### \*\* PUBLIC DISCLOSURE COPY \*\*

Form 990 (Rev. January 2020) Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047 Open to Public Inspection

A	For th	e 2019 calendar year, or tax year beginning and	ending		
В	Check if applicat	C Name of organization		D Employer identifi	cation number
Г	Addr	MOZILLA FOUNDATION		200	
	Name	Doing business as		20-00971	89
	Initial		Room/suite	E Telephone numbe	
	Final				3-0800
_	termi ated Amer		20	G Gross receipts \$	28,388,184.
F	returr	MOUNTAIN VIEW, CA 94041		H(a) Is this a group re	
	Appli tion pend	F Name and address of principal officer: MARK SURMAN			?Yes X No
	Fav. av	" SAME AS C ABOVE empt status:   X 501(c)(3)	or 527	H(b) Are all subordinates in	
		empt status: X 501(c)(3)	or 527	H(c) Group exemption	list. (see instructions)
		forganization: X Corporation Trust Association Other	I Vear		M State of legal domicile: CA
	art I	Summary	L   teal (	or formation. 2005	VI State of legal definione.
	1	Briefly describe the organization's mission or most significant activities: IMPRO	OVE AN	D PROTECT T	HE INTERNET
Activities & Governance		AS A PUBLIC RESOURCE OPEN AND ACCESSIBLE			
naı	2	Check this box  if the organization discontinued its operations or dispose			sets.
ove	3			3	6
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			5
es &	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	48
Νţ	6	Total number of volunteers (estimate if necessary)		6	10000
Act				7а	462.
_	b	Net unrelated business taxable income from Form 990-T, line 39		7b	0.
	8	Contributions and arrate (Dott) (III For All)		Prior Year 13,991,926.	Current Year 11,713,240.
ne	9	Contributions and grants (Part VIII, line 1h)		13,148,125.	15,930,548.
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		390,654.	667,888.
Re	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,037.	76,508.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		27,531,742.	28,388,184.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		5,440,182.	5,345,140.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ın.	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		10,613,138.	9,420,793.
ıse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		4,673.	10,249.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 1,668,19	97.		
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		7,218,279.	7,113,604.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		23,276,272.	21,889,786.
	19	Revenue less expenses. Subtract line 18 from line 12		4,255,470.	6,498,398.
Sor				ginning of Current Year	End of Year
sset	20	Total assets (Part X, line 16)		46,429,229.	55,587,834.
Net Assets or	21	Total liabilities (Part X, line 26)		2,588,395. 43,840,834.	2,176,198.
	rt II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		45,040,034.	53,411,636.
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nts, and to the hest of my	knowledge and helief it is
true	corre	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	( Allowidage und belief, it is
ti uo,	COITO			1)	13 2020
Sigr	,	Signature of officer		Date	
Her		MARK SURMAN, EXECUTIVE DIRECTOR			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check [	PTIN
Paid		MIKE SCHLECT Mike Schle	et	11/12/2020 if self-emplo	
Prep		Firm's name DELOITTE TAX LLP		Firm's EIN ▶	86-1065772
Use	Only	Firm's address 555 MISSION STREET			
		SAN FRANCISCO, CA 94105		Phone no. (4	15) 783-4000
		S discuss this return with the preparer shown above? (see instructions)			X Yes No
9320	01 01-2	LHA For Paperwork Reduction Act Notice, see the separate instructio	ns.		Form <b>990</b> (2019)

### Form **8868**

(Rev. January 2020)

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

Department of the Treasury Internal Revenue Service ➤ File a separate application for each return.

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

OMB No. 1545-0047

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

Automa	ntic 6-Month Extension of Time. Only subm	nit origin	al (no conies needed)			
	ations required to file an income tax return other than Fo		,	s, REMICs	s, and trusts	
must use	Form 7004 to request an extension of time to file income	e tax retur	ns.			
Type or	r identification nu	ımber (TIN)				
print	MOZILIA HOINDAHION				20 0007	100
File by the	MOZILLA FOUNDATION  Number, street, and room or suite no. If a P.O. box, so		20-0097	199		
due date for filing your return, See	331 E. EVELYN AVENUE					
instructions.	City, town or post office, state, and ZIP code. For a form MOUNTAIN VIEW, CA 94041	oreign add	ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	e a separa	te application for each return)			0 1
Application	on	Return	Application			Return
ls For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	-PF	04	Form 5227			10
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)  ANGELA PLOHMAN	06	Form 8870			12
Teleph  If the c	oks are in the care of ▶ 331 E. EVELYN A one No. ▶ (650)903-0800 organization does not have an office or place of business s for a Group Return, enter the organization's four digit of	in the Un	Fax No. ▶ited States, check this box			▶ □
oox ► [	. If it is for part of the group, check this box		ch a list with the names and TINs of			
the	quest an automatic 6-month extension of time until organization named above. The extension is for the orga calendar year 2019 or tax year beginning			the exem	npt organization i	return for
2 If th	e tax year entered in line 1 is for less than 12 months, cl Change in accounting period	heck reaso	on: Initial return	Final retur	'n	
3a If th	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less			
any	nonrefundable credits. See instructions.			3a	\$	0.
<b>b</b> If th	is application is for Forms 990 PF, 990 T, 4720, or 6069					
esti	mated tax payments made. Include any prior year overp	ayment all	owed as a credit.	3b	\$	0.
c Bal	ance due. Subtract line 3b from line 3a. Include your pa	yment wit	h this form, if required, by			
usir	ng EFTPS (Electronic Federal Tax Payment System). See	instructio	ns.	3с	\$	0.
Caution: instruction	If you are going to make an electronic funds withdrawalns.	(direct del	oit) with this Form 8868, see Form 84	153-EO an	d Form 8879-EO	for payment
LHA F	or Privacy Act and Paperwork Reduction Act Notice,	see instru	ictions.		Form <b>8868</b>	(Rev. 1-2020)

923841 12-30-19

18010917 149058 MOZILLA

932002 01-20-20

(Expenses \$

17,018,351.

851,346. including grants of \$

) (Revenue \$

Form 990 (2019)

31,995.)

Total program service expenses

# Form 990 (2019) MOZILLA FOUNDATION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	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			
	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	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? 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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			l
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? 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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			٠,,
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		37	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	37
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	77	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		3,7	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		v	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		v	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.		_ v
40	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,"	4.		_ v
00-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		^
	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	24	х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		

932003 01-20-20

# Form 990 (2019) MOZILLA FOUNDATION Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees?   If "Yes," complete			
	Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
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			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> X</u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			. v
00	"Yes," complete Schedule L, Part IV	28c 29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
-	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
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	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
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	
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		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		٦,	
Pai	Note: All Form 990 filers are required to complete Schedule 0  **T V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
ı aı				7
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 50		168	NO
b	Enter the number reported in box 3 of 1 of 11 ross. Enter 40 in 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	
932004	01-20-20		990	(2019)

	990 (2019) MOZILLA FOUNDATION 20-0097	189	Р	age 5
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
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 48			
b	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?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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	X	
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
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	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		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	37 /	X
g	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?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?  N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
. b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  N/A	40		
а		13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
a	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]  Did the executation receive any payments for indeer temping continue during the tay year?	44-		Х
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Vos " hos it filed a Form 720 to report these payments? (files a very leasting as 20 hours of 20 hours.)	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		х
	excess parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.	15		
16		16		х
10	If "Yes," complete Form 4720, Schedule O.	10		
	ii 100, complete i onii 4720, conceute o.	Form	990	(2019)

14231112 149058 MOZILLA

Form 990 (2019) MOZILLA FOUNDATION 20-0097189 Pag
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 20-0097189 Page **6** 

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.	
Check if Schedule O contains a response or note to any line in this Part VI	X
Section A. Governing Body and Management	

					V	No
10	Enter the number of voting members of the governing body at the end of the tax year	1a	1	6	Yes	NO
ıa	If there are material differences in voting rights among members of the governing body, or if the governing	Id		$\dashv$		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b		5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	_	•	<del>-</del>		
2		•	•	2		х
3	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the					25
3			•	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form		ne filad?			X
5	Did the organization become aware during the year of a significant diversion of the organization's as					X
6	Did the organization have members or stockholders?			6		X
	Did the organization have members, stockholders, or other persons who had the power to elect or a					
74	more members of the governing body?			7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
-	persons other than the governing body?			7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye			1.5		
а	The governing body?			8a	х	
b	Each committee with authority to act on behalf of the governing body?			8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			- 55		
·	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	Code )			
	(This double by the mornant about policies not required by the mornant	Oronac	0000./		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such c					
				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo			11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	-	_			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris				Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	Yes," c	describe			
	in Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approv					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nizatio	n's			
	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed $ ightharpoonup$ AL, AR, CA, CT, I					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	and 990	O-T (Section 501(c)(	3)s on <b>l</b> y)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, c	onflict	of interest policy, a	nd finan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records			
	ANGELA PLOHMAN - (650)903-0800					
	331 E. EVELYN AVENUE, MOUNTAIN VIEW, CA 94041  01-20-20 SEE SCHEDULE O FOR FULL LIST OF STATES				000	(0040)
932006	ol-20-20 SEE SCHEDULE O FOR FULL LIST OF STATES			Forn	990	(2019)
	Ü					

### Form 990 (2019) 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. See instructions for the order in which to list the persons above.

