loans or loan guarantees by related organization(s)	1e		Х			
	l l						
f	Dividends from related organization(s)	1f	Х				
g	Sale of assets to related organization(s)	1g		Х			
	Purchase of assets from related organization(s)	1h		Х			
i	Exchange of assets with related organization(s)	1i		Х			
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х			
	l la company de la company de la company de la company de la company de la company de la company de la company						
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х			
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х			
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Х				
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х				
	Sharing of paid employees with related organization(s)	10		Х			
	l l						
р	Reimbursement paid to related organization(s) for expenses	1p		Х			
q	Reimbursement paid by related organization(s) for expenses	1q		Х			
r	Other transfer of cash or property to related organization(s)	1r		Х			
s	Other transfer of cash or property from related organization(s)	1s		Х			
2	If the answer to any of the above is "Yes," see the instructions for information on who must 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	10,073,509.	TRADEMARK LICENSE AGREEMENT
(2) MOZILLA CORPORATION	М	128,040.	SERVICE AGREEMENT
(3) MOZILLA CORPORATION	N	412,386.	SERVICE AGREEMENT
(4) MOZILLA CORPORATION	F	91,198.	CASH VALUE
<u>(5)</u>			
(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)	(b)	(c)	(d)	(e) Are a) ill	(f)	(g)		h)	(i)	(j)		(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)		partners 501(c) orgs.	sec. (3) ?	Share of total income	Share of end-of-year assets	alloca	ropor- nate itions?	of Schedule K-1	Genera manag partn	al or P	ercentage ownership
		,,,	00010110 0 12 0 1 1)	res	NO			res	NO	(1011111000)	res	NO	
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