

Form **990**

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.
- ▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

# 2019

**Open to Public Inspection**

**A** For the **2019** calendar year, or tax year beginning **07/01, 2019**, and ending **06/30, 2020**

|   |  |  |            |  |   |  |
|---|--|--|------------|--|---|--|
| <b>B</b> Check if applicable:<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | <b>C</b> Name of organization<br>WIKIMEDIA FOUNDATION, INC.                |  |            |  | <b>D</b> Employer identification number<br>20-0049703 |  |
|   | Doing Business As  |  |            |  | <b>E</b> Telephone number<br>(415) 839-6885           |  |
|   | Number and street (or P.O. box if mail is not delivered to street address) |  | Room/suite |  |   |  |
|   | 1 MONTGOMERY STREET, SUITE 1600  |  |            |  |   |  |
| City or town, state or province, country, and ZIP or foreign postal code<br>SAN FRANCISCO, CA 94104   |  |  |            | <b>G</b> Gross receipts \$ 154,499,755.  |   |  |
| <b>F</b> Name and address of principal officer: JAIME VILLAGOMEZ<br>1 MONTGOMERY ST, SUITE 1600, SAN FRANCISCO, CA 94105  |  |  |            | <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |   |  |
|   |  |  |            | <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No                      |   |  |
|   |  |  |            | If "No," attach a list. (see instructions)   |   |  |
| <b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527  |  |  |            | <b>H(c)</b> Group exemption number ▶   |   |  |
| <b>J</b> Website: ▶ WWW.WIKIMEDIAFOUNDATION.ORG   |  |  |            |  |   |  |
| <b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶   |  |  |            | <b>L</b> Year of formation: 2003 <b>M</b> State of legal domicile: FL  |   |  |

## Part I Summary

|   |  |  |
|---|--|--|
| <b>Activities &amp; Governance</b>  | <b>1</b> Briefly describe the organization's mission or most significant activities: WIKIMEDIA FDN SUPPORTS WIKIPEDIA, ITS SISTER PROJECTS, AND THE WIKIMEDIA COMMUNITY TO HELP THE WORLD SHARE IN FREE KNOWLEDGE. |  |
|   | <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.   |  |
|   | <b>3</b> Number of voting members of the governing body (Part VI, line 1a)   | 3 10.  |
|   | <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)   | 4 10.  |
|   | <b>5</b> Total number of individuals employed in calendar year 2019 (Part V, line 2a)  | 5 291.   |
|   | <b>6</b> Total number of volunteers (estimate if necessary)  | 6 292,000.   |
|   | <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12   | 7a 101,429.  |
| <b>b</b> Net unrelated business taxable income from Form 990-T, line 34                     | 7b 0.  |  |
| <b>Revenue</b>  | <b>8</b> Contributions and grants (Part VIII, line 1h)   | Prior Year 115,839,832. Current Year 120,919,258.                          |
|   | <b>9</b> Program service revenue (Part VIII, line 2g)  | 0. 0.  |
|   | <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)  | 2,568,373. 2,980,572.  |
|   | <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   | 181,295. 731,437.  |
|   | <b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)   | 118,589,500. 124,631,267.  |
|   | <b>Expenses</b>  | <b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) |
| <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)                     |  | 0. 0.  |
| <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) |  | 46,057,613. 55,634,913.  |
| <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)                    |  | 290,748. 435,770.  |
| <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 11,863,862.            |  |  |
| <b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)                      |  | 31,012,366. 33,061,318.  |
| <b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)         |  | 90,058,977. 112,162,122.   |
| <b>19</b> Revenue less expenses. Subtract line 18 from line 12                              | 28,530,523. 12,469,145.  |  |
| <b>Net Assets or Fund Balances</b>  | <b>20</b> Total assets (Part X, line 16)   | Beginning of Current Year 176,019,709. End of Year 191,262,962.            |
|   | <b>21</b> Total liabilities (Part X, line 26)  | 10,378,284. 10,947,237.  |
|   | <b>22</b> Net assets or fund balances. Subtract line 21 from line 20.  | 165,641,425. 180,315,725.  |