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average		not c		more	than o		Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week	-	Cer di	uau		n/ii uS	100)	from	from related	other
	(list any hours for	Individual trustee or director						the	organizations	compensation from the
	related	or d	ee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	ruste	trus		9	ubeu		(***-2/1099-101130)		and related
	below	dual to	rtiona	L	loldu	st cor	L.			organizations
	line)	Individ	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			or garneanorno
(1) MITCHELL BAKER, CHAIR	1.00									
PAID ONLY BY RELATED FOR-PROFIT		X						0.	3,046,617.	27,560
(2) BRIAN BEHLENDORFF	1.00									
DIRECTOR	0.00	Х						0.	0.	0
(3) BOB LISBONNE (THRU SEPT 2019)	1.00									
DIRECTOR	0.00	Х						0.	0.	0
(4) RONALDO LEMOS	1.00									
DIRECTOR	0.00	X						0.	0.	0
(5) HELEN TURVEY	1.00							_	_	_
DIRECTOR	0.00	X						0.	0.	0
(6) MOHAMED NANABHAY	1.00									_
DIRECTOR	0.00	Х						0.	0.	0
(7) NICOLE WONG	1.00									
DIRECTOR		Х					_	0.	0.	0
(8) MARK SURMAN	40.00	ł		٦,				206 000	0	25 267
EXECUTIVE DIRECTOR/PRESIDENT (9) ASHLEY BOYD	0.00			Х				286,990.	0.	25,267
VP, ADVOCACY AND ENGAGEMENT	40.00	1			х			226 770	0.	62 102
(10) ANGELA PLOHMAN	40.00				^			236,779.	0.	63,483
EXECUTIVE VP. SECRETARY, TRESURER	0.00	1		х				208,415.	0.	17,137
(11) JUAN BARAJAS	40.00							200, 113.	0.	17,137
DIRECTOR, FUNDRAISING	0.00	1				x		167,220.	0.	47,345
(12) STEPHANIE WRIGHT	40.00					<u> </u>		207,2201		1,,010
SENIOR PROGRAM MANAGER	0.00	1				x		117,055.	0.	74,898
(13) MATTHEW WILLSE	40.00							,		,
DIRECTOR OF PRODUCT AND DESIGN	0.00	1				х		113,991.	0.	77,314
(14) WILLIAM EASTON	40.00									-
LEAD, FUNDRAISING & EMAIL STRATEGY	0.00	L			L	Х	L	107,791.	0.	77,573
(15) MELISSA HUERTA	40.00									
SENIOR PROGRAM OFFICER	0.00					Х		136,071.	0.	45,629
										Form <b>990</b> (201

932007 01-20-20 Form **990** (2019)

Par	t VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	es,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
	(A) Name and title	(B) Average hours per week	(do box,	not cl	Posi heck r	ition more son is		ne an	(D) Reportable compensation from	(E) Reportable compensatio	on	an	(F) stimate nount other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fr org and	pensa om th anizat d relat anizati	e ion ed
	Subtotal							>	1,374,312.	3,046,63	17.	45	6,2	06.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A							1,374,312.	3,046,63		45	6,2	
2	Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove			•				<u> </u>	•••
	compensation from the organization													35
											Г		Yes	No
3	Did the organization list any <b>former</b> officer,			•						•				Х
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su								ner compensation from t			3		Λ
	and related organizations greater than \$150	•								•		4	Х	
5	Did any person listed on line 1a receive or a	ccrue comper	satio	on fr	om a	any	unre	late	ed organization or individ	dual for services				
	rendered to the organization? If "Yes." com	plete Schedule	J fo	or su	ıch r	ers	on .				<u></u>	5		Х
<u>Sec</u>	tion B. Independent Contractors  Complete this table for your five highest co	mnonceted ind	lono	adar	nt 00	ntro	anto:	o +h	and received mare than	1100 000 of com		on fro		
•	the organization. Report compensation for										Jensan	OH IIC	)111	
	(A)				.5				(B)			(0		
	Name and business	address						_	Description of s	ervices	Cc	ompe	nsatio	n
	<i>I</i> ORK L LOGUE AVENUE, MOUNTAI	N VIEW	С	A	94	04	3		CONTRACT SER	VICES		73	5,2	65.
	ZILLA CORPORATION, 331							f	DEIN				<del>- ,</del>	<u> </u>

(A)	(B)	(C)
Name and business address	Description of services	Compensation
UPWORK		
441 LOGUE AVENUE, MOUNTAIN VIEW, CA 94043	CONTRACT SERVICES	735,265.
MOZILLA CORPORATION, 331 EAST EVELYN		_
AVENUE, MOUNTAIN VIEW, CA 94041	SERVICE AGREEMENT	650,043.
TATE & TRYON		
2021 L STREET NW #400, WASHINGTON, DC 20036	ACCOUNTING SERVICES	296,014.
INVERSE INC, 407-7000 PARK AVENUE,		
MONTREAL, QUEBEC, CANADA H3N 1X1	CONTRACT SERVICES	187,843.
COACHING STUDIO LEADERSHIP SOLUTIONS INC,	PROFESSIONAL	
720-999 W. BROADWAY, BC, VANCOUVER, CANADA	SERVICES	157,641.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization   10		
-		

Form **990** (2019)

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

(A) (B) (C) Revenue excluded from tax under sections 512 - 514 Unrelated Related or exempt Total revenue function revenue business revenue 1 a Federated campaigns **b** Membership dues ..... 1b c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 11,713,240. similar amounts not included above ... g Noncash contributions included in lines 1a-1f 563. 1g \$ 11,713,240 h Total. Add lines 1a-1f  $\triangleright$ Business Code 2 a LICENSING ROYALTIES 900099 15,858,258. 15,857,796. Program Service b SPONSORSHIPS 900099 30,191. 30,191, c MOZFEST & OTHER EVENTS 900099 27,343. 27,343. d ADVISORY & SPEAKER FEES 14,756. 900099 14,756. f All other program service revenue ... 15,930,548. Total. Add lines 2a-2f Investment income (including dividends, interest, and 659,885 659,885. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties ..... (i) Real (ii) Personal 6 a Gross rents 6a b Less: rental expenses ... 6b c Rental income or (loss) 6с d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of assets other than inventory 8,003. 7a **b** Less: cost or other basis and sales expenses ..... 0. 8,003. c Gain or (loss) 7c 8.003. 8.003. d Net gain or (loss)  ${\bf 8}\ {\bf a}\ \ {\rm Gross}$  income from fundraising events (not including \$ \_\_\_ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses 8b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold ...... 10b c Net income or (loss) from sales of inventory Business Code 11 a OTHER INCOME 900099 76,508. 31 995 44 513. b

Total revenue. See instructions

462.

d All other revenue

Total. Add lines 11a-11d

104,285.

76,508.

28,388,184.

Form 990 (2019) MOZILLA FOUNDATION
Part IX Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).								
	Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses				
1	Grants and other assistance to domestic organizations		·		·				
	and domestic governments. See Part IV, line 21	3,148,056.	3,148,056.						
2	Grants and other assistance to domestic								
	individuals. See Part IV, line 22	837,526.	837,526.						
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign								
	individuals. See Part IV, lines 15 and 16	1,359,558.	1,359,558.						
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
	trustees, and key employees	1,890,505.	928,931.	391,577.	569,997.				
6	Compensation not included above to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages	5,529,104.	4,462,682.	742,983.	323,439.				
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)	390,433.	309,495.	56,431.	24,507.				
9	Other employee benefits	1,108,421.	775,931.	140,443.	192,047.				
10	Payroll taxes	502,330.	372,581.	75,144.	54,605.				
11	Fees for services (nonemployees):								
а	Management	2,857,871.	2,133,344.	577,123.	147,404.				
b	Legal	227,861.	10,478.	207,394.	9,989.				
С	Accounting	492,907.		492,907.					
d	Lobbying	1,939.	1,939.						
е	Professional fundraising services. See Part IV, line 17	10,249.			10,249.				
f	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25,								
	column (A) amount, list line 11g expenses on Sch 0.)								
12	Advertising and promotion	1.50 1.00							
13	Office expenses	162,482.	97,587.	46,516.	18,379.				
14	Information technology	259,295.	167,001.	48,888.	43,406.				
15	Royalties	000 004	225 242	40 440	20 552				
16	Occupancy	280,834.	206,913.	43,148.	30,773.				
17	Travel	1,753,519.	1,404,562.	268,734.	80,223.				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials	0.40 600	702 006	04 506	22 216				
19	Conferences, conventions, and meetings	840,698.	723,886.	94,596.	22,216.				
20	Interest								
21	Payments to affiliates	8,414.	6,517.	1 100	788.				
22	Depreciation, depletion, and amortization	15,246.	1,766.	1,109. 13,480.	/00•				
23	Insurance Other evenesses Itemize evenesses not sovered	13,240.	1,/00.	13,400.					
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
а	COMM. AND MARKETING	197,315.	58,455.	380.	138,480.				
h	FEDERAL/STATE TAX EXP	15,223.	11,143.	2,385.	1,695.				
c		,	,_		_,				
d									
e	All other expenses								
25	Total functional expenses. Add lines 1 through 24e	21,889,786.	17,018,351.	3,203,238.	1,668,197.				
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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	990 (2			20-	0097189 Page <b>1</b>
Pai	rt X	Balance Sheet  Check if Schedule O contains a response or note to any line in this Part X			
		Silver in Service and Community and Service and Service and All Service and All Service and Service an	(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	1,966,794.	1	122,242
	2	Savings and temporary cash investments	6,754,321.	2	6,894,207
	3	Pledges and grants receivable, net	1,297,937.	3	2,224,905
	4	Accounts receivable, net	13,147,955.	4	17,545,398
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ä	9	Prepaid expenses and deferred charges	40,817.	9	216,890
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 272, 958.			
	b	Less: accumulated depreciation 10b 272,801.	8,734.	10c	157
	11	Investments - publicly traded securities	20,505,880.	11	23,922,488
	12	Investments - other securities. See Part IV, line 11	1,706,781.	12	1,959,95
	13	Investments - program-related. See Part IV, line 11	1,000,010.	13	2,577,301
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	124,289
	16	Total assets. Add lines 1 through 15 (must equal line 33)	46,429,229.	16	55,587,834
	17	Accounts payable and accrued expenses	2,588,395.	17	2,000,693
	18	Grants payable		18	
	19	Deferred revenue		19	175,505
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
ge		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0 500 305	25	0 156 106
	26	Total liabilities. Add lines 17 through 25	2,588,395.	26	2,176,198
'n		Organizations that follow FASB ASC 958, check here ► X			
čě		and complete lines 27, 28, 32, and 33.	25 050 000		45 450 634
<u>a</u>	27	Net assets without donor restrictions	37,070,992.	27	47,459,634
ĕ	28	Net assets with donor restrictions	6,769,842.	28	5,952,002
Ĕ		Organizations that do not follow FASB ASC 958, check here			
Ĕ		and complete lines 29 through 33.			
ts c	29	Capital stock or trust principal, or current funds		29	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	42 040 024	31	F2 411 624
Š	32	Total net assets or fund balances	43,840,834.	32	53,411,636
	33	Total liabilities and net assets/fund balances	46,429,229.	33	55,587,834

### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

Inspection

Name of the organization

Employer identification number 20-0097189

			LLA FOUNDA'						0-0097189
Par	t I	Reason for Public (	Charity Status 🖟	All organizations must co	mplete th	is part.) Se	e instructions.		
he o	gani	zation is not a private found	ation because it is: (F	or lines 1 through 12, c	neck only	one box.)			
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in secti	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	1 990 or 99	90-EZ).)			
з [		A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).		
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	lege or university owned	or operat	ed by a go	vernmental un	it describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	ental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that norma	-					e general i	oublic described in
		section 170(b)(1)(A)(vi). (C	•		Ü				
8		A community trust describe		1)(A)(vi). (Complete Par	: II.)				
9		An agricultural research ord				ed in coniu	ınction with a I	and-grant	college
		or university or a non-land-g	•	, , , , ,		•		•	•
		university:	,	,		, ,	,	J	
10 T		An organization that norma	Ilv receives: (1) more	than 33 1/3% of its sup	ort from o	contributio	ns. membersh	ip fees. an	d gross receipts from
		activities related to its exem	, , ,	• •			•		•
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the ora	anization a	ifter June 30, 1975.
		See section 509(a)(2). (Cor		( ,					
11 [		An organization organized a		velv to test for public sa	etv. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to car	rv out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section :	509(a)(2)	See section 5	09(a)(3). (	Check the box in
		lines 12a through 12d that	-	, ,, ,					
а		Type I. A supporting orga	anization operated, si	upervised, or controlled	by its supr	oorted org	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to rec	ularly appoint or elect a	majority o	of the direc	tors or trustee	s of the su	pporting
		organization. You must o							•
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organization	(s), by hav	ring
		control or management o	f the supporting orga	nization vested in the sa	ame perso	ns that co	ntrol or manag	e the supr	ported
		organization(s). You mus			•		9		
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionall	y integrate	ed with,
		its supported organization	n(s) (see instructions)	You must complete I	Part IV, Se	ctions A,	D, and E.	-	
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	ith its support	ed organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and	an attentiv	/eness
		requirement (see instructi	ions). You must con	plete Part IV, Sections	A and D,	and Part	v.		
е		Check this box if the orga	anization received a v	vritten 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	Ente	r the number of supported o	organizations						
g		ide the following information			(iv) In the error	anization listed			
	(i	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ing document?	(v) Amount of support (see in:		(vi) Amount of other support (see instructions)
		organization		above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)
otal									
IIA F	n	ana amin'amin' Dia dia akiana Alak Ni							

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# Schedule A (Form 990 or 990-EZ) 2019 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) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	12429238.	12455200.	9913657.	13991926.	11713240.	60503261.
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	12429238.	12455200.	9913657.	13991926.	11713240.	60503261.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						14522179.
6	Public support. Subtract line 5 from line 4.						45981082.
	tion B. Total Support	•			•	•	
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	12429238.	12455200.	9913657.	13991926.	11713240.	60503261.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	445,798.	353,181.	458,546.	390,654.	659,885.	2308064.
9	Net income from unrelated business	,	,	•	,	,	
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	2,533.	11,891.	92,628.	1,037.	44,513.	152,602.
11	Total support. Add lines 7 through 10	,		,	,	,	62963927.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First five years. If the Form 990 is for	•					
	organization, check this box and stop	-	,,		,		
Sec	ction C. Computation of Publi		centage				<u> </u>
14	Public support percentage for 2019 (I	ine 6, column (f) di	vided by line 11, co	olumn (f))		14	73.03 %
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	70.95 %
	33 1/3% support test - 2019. If the					ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright$ X
b	33 1/3% support test - 2018. If the	organization did no	t check a box on li				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	_					
	meets the "facts-and-circumstances"					•	
h	10% -facts-and-circumstances test	_					
~	more, and if the organization meets the	-					
	organization meets the "facts-and-circ						
18	Private foundation. If the organization		-				=
	The second secon			.,		dulo A (Form 990	

932022 09-25-19

# Schedule A (Form 990 or 990-EZ) 2019 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	ciow, picase comp	note i art ii.,				
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and		, ,	. ,	, ,		,,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or 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						
	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
_	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	(4) 2010	(6) 2010	(0) 2017	(4) 2010	(6) 2010	(i) rotai
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a section	n 501(c)(3) organiza	ation,
	check this box and stop here						<b>&gt;</b>
	ction C. Computation of Publi		<del>_</del>				
	Public support percentage for 2019 (I		•	column (f))		15	%
16	Public support percentage from 2018					16	%
_	ction D. Computation of Inves			40 (6)		47	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from					18 2 1/3% and line 1	7 is not
198	33 1/3% support tests - 2019. If the	-					
L	more than 33 1/3%, check this box ar	-					
r	33 1/3% support tests - 2018. If the line 18 is not more than 33 1/3%, che	•					
20	Private foundation. If the organization						
	23 09-25-19	TI GIG HOL CHECK A	557 OH III E 14, 19	a, or rob, crieck ti		edule A (Form 990	or 990-F7\ 2010
5020	.0 00 20 10		4 -		3011	Caule A (1 OI III 330	330-LZ) 20 13

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	Λ	ΛII	Sunna	rtina	Orga	nizations	
section.	м.	ΑП	Suppl	ar un iq	Orga	mzauons	,

- 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 5с 6 7 8 9a 9b 9с 10a 10b

Schedule A (Form 990 or 990-EZ) 2019

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

932025 09-25-19 Schedule A (Form 990 or 990-EZ) 2019

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3b

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in F	Part VI). See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections 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		
Sect	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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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	ly integrate	ed Type III supporting orga	anization (see
	instructions)	-		•

Schedule A (Form 990 or 990-EZ) 2019

ı aı	Type III Non-runctionally integrated 509	(a)(s) Supporting Orga	(continued)	
Sect	on D - Distributions		·	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	s	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	)	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
_1_	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
_с	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
<u>_i</u>	Carryover from 2014 not applied (see instructions)			
نــــــــــــــــــــــــــــــــــــــ	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

932028 09-25-19 Schedule A (Form 990 or 990-EZ) 2019

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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.

OMB No. 1545-0047

Name of the organization		Employer identification number								
MC	20-0097189									
rganization type (check one):										
Filers of: Section:										
Form 990 or 990-EZ										
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation									
	527 political organization									
Form 990-PF	501(c)(3) exempt private foundation									
	4947(a)(1) nonexempt charitable trust treated as a private foundation									
	501(c)(3) taxable private foundation									
	Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule.</b> Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.									
General Rule										
	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) a 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, r, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amou 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 tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educity 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 <b>General Rule</b> 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	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F. Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fore filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).									

Name of organization

Employer identification number

MOZILLA FOUNDATION

20-0097189

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional contributors.	tional 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		\$1,010,150.	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		\$1,588,820.	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			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$1,100,000.	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
923452 11-06-	-19	Schedule B (Form	990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

MOZILLA FOUNDATION

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
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a)			
No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a)			
No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
	-		

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Name of organization

Employer identification number

MOZILI	LA FOUNDATION		20-0097189
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	) through (e) and the following line e charitable, etc., contributions of \$1,000 o	section 501(c)(7), (8), or (10) that total more than \$1,000 for the entry. For organizations
(a) No. from Part I	Use duplicate copies of Part III if additional  (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of g	gift  Relationship of transferor to transferee
(a) No.			T
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 g	gift  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 g	gift  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 a	aift

923454 11-06-19

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

## 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

	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Em	oloyer identification number
_	MOZILLA	FOUNDATION			20-0097189
Pa	rt I-A Complete if the org	ganization is exempt under	section 501(c) oi	is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa	tures		<b>&gt;</b>	\$
Pa	rt I-B Complete if the org	ganization is exempt under	section 501(c)(3)		
1	Enter the amount of any excise tax	incurred by the organization under	section 4955	<b>&gt;</b>	\$
2	Enter the amount of any excise tax	incurred by organization managers	under section 4955	<b>&gt;</b>	\$
	If the organization incurred a section				
	Was a correction made?				Yes No
	o If "Yes," describe in Part IV.  Int I-C   Complete if the ord	ganization is exempt under	section 501/c)	veent section 501/	c)/3)
	Enter the amount directly expended Enter the amount of the filing organ				\$
2	0 0		· ·		¢
2	exempt function activities  Total exempt function expenditures				Ψ
	line 17b			•	\$
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and er made payments. For each organiza contributions received that were pr political action committee (PAC). If	ition listed, enter the amount paid f omptly and directly delivered to a s	rom the filing organizat eparate political organ	ion's funds. Also enter tl ization, such as a separa	ne 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) 2019

LHA 932041 11-26-19

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	(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) 2019