## Part II Signature Block

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

|  |                            |                         |          |   |           |
|--|----------------------------|-------------------------|----------|---|-----------|
| <b>Sign Here</b>   | ▶ Signature of officer     |                         | Date     |   |           |
|  | JAIME VILLAGOMEZ CFO       |                         |          |   |           |
| <b>Paid Preparer Use Only</b>                                    | Print/Type preparer's name | Preparer's signature    | Date     | Check <input type="checkbox"/> if self-employed | PTIN      |
|  | SHALINI SAIDHA             | Shalini Saidha          | 5/7/2021 |   | P01959812 |
|  | Firm's name ▶ KPMG LLP     | Firm's EIN ▶ 13-5565207 |          | Phone no. 415-963-5100                          |           |
| Firm's address ▶ 55 SECOND STREET, #1400 SAN FRANCISCO, CA 94105 |                            |                         |          |   |           |

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2019)

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III  Yes  No

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 44,963,013. including grants of \$ 250,000. ) (Revenue \$ 0. )

ATTACHMENT 2

4b (Code: ) (Expenses \$ 39,162,136. including grants of \$ 22,780,121. ) (Revenue \$ 0. )

ATTACHMENT 3

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ▶ 84,125,149.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Question text, and Yes/No columns. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, and organizational transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question number, Question text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding Form 1096, W-2G forms, and backup withholding rules.

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

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

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (10), 1b (10), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 4
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

**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.

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

| (A)<br>Name and title   | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|   |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| (1) KATHERINE MAHER<br>CEO/EXECUTIVE DIRECTOR                   | 40.00<br>0.  |   |                       | X       |              |                              |        | 387,770.   | 0.  | 21,235.   |
| (2) JAIME VILLAGOMEZ<br>CFO & TREASURER                         | 40.00<br>0.  |   |                       | X       |              |                              |        | 289,356.   | 0.  | 33,724.   |
| (3) JANEEN UZZELL<br>CHIEF OPERATING OFFICER                    | 40.00<br>0.  |   |                       |         |              | X                            |        | 282,752.   | 0.  | 15,502.   |
| (4) VALERIE D'COSTA THRU 11/19<br>CHIEF OF COMMUNITY ENGAGEMENT | 40.00<br>0.  |   |                       |         | X            |                              |        | 273,080.   | 0.  | 12,747.   |
| (5) LISA SEITZ<br>CHIEF ADVANCEMENT OFFICER                     | 40.00<br>0.  |   |                       |         | X            |                              |        | 252,117.   | 0.  | 32,629.   |
| (6) ANTHONY NEGRIN<br>CHIEF PRODUCT OFFICER                     | 40.00<br>0.  |   |                       |         | X            |                              |        | 237,992.   | 0.  | 20,904.   |
| (7) ANTHONY SEBRO<br>DEPUTY GC, VP, & INTERIM SEC.              | 40.00<br>0.  |   |                       | X       |              |                              |        | 212,977.   | 0.  | 33,007.   |
| (8) JOADY LOHR<br>DIRECTOR, HUMAN RESOURCES                     | 40.00<br>0.  |   |                       |         |              | X                            |        | 202,482.   | 0.  | 33,384.   |
| (9) MARGARET NOVOTNY<br>SENIOR DIRECTOR, DESIGN                 | 40.00<br>0.  |   |                       |         |              | X                            |        | 193,557.   | 0.  | 32,893.   |
| (10) ANTHONY LE<br>CONTROLLER                                   | 40.00<br>0.  |   |                       |         |              | X                            |        | 191,603.   | 0.  | 32,763.   |
| (11) HEATHER WALLS<br>CHIEF CREATIVE OFFICER                    | 40.00<br>0.  |   |                       |         |              | X                            |        | 212,528.   | 0.  | 6,435.  |
| (12) ERIKA BJUNE FROM 7/2019<br>INTERIM CHIEF TECHNOLOGY OFFIC  | 40.00<br>0.  |   |                       |         | X            |                              |        | 184,729.   | 0.  | 16,192.   |
| (13) AMANDA KETON FROM 9/2019<br>GENERAL COUNSEL & SECRETARY    | 40.00<br>0.  |   |                       | X       |              |                              |        | 77,054.  | 0.  | 3,900.  |
| (14) JIMMY WALES<br>FOUNDER                                     | 4.00<br>0.   | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |

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

| (A)<br>Name and title  | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|  |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| ( 15) MARIA SEFIDARI<br>CHAIR                                  | 8.00<br>0.   | X   |                       | X       |              |                              |        | 0.   | 0.  | 0.  |
| ( 16) DARIUSZ JEMIELNIAK<br>TRUSTEE                            | 4.00<br>0.   | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| ( 17) JAMES HEILMAN<br>TRUSTEE                                 | 4.00<br>0.   | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| ( 18) RAJU NARISSETTI<br>TRUSTEE                               | 4.00<br>0.   | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| ( 19) TANYA CAPUANO<br>TRUSTEE                                 | 4.00<br>0.   | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| ( 20) LISA LEWIN<br>TRUSTEE                                    | 4.00<br>0.   | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| ( 21) ESRA'A AL SHAFEI<br>TRUSTEE                              | 4.00<br>0.   | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| ( 22) NATALIYA TYMKIV<br>VICE CHAIR                            | 8.00<br>0.   | X   |                       | X       |              |                              |        | 0.   | 0.  | 0.  |
| ( 23) SHANI EVENSTEIN<br>TRUSTEE FROM 8/2019                   | 4.00<br>0.   | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| <b>1b Sub-total</b>  |  |   |                       |         |              |                              |        | 2,997,997.   | 0.  | 295,315.  |
| <b>c Total from continuation sheets to Part VII, Section A</b> |  |   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| <b>d Total (add lines 1b and 1c)</b>                           |  |   |                       |         |              |                              |        | 2,997,997.   | 0.  | 295,315.  |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 165

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

**Section B. Independent Contractors**

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

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
| ATTACHMENT 5                     |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶** 26