14231112 149058 MOZILLA

# Schedule C (Form 990 or 990-EZ) 2019 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)).

For	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(I	p)
of th	e lobbying activity.	Yes	No	Amo	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				
	·				
		37	X		
	3 ,	A	v		
		y	^		L 010
		- 21	x	-	.,010
r F			X		
		Х			250
i				4	,260
			Х		
c	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pa		n 501(c)(	5), or sect	ion	
	501(c)(6).				
				Yes	No
1					
2					
3				•	
Pa			• •		2 io
		NO OR	(b) Part III	-A, iiie	3, 15
_					
2		aı			
_			20		
•	·				
	, , ,		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  a 4, 2t  a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  k 1f "Yes," enter the amount of any tax incurred under section 4912  d If the filling organization incurred a section 4912 to 1f the filling organization incurred a section 4912 to 1f the filling organization incurred a section 4912 to 1f the filling organization incurred a section 4912 to 2 lot the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization make only in-house lobbying and political campaign activity expenditures from the prior year?  Dues, assessments and similar amounts from members  1 Dues, assessments and similar amounts from members  1 Dues, assessments and similar amounts from members  2 Section 162(e) complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part IIII-A, line 3, is answered "Yes."  1 Dues, assessments and similar amounts from members  2 Section 162(e) condeductible lobbying and political expenditures (do not include amounts of political expenditure expenses for which the section 527(f					
Prov	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	list); Part II-	A, lines 1 an	d 2 (see	
instr	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PA:	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
IN	2019, MOZILLA PROVIDED MATERIAL DISCUSSING PLATFORM	REGUI	LATION	IN	
TH.	E EUROPEAN UNION FOR USE BY ACTIVISTS AND INDEPENDEN	T GROU	JPS. IN	•	
IN.	DIA, IT DEVELOPED MATERIALS AND METHODS FOR ACTIVIST	S TO	CONTACT		
M H.	WHERE OF PARTIMENT REGIRENCE PART PROFESSION	3 M T 03-	T37 T3	T 3	
	MBERS OF PARLIAMENT REGARDING DATA PROTECTION LEGISL	ATION	IN IND	IA.	
	MBERS OF PARLIAMENT REGARDING DATA PROTECTION LEGISL	ATION	IN IND	IA.	

Schedule C (Form 990 or 990-EZ) 2019

932043 11-26-19

#### **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.

2019 Open to Public Inspection

Name of the organization

MOZILLA FOUNDATION

Employer identification number 20-0097189

OMB No. 1545-0047

Total number at end of year  2 Aggregate value of grants from (during year)  3 Aggregate value of grants from (during year)  4 Aggregate value of grants from (during year)  5 Did the organization informal didonors and donor advisors in writing that the assets held in donor advised funds are the organization informal grants on the formal didonors and donor advisors in writing that the assets held in donor advised funds are the organization informal grantsets, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit of grantsets. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  Purpose(9) of conservation assements held by the organization (check all that apply).  Proservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of pens pasce  2 Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation assement and pension of conservation easements included in (a)  Number of conservation easements and certified historic structure included in (a)  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is socated by a conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easements included in (a)  Number of conservation have a written pelicy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year  Number of conservation have a written pelicy regarding the periodic monitoring in periodic monitoring conservation easements during the year  Number of conservation ease	Pai			imilar Funds or <i>i</i>	Accounts. Complete if the
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of prants from (during year) 4 Aggregate value of and of year 5 Did the organization informal glorones and donor advisors in writing that the assets held in donor advised funds are the organization informal glorantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization informal glorantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization in grants and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impormisable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impormisable purpose benefit?  Part II Conservation Easements. Complete if the organization (heck all that appty).  Preservation of Lange to public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat  Preservation of Lange passes 2 Complete lines 2 at through 2 diff the organization held a qualified conservation contribution in the form of a conservation assement on the last day of the tax year.  1 Total number of conservation easements in a certified historic structure included in (a)  2 Complete lines 2 at through 2 diff the organization held a qualified conservation on a historic structure is lated in the National Register  3 Number of conservation easements no an certified historic structure included in (a)  4 Number of states where property subject to conservation easements in located P  Number of states where property subject to conservation easements in located P  Number of states where property subject to conservation easements in located P  Number of states where property subject to conservation easements in tholary  1 Namount of expenses incurred in monitoring, inspecting, handling of violations, an	_	organization answered "Yes" on Form 990, Part IV, line		d funds	(b) Funds and other accounts
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4 Aggregate value at end of year  5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charidable purposes and not for the benefit of the donor of oncor advisor, or for any other purpose conferring impermisable private benefit?  Part II Conservation Teasements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).    Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Preservation of land for public use (for example, recreation or education)   Preservation of a certified historic structure   Preservation of open space   Complete lines 2a through 2 of the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  2 Total number of conservation easements   2a					
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are the organization's property, subject to the organization's exclusive legal control?  6 Did the organization inform all grantees, donors, and donor advisor, or for any other purpose conferring impermissible private benefit?  8 Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization or education) Preservation of a historically important land area Protection of natural habitat Preservation of a public use (for example, recreation or education) Preservation of a certified historic structure Preservation of open space  2 Complete line 2a through 2 of it the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  3 Total number of conservation easements  4 Total number of conservation easements and a certified historic structure included in (a)  5 Total acreage restricted by conservation easements by the organization experts in the National Register  6 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  8 Number of states where property subject to conservation easements in located National Property subject to conservation easements in the folds?  9 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year No.  8 Staff and volunteer hours devoked to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Part III Organization and experience of public service, provide in Part XIII, describe how the organization reported on line 2(d) above satisfy the requirements of section 170(h)4(k)8(k)0) and section 170(h)4(k)8(k)0) and section 170(h)4(k)8(k)0) and section 170(h)4(k)8(k)0) and secti			riting that the accete he	ld in donor advised fo	inde
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for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impormissible private benefit?    Part     Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.    Purpose(s) of conservation easements held by the organization (check all that apply).	6		-		
Part II   Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV. line 7.	Ü				
Part     Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(g) of conservation easements held by the organization (check all that apply).    Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Protection of natural habitat   Preservation of open space   Preservation of open space   Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.   Held at the End of the Tax Year a Total number of conservation easements   Part 1   Held at the End of the Tax Year a Total acreage restricted by conservation easements   Part 2					
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Protection of natural habitat	•			Preservation of a hi	storically important land area
□ Preservation of open space  2 Complete lines 22 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure included in (a)  d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  \$ Does she organization have a written policy regarding the periodic monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  \$ Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(l)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)			lorr or education)	_	
Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  It is a Total number of conservation easements  Total acreage restricted by conservation easements  Number of conservation easements on a certified historic structure included in (a)  Number of conservation easements included in (a) acquired after 7/25/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easement is located   Number of states where property subject to conservation easements in socated   Number of states where property subject to conservation easements in socated   Number of states where property subject to conservation easements in socated   Number of states where property subject to conservation easements in socated   Number of states where property subject to conservation easements in socated   Number of states where property subject to conservation easements in socated   Number of states where property subject to conservation easements or socated easements during the year   Number of states where property subject to conservation easements or easements during the year   Number of states where property subject to conservation easements in the second easements during the year   Number of states where property subject to conservation easements in the second easements during the year   Number of conservation easements easements in the second easements during the year   Number of conservation easements during the year   Numb				] Treservation of a ce	ertined historic structure
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Ilisted in the National Register					20
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(f) and section 170(h)(4)(B)(f)(g)	u				
A Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Armount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  * Armount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  * \$  Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	_				
Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$  Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's interest that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar ass	3		ased, extinguished, or t	eminated by the orga	anization during the tax
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Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year    \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)?	6	•			
<ul> <li>▶ \$</li></ul>	·	Starr and volunteer flours devoted to morntoning, inspecting, i	iariding of violations, ar	id enforcing conserva	tion easements during the year
<ul> <li>▶ \$</li></ul>	7	Amount of expenses incurred in monitoring inspecting handle	ing of violations, and en	forcing consentation	easements during the year
Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)?	•		ing or violations, and en	forcing conservation	easements during the year
and section 170(h)(4)(B)(ii)?	۵	• • ———	eatiefy the requirement	s of section 170/b)//)	(B)(i)
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(ii) Assets included in Form 990, Part X					<b>\$</b>
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a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X  ► \$	2	•		-	i, provide
b Assets included in Form 990, Part X	_				<b>•</b> •
					L 1
	LHA				Schedule D (Form 990) 2019

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	dule D (Form 990) 2019 MOZILLA	FOUNDATIO	N.				2	20-00	97189	) Pa	age <b>2</b>
Pai	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, o	r Other	Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the f	following that	t make sig	nificant u	se of its			
	collection items (check all that apply):										
а	Public exhibition	c			hange progra	am					
b	Scholarly research	e		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	· ·		-	-			e in Part )	KIII.		
5	During the year, did the organization solicit or	r receive donations of	of art, his	storical treas	sures, or othe	er similar a	assets	_			,
_	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Escrow and Custodial Arrang		ete if the	organizatio	n answered	"Yes" on F	Form 990,	Part IV, Ii	ne 9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodia								1	_	,
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	llowing t	able:							
									Amount		
	Beginning balance						1c				
d	9 7						1d				
е	Distributions during the year										
f	Ending balance						1f		1		1
	Did the organization include an amount on Fo						y?		Yes		No
	If "Yes," explain the arrangement in Part XIII.  T V Endowment Funds. Complete in										
I G	Endowment ands: Complete				1			ora baali	(-) Four		haalı
	Designation of year hallower	(a) Current year	(D) P	rior year	(c) Two yea	IS DACK (	<b>d)</b> Three ye	ars back	(e) Four	years	Dack
1a b	Beginning of year balance					-					
C	Contributions  Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
·	·										
f	and programs Administrative expenses										
'n	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end halance	l line 1c	r column (a)	I held as:						
a	Board designated or quasi-endowment	•	% %	y, column (a,	n ricia as.						
b	Permanent endowment	%	_′°								
c	Term endowment										
·	The percentages on lines 2a, 2b, and 2c shou										
За	Are there endowment funds not in the posses	•	tion tha	t are held ar	nd administer	ed for the	organizat	tion			
	by:	· · · · · · · · · · · · · · · ·							ſ	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the										
Pai	t VI   Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990	), Part IV	/, line 11a. S	ee Form 990	, Part X, li	ne 10.				
	Description of property	(a) Cost or o			or other		cumulate	b	(d) Book	c value	<del></del>
	,	basis (investr			(other)		reciation		` ,		
1a	Land										
	Buildings										
С	Leasehold improvements										
d	Equipment			27	2,958.	2	72,80	1.		1!	57.
	0.11										

Schedule D (Form 990) 2019

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

<sup>2.</sup> 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

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	t XI Reconciliation of Revenue per Audited Financial Stateme	ente With Perenus ner D	20-0097189 Page 4
Pai	·	•	eturn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12:		T 4 T
1	Total revenue, gains, and other support per audited financial statements		1
2 a	Amounts included on line 1 but not on Form 990, Part VIII, line 12:  Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities		
	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)	1 = - 1	
	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
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
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Par	Tt XII Reconciliation of Expenses per Audited Financial Statem		Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.	
1			1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
	Donated services and use of facilities		-
	Prior year adjustments		-
-	Other losses		-
			-
	Add lines 2a through 2d		2e
3 4	Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:		3
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
	Other (Describe in Part XIII.)		
	Add lines 4 - and 41-		4c
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
	rt XIII Supplemental Information.		
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	rt IV, lines 1b and 2b; Part V, line	4; Part X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad-	ditional information.	
PAR	RT X, LINE 2:		
THE	E FOUNDATION QUALIFIES AS A PUBLIC BENEFIT	CHARITABLE ORGAN	NIZATION
cvc	EMPT FROM INCOME TAXES ON RELATED INCOME U	NIDED CECTION 501	(C)(3) OF THE
CAE	MPT FROM INCOME TAXES ON RELATED INCOME O	NDER SECTION 301	(C)(3) OF THE
דאד	TERNAL REVENUE CODE AND APPLICABLE SECTION	S OF THE CALTEOR	NTA REVENUE
	HIGHER REVENUE CODE TIME THIRDICALE BECTION	B OI IIID CADII OIG	ATT REVENOE
AND	TAXATION CODE. THE FOUNDATION PROVIDES F	OR TAX. IF ANY.	ON UNRELATED
BUS	SINESS INCOME.		
IN	ACCORDANCE WITH THE ACCOUNTING STANDARD O	N ACCOUNTING FOR	UNCERTAINTY
IN	INCOME TAXES, NO PORTION OF AN UNCERTAIN	TAX POSITION WILI	L BE
<b>.</b>	20011111 THE BUT DOGTETON	00	DETIG
REC	COGNIZED IF THE POSITION HAS LESS THAN A 5	U% LIKELIHOOD OF	BEING
atta	TO A TAIL OF THE OWN WITH THE WAY THE	ALIMITOD TMV AT CO	
505	STAINED UPON AUDIT BY THE RELEVANT TAXING	AUTHORITY. ALSO,	INTEREST
FYT	PENSE, IF ANY, IS RECOGNIZED ON THE FULL A	אטוואש טב טבבבספבי	A BENEFITC FOD
		THOUNT OF DEFERRE	
<del>9</del> 32054	4 10-02-19		Schedule D (Form 990) 2019

Part XIII   Supplemental Information (continued) UNCERTAIN TAX POSITIONS.	Schedule D (Form 990) 2019 MOZILLA FOUNDATION	20-0097189 Page 5
UNCERTAIN TAX POSITIONS.	Schedule D (Form 990) 2019   MOZILLA FOUNDATION   Part XIII   Supplemental Information (continued)	
UNLEXIAM TAX FOSTITURS:	IINCEDMATN MAY DOCTMIONS	
	UNCERTAIN TAX FOSTITIONS.	

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## **SCHEDULE F**

### **Statement of Activities Outside the United States**

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

➤ Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of employees, agents, and independent contractors in the region (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) (f) Total expenditures (a) Region (b) Number of (e) If activity listed in (d) offices is a program service, for and in the region describe specific type investments of service(s) in the region in the region GRANTS AND STIPENDS TO EAST ASTA AND THE RECIPIENTS LOCATED IN PACIFIC PROGRAM SERVICES THE REGION, CONSULTANTS 82,531. GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN SOUTH AMERICA 11 PROGRAM SERVICES THE REGION, CONSULTANTS 79,913. GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN EUROPE (INCLUDING THE REGION, MANAGEMENT, OPERATIONS, EVENTS, ICELAND & GREENLAND) PROGRAM SERVICES 2,945,748. GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN NORTH AMERICA THE REGION, MANAGEMENT, OPERATIONS, EVENTS, 3,190,606. (CANADA) PROGRAM SERVICES GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, CONSULTANTS 207,535. SUB-SAHARAN AFRICA PROGRAM SERVICES GRANTS AND STIPENDS TO MIDDLE EAST AND RECIPIENTS LOCATED IN NORTH AFRICA 0 PROGRAM SERVICES THE REGION, CONSULTANTS 1,014. GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN SOUTH ASIA 0 PROGRAM SERVICES THE REGION, CONSULTANTS 52,156. 358 6,559,503.

and 3b) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART V FOR COLUMN (E) DESCRIPTIONS

0

358

2

Schedule F (Form 990) 2019

932071 10-12-19

3 a Subtotal

0.

6,559,503.

**b** Total from continuation

sheets to Part I c Totals (add lines 3a <u>Schedule F (Form 990) 2019</u> <u>MOZILLA FOUNDATION</u> 20-0097189 <u>Page 2</u>

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 EXAMINE HOW TO					
		ICELAND &	IMPLEMENT A TRUSTMARK					
		GREENLAND)	FOR VOICE-ENABLED IOT	14,000.		0.		CASH VALUE
			TO PROVIDE TRAINING	14,000.		٠.		CADII VADOL
			AND ACCESS TO GENE					
		ICELAND &	EDITING TOOLS TO					
		GREENLAND)	NON-BIOLOGISTS	7,300.		0.		CASH VALUE
		,	TO SUPPORT	.,				
		EUROPE (INCLUDING	AFTER-SCHOOL CLUBS					
		ICELAND &	THAT TEACH DESIGN					
		GREENLAND)	THINKING	6,000.		0.		CASH VALUE
		,	TO IMPROVE RIGOR AND	.,				
		EUROPE (INCLUDING	REPRODUCIBILITY					
		ICELAND &	WITHIN THE SCIENTIFIC					
		GREENLAND)	COMMUNITY	10,000.		0.		CASH VALUE
			TO PREPARE TRAINING					
		EUROPE (INCLUDING	MATERIAL FOR					
		ICELAND &	COMPUTATIONAL					
		GREENLAND)	ANALYSIS OF HTS DATA	8,500.		0.		CASH VALUE
		EUROPE (INCLUDING	TO RESEARCH AND					
		ICELAND &	COMBAT HARMS RELATED					
		GREENLAND)	TO ADTECH	8,300.		0.		CASH VALUE
			TO RAISE AWARENESS OF					
			FAKE NEWS GENERATION					
		SUB-SAHARAN	IN THE AFRICAN					
		AFRICA	CONTEXT	25,000.		0.		CASH VALUE
			TO SUPPORT A CLASS					
		EUROPE (INCLUDING	ALLOWING STUDENTS TO					
		ICELAND &	LEARN ABOUT	12.0.0				
		GREENLAND)	TRUSTWORTHY AI	13,049.		0.		CASH VALUE

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2019

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

Schedule	F (Form 990)	MOZIL	TA LOUNDALIO	IN		20-00	9/109		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	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 DEVELOP LEGAL					
			EUROPE (INCLUDING	STRATEGIES TO ADDRESS					
			ICELAND &	HUMAN RIGHTS					
			GREENLAND)	CHALLENGES OF AI	6,000.		0.		CASH VALUE
				TO TEACH RESEARCHERS	·				
			EUROPE (INCLUDING	TO BUILD OPEN,					
			ICELAND &	INCLUSIVE ACADEMIC					
			GREENLAND)	COMMUNITIES	9,448.		0.		CASH VALUE
				TO VERIFY AND	·				
			EUROPE (INCLUDING	PUBLICLY ARCHIVE					
			ICELAND &	PUBLISHED					
			GREENLAND)	COMPUTATIONAL	6,000.		0.		CASH VALUE
				CORE SUPPORT FOR					
			NORTH AMERICA	DIGITAL JUSTICE LABS	25,000.		0.		CASH VALUE
				TO RAISE AWARENESS	·				
			EUROPE (INCLUDING	ABOUT ALGORITHMIC					
			ICELAND &	DECISION-MAKING IN					
			GREENLAND)	NEUROSCIENCE	10,000.		0.		CASH VALUE
				STUDY LEGAL	·				
				FRAMEWORKS FOR					
			EAST ASIA AND THE	INTERNET-BASED MENTAL					
			PACIFIC	HEALTH SERVICES	40,000.		0.		CASH VALUE