**Part VIII Statement of Revenue**

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

|   |   |  |   | (A)   | (B)   | (C)                        | (D)  |            |          |
|---|---|--|---|---|---|----------------------------|--|------------|----------|
|   |   |  |   | Total revenue   | Related or exempt function revenue                    | Unrelated business revenue | Revenue excluded from tax under sections 512-514 |            |          |
| <b>Contributions, Gifts, Grants and Other Similar Amounts</b> | <b>1a</b>   | Federated campaigns . . . . .  | <b>1a</b>   |   |   |                            |  |            |          |
|   | <b>b</b>  | Membership dues . . . . .  | <b>1b</b>   |   |   |                            |  |            |          |
|   | <b>c</b>  | Fundraising events . . . . .   | <b>1c</b>   | 88,492.   |   |                            |  |            |          |
|   | <b>d</b>  | Related organizations . . . . .  | <b>1d</b>   |   |   |                            |  |            |          |
|   | <b>e</b>  | Government grants (contributions) . .  | <b>1e</b>   |   |   |                            |  |            |          |
|   | <b>f</b>  | All other contributions, gifts, grants, and similar amounts not included above .   | <b>1f</b>   | 120,830,766.  |   |                            |  |            |          |
|   | <b>g</b>  | Noncash contributions included in lines 1a-1f. . . . .   | <b>1g</b>   | \$ 224,253.   |   |                            |  |            |          |
|   | <b>h</b>  | <b>Total.</b> Add lines 1a-1f . . . . .  |   |   | 120,919,258.  |                            |  |            |          |
|   | <b>Program Service Revenue</b>                                  | <b>2a</b>  | Business Code   |   |   |                            |  |            |          |
| <b>b</b>  |   |  |   |   |   |                            |  |            |          |
| <b>c</b>  |   |  |   |   |   |                            |  |            |          |
| <b>d</b>  |   |  |   |   |   |                            |  |            |          |
| <b>e</b>  |   |  |   |   |   |                            |  |            |          |
| <b>f</b>  |   | All other program service revenue . . . . .  |   |   |   |                            |  |            |          |
| <b>g</b>  |   | <b>Total.</b> Add lines 2a-2f . . . . .  |   |   | 0.  |                            |  |            |          |
| <b>Other Revenue</b>  |   | <b>3</b>   | Investment income (including dividends, interest, and other similar amounts). . . . . |   |   | 3,177,662.                 |  | 3,177,662. |          |
|   | <b>4</b>  | Income from investment of tax-exempt bond proceeds .   |   |   | 0.  |                            |  |            |          |
|   | <b>5</b>  | Royalties . . . . .  |   |   | 0.  |                            |  |            |          |
|   | <b>6a</b>   | Gross rents . . . . .  | <b>6a</b>   | (i) Real  | (ii) Personal   |                            |  |            |          |
|   |   |  |   | <b>b</b>  | Less: rental expenses                                 | <b>6b</b>                  |  |            |          |
|   |   |  |   | <b>c</b>  | Rental income or (loss)                               | <b>6c</b>                  |  |            |          |
|   | <b>d</b>  | Net rental income or (loss) . . . . .  |   |   | 0.  |                            |  |            |          |
|   | <b>7a</b>   | Gross amount from sales of assets other than inventory   | <b>7a</b>   | (i) Securities  | (ii) Other  |                            |  |            |          |
|   |   |  |   | <b>b</b>  | Less: cost or other basis and sales expenses . .      | <b>7b</b>                  | 29,743,292.                                      |            |          |
|   |   |  |   | <b>c</b>  | Gain or (loss) . . . . .                              | <b>7c</b>                  | -214,554.  | 17,464.    |          |
|   | <b>d</b>  | Net gain or (loss) . . . . .   |   |   | -197,090.   |                            | -197,090.  |            |          |
|   | <b>8a</b>   | Gross income from fundraising events (not including \$ 88,492. of contributions reported on line 1c). See Part IV, line 18 . . . . . | <b>8a</b>   |   |   | 8,450.                     |  |            |          |
|   |   |  |   | <b>b</b>  | Less: direct expenses . . . . .                       | <b>8b</b>                  | 55,878.  |            |          |
|   |   |  |   | <b>c</b>  | Net income or (loss) from fundraising events. . . . . |                            |  | -47,428.   | -47,428. |
|   | <b>9a</b>   | Gross income from gaming activities. See Part IV, line 19 . . . . .  | <b>9a</b>   |   |   | 0.                         |  |            |          |
| <b>b</b>  |   |  |   | Less: direct expenses . . . . .                       | <b>9b</b>   | 0.                         |  |            |          |
| <b>c</b>  |   |  |   | Net income or (loss) from gaming activities. . . . .  |   |                            | 0.   |            |          |
| <b>10a</b>  | Gross sales of inventory, less returns and allowances . . . . . | <b>10a</b>   |   |   | 170,747.  |                            |  |            |          |
|   |   |  | <b>b</b>  | Less: cost of goods sold . . . . .                    | <b>10b</b>  | 69,318.                    |  |            |          |
|   |   |  | <b>c</b>  | Net income or (loss) from sales of inventory. . . . . |   |                            | 101,429.   | 101,429.   |          |
| <b>Miscellaneous Revenue</b>                                  | <b>11a</b>  | ENDOWMENT PROCESSING   |   | Business Code   | 900099  | 620,533.                   | 620,533.   |            |          |
|   | <b>b</b>  | CREDIT CARD REBATE   |   | 900099  | 18,238.   | 18,238.                    |  |            |          |
|   | <b>c</b>  | OTHER REVENUE  |   | 900099  | 38,665.   | 38,665.                    |  |            |          |
|   | <b>d</b>  | All other revenue . . . . .  |   |   |   |                            |  |            |          |
|   | <b>e</b>  | <b>Total.</b> Add lines 11a-11d . . . . .  |   |   | 677,436.  |                            |  |            |          |
| <b>12</b>   | <b>Total revenue.</b> See instructions . . . . .                |  |   | 124,631,267.  |   | 101,429.                   | 3,610,580.                                       |            |          |