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

(a) Type of grant or assistance (b) Region (c) Number of recipients (d) Amount of recipients (d)	Part III can be duplicated if	additional space is needed	d.				
FELLOWSHIP STIPENDS PACIFIC 1 37,482, TRANSFER 0. CASH VALUE  EUROPE (INCLUDING ICELAND & ELECTRONIC FUND/WIRE GREENLAND) 20 628,407, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS NORTH AMERICA 4 137,891, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS SOUTH AMERICA 2 62,619, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS SOUTH ASIA 2 50,305, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS SOUTH ASIA 2 50,305, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS SOUTH ASIA 2 157,536, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS AFRICA 6 157,536, TRANSFER 0. CASH VALUE  CREATIVE MEDIA AND SCIENCE SUB-SAHARAN AFRICA 1 7,000, TRANSFER 0. CASH VALUE  CREATIVE MEDIA AND SCIENCE SUB-SAHARAN AFRICA 1 7,000, TRANSFER 0. CASH VALUE  ELECTRONIC FUND/WIRE 0. CASH VALUE  ELECTRONIC FUND/WIRE 0. CASH VALUE  CREATIVE MEDIA AND SCIENCE SUB-SAHARAN AFRICA 1 7,000, TRANSFER 0. CASH VALUE  ELECTRONIC FUND/WIRE 0. CASH VALUE	(a) Type of grant or assistance	(b) Region				noncash	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIP STIPENDS PACIFIC 1 37,482, TRANSFER 0. CASH VALUE  BUROPE (INCLUDING ICELAND & ELECTRONIC FUND/WIRE CASH VALUE  FELLOWSHIP STIPENDS GREENLAND) 20 628,407, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS NORTH AMERICA 4 137,891, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS SOUTH AMERICA 2 62,619, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS SOUTH ASIA 2 50,305, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS SUB-SAHARAN FELLOWSHIP STIPENDS AFRICA 6 157,536, TRANSFER 0. CASH VALUE  FELLOWSHIP STIPENDS AFRICA 1 7,000, TRANSFER 0. CASH VALUE  CREATIVE MEDIA AND SCIENCE SUB-SAHARAN AFRICA 1 7,000, TRANSFER 0. CASH VALUE  CREATIVE MEDIA AND SCIENCE SUB-SAHARAN AFRICA 1 7,000, TRANSFER 0. CASH VALUE  CREATIVE MEDIA AND SCIENCE SUB-SAHARAN AFRICA 1 7,000, TRANSFER 0. CASH VALUE  ELECTRONIC FUND/WIRE 0. CASH VALUE							
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FELLOWSHIP STIPENDS  NORTH AMERICA  PELLOWSHIP STIPENDS  NORTH AMERICA  A 137,891, TRANSFER  O. CASH VALUE  ELECTRONIC FUND/WIRE  ELECTRONIC FUND/WIRE  O. CASH VALUE  PELLOWSHIP STIPENDS  SOUTH AMERICA  2 62,619, TRANSFER  O. CASH VALUE  ELECTRONIC FUND/WIRE  ELECTRONIC FUND/WIRE  O. CASH VALUE  PELLOWSHIP STIPENDS  SOUTH ASIA  2 50,305, TRANSFER  O. CASH VALUE  PELLOWSHIP STIPENDS  SUB-SAHARAN  SUB-SAHARAN  AFRICA  6 157,536, TRANSFER  O. CASH VALUE  CREATIVE MEDIA AND SCIENCE  SUB-SAHARAN  AFRICA  1 7,000, TRANSFER  O. CASH VALUE  ELECTRONIC FUND/WIRE  O. CASH VALUE  CREATIVE MEDIA AND SCIENCE  SUB-SAHARAN  AFRICA  1 7,000, TRANSFER  O. CASH VALUE  CREATIVE MEDIA AND SCIENCE  SUB-GAHARAN  AFRICA  1 7,000, TRANSFER  O. CASH VALUE  ELECTRONIC FUND/WIRE  MINI GRANT  ELECTRONIC FUND/WIRE  DURGOPE (INCLUDING  ELECTRONIC FUND/WIRE  ELECTRONIC FUND/WIRE  O. CASH VALUE  CREATIVE MEDIA AND SCIENCE  SUB-GAHARAN  AFRICA  ELECTRONIC FUND/WIRE  DURGOPE (INCLUDING  ELECTRONIC FUND/WIRE  ELECTRONIC FUND/WIRE  DURGOPE (INCLUDING  ELECTRONIC FUND/WIRE  ELECTRONIC FUND/WIRE  ELECTRONIC FUND/WIRE  CREATIVE MEDIA AND SCIENCE  ELECTRONIC FUND/WIRE	FELLOWSHIP STIPENDS	PACIFIC	1	37,482.	TRANSFER	0.	CASH VALUE
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CREATIVE MEDIA AND SCIENCE SUB-SAHARAN MINI GRANT AFRICA 1 7,000. TRANSFER 0. CASH VALUE  EUROPE (INCLUDING CREATIVE MEDIA AND SCIENCE ICELAND & ELECTRONIC FUND/WIRE  EUROPE (INCLUDING ELECTRONIC FUND/WIRE)  ELECTRONIC FUND/WIRE	FELLOWSHIP STIPENDS	SOUTH ASIA	2	50,305.	TRANSFER	0.	CASH VALUE
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CREATIVE MEDIA AND SCIENCE SUB-SAHARAN MINI GRANT AFRICA 1 7,000. TRANSFER 0. CASH VALUE  EUROPE (INCLUDING CREATIVE MEDIA AND SCIENCE ICELAND & ELECTRONIC FUND/WIRE		SUB-SAHARAN			ELECTRONIC FUND/WIRE		
MINI GRANT AFRICA 1 7,000. TRANSFER 0. CASH VALUE  EUROPE (INCLUDING CREATIVE MEDIA AND SCIENCE ICELAND & ELECTRONIC FUND/WIRE	FELLOWSHIP STIPENDS	AFRICA	6	157,536.	TRANSFER	0.	CASH VALUE
MINI GRANT AFRICA 1 7,000. TRANSFER 0. CASH VALUE  EUROPE (INCLUDING CREATIVE MEDIA AND SCIENCE ICELAND & ELECTRONIC FUND/WIRE							
MINI GRANT AFRICA 1 7,000. TRANSFER 0. CASH VALUE  EUROPE (INCLUDING CREATIVE MEDIA AND SCIENCE ICELAND & ELECTRONIC FUND/WIRE	CDEATIVE MEDIA AND COTENCE	CIID_CAUADAN			ELECTRONIC FIND/WIDE		
EUROPE (INCLUDING CREATIVE MEDIA AND SCIENCE ICELAND & ELECTRONIC FUND/WIRE			1	7 000.		0.	CASH VALUE
CREATIVE MEDIA AND SCIENCE ICELAND & BLECTRONIC FUND/WIRE			_	,,,,,,,,,			
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MINI GRANT GREENLAND) 7 62,750. TRANSFER 0. CASH VALUE	CREATIVE MEDIA AND SCIENCE	ICELAND &			ELECTRONIC FUND/WIRE		
	MINI GRANT	GREENLAND)	7	62,750.	TRANSFER	0.	CASH VALUE
CREATIVE MEDIA AND SCIENCE ELECTRONIC FUND/WIRE	CREATIVE MEDIA AND SCIENCE				ELECTRONIC FUND/WIRE		
MINI GRANT SOUTH AMERICA 1 10,000. TRANSFER 0. CASH VALUE		SOUTH AMERICA	1	10,000.		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)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	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)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2019

932074 10-12-19

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

PART I, LINE 3, COLUMN (E):

REGION: EUROPE (INCLUDING ICELAND & GREENLAND)

(E) SPECIFIC TYPES OF SERVICES IN REGION: GRANTS AND STIPENDS TO

RECIPIENTS LOCATED IN THE REGION, MANAGEMENT, OPERATIONS, EVENTS, 932075 10-12-19

14231112 149058 MOZILLA

## 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

MOZILLA FO	<u>OUNDATI</u> ON						20-0097189
Part I General Information on Grants ar	nd Assistance						
1 Does the organization maintain records to							
criteria used to award the grants or assist	tance?						X Yes No
2 Describe in Part IV the organization's pro-							
Part II Grants and Other Assistance to E	•				anization answered "\	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$		· ·	1 '		(f) Method of	T	1
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	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACCESS NOW INC. 34 W 27TH STREET, 6TH FLOOR NEW YORK, NY 10001	27-0597430	501/01/31	60,000.	0	CASH VALUE		TO SPONSOR DIGITAL RIGHTS EXECUTIVE DIRECTORS MEETING AT RIGHTSCON AND TO SUPPORT THE SAFETY AND
NEW TORK, NI 10001	27-0337430	501(0)(3)	00,000.	٠.	CASH VALUE		TO SUPPORT THE SAPETT AND
ARTICLE 19 INC. 1110 VERMONT AVENUE NW WASHINGTON, DC 20005	27-1337098	501(C)(3)	20,000.	0.	CASH VALUE		SPONSORSHIP OF THE 2019 INTERNET FREEDOM FESTIVAL
CODE FOR SCIENCE AND SOCIETY INC. 1221 SE 34TH AVENUE PORTLAND, OR 97214	81-3791683	501(C)(3)	58,170.	0.	CASH VALUE		TO SPONSOR THE RAPID PREREVIEW DESIGN SPRINT AND TO IMPROVE M-LAB'S OPEN DATA VISUALIZATION
CREATIVE COMMONS PO BOX 1866 MOUNTAIN VIEW, CA 94042	04-3585301	501(C)(3)	10,000.	0.	CASH VALUE		SPONSOR 2019 CREATIVE COMMONS GLOBAL SUMMIT
HACKS HACKERS 1300 17TH STREET NORTH, 11TH FLOOR ARLINGTON, VA 22209	45-5351484	501(C)(3)	32,500.	0.	CASH VALUE		SPONSORSHIP OF MISINFOCON EVENT SERIES
THE SCIENTISTA FOUNDATION, INC.  L KEANE COURT  RYE, NY 10580	46-0951725		25,000.	0.	CASH VALUE		SPONSORSHIP OF THE 2019 SCIENTISTA SYMPOSIUM  32.
<ol><li>Enter total number of section 501(c)(3) an</li></ol>	na aovernment ora	ganizations listed in th	e line 1 table				<b>▶</b> 32.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2019)

2.

932101 10-26-19

Schedule I (Form 990) MOZILLA FOUNDATION 20-0097189 Page 1

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 (e) Amount of (f) Method of (a) Name and address of (b) EIN (h) Purpose of grant (d) Amount of (g) Description of organization or government , if applicable cash grant non-cash valuation non-cash assistance or assistance assistance (book, FMV, appraisal, other) ALLEGHENY COLLEGE EMBED THE STUDY OF ETHICS 520 NORTH MAIN STREET IN UNDERGRAD COMPUTER MEADVILLE, PA 16335 25-0965212 501(C)(3) 144,252. 0. CASH VALUE SCIENCE EDUCATION BEMIDJI STATE UNIVERSITY EMBED THE STUDY OF ETHICS 1500 BIRCHMONT DRIVE NE IN UNDERGRAD COMPUTER BEMIDJI, MN 56601 41-1687554 170(C)(1) 149,328. 0. CASH VALUE SCIENCE EDUCATION BIOHACKING VILLAGE TO CONVENE OPEN SOURCE 1715 DANBY LN SE EDUCATION WORKSHOPS 83-3941279 501(C)(3) GRAND RAPIDS, MI 49506 10,000. 0. CASH VALUE DURING DEF CON 2019 BOWDOIN COLLEGE EMBED THE STUDY OF ETHICS 5400 COLLEGE STATION IN UNDERGRAD COMPUTER 01-0215213 501(C)(3) 113,468. BRUNSWICK, ME 04011 0. CASH VALUE SCIENCE EDUCATION CHICAGO LEARNING EXCHANGE 332 S. MICHIGAN AVENUE, 9TH FLOOR 82-3445770 501(C)(3) 100,000. GENERAL OPERATING SUPPORT CHICAGO, IL 60604 0. CASH VALUE COUNTER CULTURE LABS BUILD INCLUSIVE BIOMED 4799 SHATTUCK AVENUE PROGRAMS TO INCREASE 46-4053018 501(C)(3) 10,000. 0. CASH VALUE OAKLAND, CA 94609 ACCESS AND EQUITY EXPERIMENTAL CIVICS LLC PO BOX 1032 PROMOTE OPEN SOURCE AUSTIN, TX 78767 82-1603330 N/A 10,000. 0. CASH VALUE PRACTICES IN LIFE SCIENCE FABRICATORZ FOUNDATION 1627 LOCUST STREET #903 TO SUPPORT THE BASSEL 82-4618698 501(C)(3) 25,000 ST LOUIS, MO 63103 0. CASH VALUE KHARTABIL FELLOWSHIP EMBED THE STUDY OF ETHICS GEORGETOWN UNIVERSITY 2121 WISCONSIN AVENUE NW, FLOOR 4 IN UNDERGRAD COMPUTER SCIENCE EDUCATION WASHINGTON, DC 20007 53-0196603 501(C)(3) 150,000. 0. CASH VALUE

Schedule I (Form 990) MOZILLA FOUNDATION 20-0097189 Page 1

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 (a) Description of (h) Purpose of grant organization or government , if applicable cash grant non-cash valuation non-cash assistance or assistance assistance (book, FMV, appraisal, other) GEORGIA TECH RESEARCH CORPORATION EMBED THE STUDY OF ETHICS PO BOX 100117 IN UNDERGRAD COMPUTER ATLANTA, GA 30384 58-0603146 501(C)(3) 149,866. 0. CASH VALUE SCIENCE EDUCATION EDUCATE PUBLIC ABOUT IYOIYO LLC NEURAL NETWORK FACE 11811 CULVER BOULEVARD #409 ANALYSIS AND ITS DANGERS LOS ANGELES, CA 90066 82-0903372 N/A 15,000. 0. CASH VALUE USING A SIMPLE THE DISTRICT BOARD OF TRUSTEES OF EMBED THE STUDY OF ETHICS MIAMI DADE COLLEGE, FLORIDA - 300 IN UNDERGRAD COMPUTER 59-1210485 501(C)(3) NE 2ND AVENUE - MIAMI, FL 33132 149,936. 0. CASH VALUE SCIENCE EDUCATION NEW AMERICA TO URGE COMPANIES TO 740 15TH STREET NW, SUITE 900 INCREASE RESPECT FOR USERS' DIGITAL RIGHTS 52-2096845 501(C)(3) 100,000. WASHINGTON, DC 20005 0. CASH VALUE NEW VENTURE FUND TO STRENGTHEN DIGITAL SOCIETY THROUGH THE 1201 CONNECTICUT AVENUE, SUITE 300 20-5806345 501(C)(3) 125,000. NETGAIN PARTNERSHIP WASHINGTON, DC 20036 0. CASH VALUE NORTHEASTERN UNIVERSITY EMBED THE STUDY OF ETHICS 360 HUNTINGTON AVENUE, 540-117 IN UNDERGRAD COMPUTER 04-1679980 501(C)(3) 148,349. 0. CASH VALUE SCIENCE EDUCATION BOSTON, MA 02115 NYU SCHOOL OF MEDICINE TO INCREASE ACCESS TO 1 PARK AVENUE, 11TH FLOOR DATA-DRIVEN TRACKING OF 13-5562308 501(C)(3) NEW YORK, NY 10016 10,000. 0. CASH VALUE BACTERIAL DISEASE PRESIDENT AND FELLOWS OF HARVARD COLLEGE - 1033 MASSACHUSETTS EMBED THE STUDY OF ETHICS AVENUE, 5TH FLOOR - CAMBRIDGE, IN UNDERGRAD COMPUTER 04-2103580 501(C)(3) MA 02138 150,000. 0. CASH VALUE SCIENCE EDUCATION REGENTS OF THE UNIVERSITY OF EMBED THE STUDY OF ETHICS CALIFORNIA AT BERKELEY - 2195 HEARST AVENUE, ROOM 130 -IN UNDERGRAD COMPUTER BERKELEY, CA 94720 94-6002123 501(C)(3) 150,000. 0. CASH VALUE SCIENCE EDUCATION

Schedule I (Form 990) MOZILLA FOUNDATION 20-0097189 Page 1

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) RESEARCH FOUNDATION FOR STATE UNIVERSITY OF NEW YORK - UB EMBED THE STUDY OF ETHICS COMMONS, SUITE 211, 520 LEE IN UNDERGRAD COMPUTER ENTRANCE - AMHERST, NY 14228 14-1368361 501(C)(3) 150,000. 0. CASH VALUE SCIENCE EDUCATION SANTA CLARA COLLEGE EMBED THE STUDY OF ETHICS 500 EL CAMINO REAL IN UNDERGRAD COMPUTER SANTA CLARA, CA 95053 94-1156617 501(C)(3) 150,000. 0. CASH VALUE SCIENCE EDUCATION THE ENTERPRISE CENTER TO PROVIDE EDUCATION AND 1100 MARKET STREET, SUITE 500 OPPORTUNITIES IN BIOMED 20-0062024 501(C)(3) CHATTANOOGA, TN 37402 10,000. 0. CASH VALUE TO STUDENTS THE MAYORS FUND TO ADVANCE NEW YORK CITY - 253 BROADWAY 6TH FLOOR TO ADVANCE DIGITAL ACCESS 13-3783906 501(C)(3) 50,000. - NEW YORK, NY 10007 0. CASH VALUE TO THE 2020 CENSUS THE REGENTS OF THE UNIVERSITY OF EMBED THE STUDY OF ETHICS IN UNDERGRAD COMPUTER COLORADO - 3100 MARINE STREET, 572 UCB - BOULDER, CO 80309 84-6000555 5<u>01(</u>C)(3) 117,777 SCIENCE EDUCATION 0. CASH VALUE TRUSTEES OF COLUMBIA UNIVERSITY IN EMBED THE STUDY OF ETHICS THE CITY OF NEW YORK - PO BOX IN UNDERGRAD COMPUTER 13-5598093 501(C)(3) 29789 - NEW YORK, NY 10087 149,599. 0. CASH VALUE SCIENCE EDUCATION REGENTS OF THE UNIVERSITY OF EMBED THE STUDY OF ETHICS CALIFORNIA, DAVIS - PO BOX 989062 IN UNDERGRAD COMPUTER 94-6036494 501(C)(3) WEST SACRAMENTO, CA 95798 149,999. 0. CASH VALUE SCIENCE EDUCATION UNIVERSITY OF MARYLAND BALTIMORE EMBED THE STUDY OF ETHICS COUNTY - 1000 HILLTOP CIRCLE, 4TH IN UNDERGRAD COMPUTER 52-6002033 170(C)(1) FLOOR - BALTIMORE, MD 21250 149,980. 0. CASH VALUE SCIENCE EDUCATION EMBED THE STUDY OF ETHICS UNIVERSITY OF UTAH 201 S. PRESIDENTS CIRCLE, ROOM 406 IN UNDERGRAD COMPUTER SALT LAKE CITY, UT 84112 87-6000525 501(C)(3) 150,000. 0. CASH VALUE SCIENCE EDUCATION

<u>Schedule I (Form 990)</u> <u>MOZILLA FOUNDATION</u> 20-0097189 Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VASHINGTON UNIVERSITY 100 ROSEDALE, BOX 1034 ST. LOUIS, MO 63112	43-0653611	501(C)(3)	149,833.	0.	CASH VALUE		EMBED THE STUDY OF ETHIC IN UNDERGRAD COMPUTER SCIENCE EDUCATION

Page 2

(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-	(e) Method of valuation	(f) Description of noncash assistance
	recipients	cash grant	cash assistance	(book, FMV, appraisal, other)	
CHARITABLE PROJECT SUPPORT	7	142,230.	0.	CASH VALUE	
FELLOWSHIP STIPENDS	16	695,240.	0.	CASH VALUE	
Part IV Supplemental Information. Provide the information rec	uired in Part I, Iin	e 2; Part III, column	(b); and any other ac	ditional 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 PIIRSIIA	NT TO	
•	•				
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	S-RECOGNI	ZED POI(C)	(3) ORGANI	ZATIONS, WE	

FACE ANALYSIS AND ITS DANGERS USING A SIMPLE DEMONSTRATION

Schedule I (Form 990)

932291 04-01-19

# **SCHEDULE J** (Form 990)

# **Compensation Information**

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

► Attach to Form 990.

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

MOZILLA FOUNDATION

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number 20-0097189

Pa	art i   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 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 coation FO4(aVO) FO4(aVA) and FO4(aVO) avantinations must complete lines F.O.			
_	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:	5a		Х
	The organization?			X
D	Any related organization?  If "Yes" on line 5a or 5b, describe in Part III.	. 30		-25
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
U	contingent on the net earnings of:			
•	The organization?	6a		Х
				X
D	Any related organization?  If "Yes" on line 6a or 6b, describe in Part III.	.   00		
7				
•	not described on lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			-25
U	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			-23
9	Regulations section 53.4958-6(c)?	9		
	negulations section 50.4500-0(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 (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficits	(6)(1)-(0)	reported as deferred on prior Form 990
(1) MITCHELL BAKER, CHAIR	(i)	0.	0.	0.	0.	0.	0.	0.
PAID ONLY BY RELATED FOR-PROFIT	(ii)	450,000.	2,594,637.	1,980.	25,000.	2,560.	3,074,177.	0.
(2) MARK SURMAN	(i)	286,990.	0.	0.	20,020.	5,247.	312,257.	0.
EXECUTIVE DIRECTOR/PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ASHLEY BOYD	(i)	236,779.	0.	0.	37,380.	26,103.	300,262.	0.
VP, ADVOCACY AND ENGAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ANGELA PLOHMAN	(i)	208,415.	0.	0.	14,370.	2,767.	225,552.	0.
EXECUTIVE VP, SECRETARY, TRESURER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JUAN BARAJAS	(i)	167,220.	0.	0.	31,973.	15,372.	214,565.	0.
DIRECTOR, FUNDRAISING	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) STEPHANIE WRIGHT	(i)	117,055.	0.	0.	23,931.	50,967.	191,953.	0.
SENIOR PROGRAM MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MATTHEW WILLSE	(i)	113,991.	0.	0.	8,521.	68,793.	191,305.	0.
DIRECTOR OF PRODUCT AND DESIGN	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) WILLIAM EASTON	(i)	107,791.	0.	0.	26,606.	50,967.	185,364.	0.
LEAD, FUNDRAISING & EMAIL STRATEGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MELISSA HUERTA	(i)	136,071.	0.	0.	23,117.	22,512.	181,700.	0.
SENIOR PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2019		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 for Part II. Also complete this I	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 2019 Open to Public Inspection

Department of the Treasury iternal Revenue Service Name of the organization

MOZILLA FOUNDATION

Employer identification number 20-0097189

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES: THE FOUNDATION TRANSFERRED ITS CORAL AND THUNDERBIRD PROJECTS TO OTHER ENTITIES. SEE THE EXPLANATION FOR PART III, LINE 4D BELOW. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: THUNDERBIRD, CORAL AND OTHER PROJECTS MOZILLA INCUBATES AND SHEPHERDS PROJECTS THAT SUPPORT A HEALTHY INTERNET. ONE OF THOSE PROJECTS IS THUNDERBIRD, WHICH IS AN OPEN SOURCE EMAIL CLIENT. IN 2019, MOZILLA MOVED THUNDERBIRD'S OPERATIONS TO A NEW, WHOLLY-OWNED SUBSIDIARY OF THE MOZILLA FOUNDATION TITLED MZLA TECHNOLOGIES CORPORATION. ANOTHER PROJECT IS CORAL, WHICH PRODUCES OPEN-SOURCE TOOLS FOR JOURNALISTS. IN 2019, CORAL MOVED FROM BEING A PROJECT HOUSED WITHIN MOZILLA TO BEING HOUSED WITHIN VOX MEDIA. MOZILLA RECEIVED FAIR CONSIDERATION FOR ASSETS TRANSFERRED TO VOX MEDIA. EXPENSES \$ 851,346. INCLUDING GRANTS OF \$ 0. REVENUE \$ 31,995. FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES: CANADA, FRANCE, UNITED KINGDOM, DENMARK, FINLAND, GERMANY, BELGIUM, SPAIN, AUSTRALIA, TAIWAN, JAPAN, SWEDEN, LUXEMBOURG, CHINA FORM 990, PART VI, SECTION A, LINE 8B: THE INVESTMENT AND AUDIT COMMITTEES PERIODICALLY MEET IN EXECUTIVE SESSION. ALTHOUGH SEPARATE MEETING MINUTES ARE NOT KEPT, THEY REPORT BACK TO THE FULL BOARD WHERE MINUTES ARE KEPT. LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2019) 932211 09-06-19

2019.05000 MOZILLA FOUNDATION

MOZILLA1

14231112 149058 MOZILLA

MOZILLA FOUNDATION

Employer identification number 20-0097189

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 THE 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:

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 DURING A PART OF A MEETING OF THE

932212 09-06-19

Schedule O (Form 990 or 990-EZ) (2019)

TAXPAYER HEREBY ELECTS TO CAPITALIZE REPAIR AND MAINTENANCE COSTS UNDER

TREAS. REG. 1.263(A)-3(N). THE COSTS WERE INCURRED DURING THE TAXABLE

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Name of the organization MOZILLA FOUNDATION	Employer identification number 20-0097189
YEAR IN THE ELECTING TAXPAYER'S TRADE OR BUSINESS AND THE	ELECTING
TAXPAYER TREATS SUCH COSTS AS CAPITAL EXPENDITURES ON ITS	BOOKS AND
RECORDS.	

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Schedule O (Form 990 or 990-EZ) (2019)

### 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.

foreign country)

2019 Open to Public Inspection

entity

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

of disregarded entity

► Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number 20-0097189Name of the organization MOZILLA FOUNDATION Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (d) (e) (f) Name, address, and EIN (if applicable) Legal domicile (state or Primary activity Total income End-of-year assets Direct controlling

Part II Identification of Related Tax-Exempt Organizations during the tax year.	I tions. Complete if the organization a	nswered "Yes" on Form 990	, Part IV, line 34, b	pecause it had one	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	<b>(f)</b> Direct controlling entity	contr	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No

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

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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.

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(a)	(b)	(c)	(d)	(e)	(f)	(g)	(H	n)	(i)	(j		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Dispropi alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener mana partr	ral or aging ner?	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	

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

(a) Name, address, and EIN of related organization	<b>(b)</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	ent	(i) etion (b)(13) rolled tity?
MOZILLA CORPORATION - 20-3226186									
331 EAST EVELYN AVENUE			MOZILLA						
MOUNTAIN VIEW, CA 94041	INTERNET SERVICES	CA	FOUNDATION	C CORP	811,978,000.	901,604,000.	100%	Х	
MZLA TECHNOLOGIES CORPORATION - 84-3352661									
331 EAST EVENLYN AVENUE			MOZILLA						
MOUNTAIN VIEW, CA 94041	INTERNET TECHNOLOGIES	CA	FOUNDATION	C CORP	0.	1,503,000.	100%	Х	
	-								

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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					
	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	X		
С	Gift, grant, or capital contribution from related organization(s)	1c		Х	
	Loans or loan guarantees to or for related organization(s)	1d		X	
е	Loans or loan guarantees by related organization(s)	1e		X	
	l la company de la company				
f	Dividends from related organization(s)	1f		X	
g	Sale of assets to related organization(s)	1g		X	
	Purchase of assets from related organization(s)	1h		X	
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				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х	
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11	X		
	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Х		
n	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		X	
າ ົ	If the answer to any of the above is "Ves." see the instructions for information on who must complete this line, including covered relationships and transaction thresholds				

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>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved					
(1) MOZILLA CORPORATION	A	15,858,258.	TRADEMARK LICENSE AGREEMENT					
(2) MOZILLA CORPORATION	М	354,391.	SERVICE AGREEMENT					
(3) MOZILLA CORPORATION	N	273,600.	SERVICE AGREEMENT					
(4) MOZILLA CORPORATION	Q	142,926.	SERVICE AGREEMENT					
(5) MZLA TECHNOLOGIES CORPORATION	В	1,577,291.	STOCK PURCHASE AGREEMENT					
(6) MZLA TECHNOLOGIES CORPORATION	Q	124,289.	MEMO OF UNDERSTANDING					

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(e) Are all partners se 501(c)(3) orgs.? Yes No	(g) Share of end-of-year assets	Disprotion allocati	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General managir partner Yes N	(k) Percentage ownership

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

SCHEDULE R, PART V, LINE 1

THE FOUNDATION LICENSES CERTAIN TRADEMARKS TO ITS WHOLLY-OWNED

SUBSIDIARY, MOZILLA CORPORATION, IN RETURN FOR A LICENSE FEE. THE

AMOUNT ACTUALLY ACCRUED BY THE FOUNDATION IS REPORTED ON PART V LINE

2(1).

THE FOUNDATION ALSO HAS AN ADMINISTRATIVE SERVICES AGREEMENT UNDER

WHICH MOZILLA CORPORATION PROVIDES LEGAL AND CERTAIN OTHER SERVICES, AS

WELL AS ALLOWING IT TO USE SPACE IN MOZILLA CORPORATION'S OFFICES. ITS

PAYMENT FOR SERVICES IS REPORTED ON PART V LINE 2(2), AND THE COMPONENT

OF THE PAYMENT FOR OFFICE SPACE IS REPORTED ON LINE 2(3). THE

ADMINISTRATIVE SERVICES AGREEMENT ALSO PROVIDES THAT THE FOUNDATION BE

REIMBURSED FOR CERTAIN STAFF EXPENSES FOR STAFF PROVIDING SERVICES TO

THE MOZILLA CORPORATION IS REPORTED ON LINE 2(4).

IN 2019, THE FOUNDATION TRANSFERRED OPERATIONS AND ASSETS RELATED TO

ITS OPEN SOURCE THUNDERBIRD EMAIL CLIENT TO A NEW FOR-PROFIT

SUBSIDIARY, MZLA TECHNOLOGIES CORPORATION, IN RETURN FOR 100% OF THE

NEW SUBSIDIARY'S STOCK. THE AMOUNT SHOWN ON PART V, LINE 2(5), IS THE

SUM OF THE CASH CONTRIBUTED TO THE NEW SUBSIDIARY AS PART OF THIS

INITIAL CAPITALIZATION.

DURING THE TRANSITION OF THUNDERBIRD OPERATIONS FROM THE FOUNDATION TO

MZLA TECHNOLOGIES CORPORATION, THE FOUNDATION TEMPORARILY CONTINUED TO

PAY SOME THUNDERBIRD EXPENSES UNDER A REIMBURSEMENT ARRANGEMENT. THE

AMOUNT ACCRUED IN 2019 TO BE REIMBURSED BY THE NEW SUBSIDIARY IS SHOWN

ON PART V, LINE 2(6).

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