**Part IX Statement of Functional Expenses**

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

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

| <b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .   | 15,446,283.           | 15,446,283.                     |  |                             |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .  | 94,174.               | 94,174.                         |  |                             |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .   | 7,489,664.            | 7,489,664.                      |  |                             |
| 4 Benefits paid to or for members . . . . .  | 0.                    |                                 |  |                             |
| 5 Compensation of current officers, directors, trustees, and key employees . . . . .   | 2,186,736.            | 1,121,274.                      | 906,781.                               | 158,681.                    |
| 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .   | 0.                    |                                 |  |                             |
| 7 Other salaries and wages . . . . .   | 43,138,553.           | 33,387,452.                     | 6,124,951.                             | 3,626,150.                  |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   | 1,217,814.            | 879,724.                        | 236,256.                               | 101,834.                    |
| 9 Other employee benefits . . . . .  | 6,575,755.            | 4,961,714.                      | 965,579.                               | 648,462.                    |
| 10 Payroll taxes . . . . .   | 2,516,055.            | 1,805,575.                      | 489,210.                               | 221,270.                    |
| 11 Fees for services (nonemployees):   |                       |                                 |  |                             |
| a Management . . . . .   | 0.                    |                                 |  |                             |
| b Legal . . . . .  | 2,077,671.            | 1,254,476.                      | 797,111.                               | 26,084.                     |
| c Accounting . . . . .   | 131,975.              |                                 | 131,975.                               |                             |
| d Lobbying . . . . .   | 25,065.               | 25,065.                         |  |                             |
| e Professional fundraising services. See Part IV, line 17.   | 435,770.              |                                 |  | 435,770.                    |
| f Investment management fees . . . . .   | 0.                    |                                 |  |                             |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .   | 9,016,165.            | 5,491,143.                      | 2,272,486.                             | 1,252,536.                  |
| 12 Advertising and promotion . . . . .   | 37,254.               | 37,254.                         |  |                             |
| 13 Office expenses . . . . .   | 935,999.              | 190,523.                        | 678,953.                               | 66,523.                     |
| 14 Information technology. . . . .   | 3,723,707.            | 2,921,713.                      | 750,057.                               | 51,937.                     |
| 15 Royalties. . . . .  | 0.                    |                                 |  |                             |
| 16 Occupancy . . . . .   | 1,334,034.            | 984,217.                        | 238,670.                               | 111,147.                    |
| 17 Travel . . . . .  | 2,401,912.            | 2,122,952.                      | 164,337.                               | 114,623.                    |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials  | 0.                    |                                 |  |                             |
| 19 Conferences, conventions, and meetings . . . . .  | 224,543.              | 217,258.                        | 7,285.                                 |                             |
| 20 Interest . . . . .  | 6,106.                | 6,106.                          |  |                             |
| 21 Payments to affiliates. . . . .   | 0.                    |                                 |  |                             |
| 22 Depreciation, depletion, and amortization . . . . .   | 1,951,405.            | 1,261,787.                      | 689,618.                               |                             |
| 23 Insurance . . . . .   | 544,425.              |                                 | 544,425.                               |                             |
| 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.)   |                       |                                 |  |                             |
| a DONATIONS PROCESSING FEES  | 4,857,199.            |                                 |  | 4,857,199.                  |
| b PAYROLL FEES   | 2,257,945.            | 1,882,073.                      | 233,659.                               | 142,213.                    |
| c STAFF DEVELOPMENT/ENRICHMENT   | 1,832,542.            | 1,169,942.                      | 635,537.                               | 27,063.                     |
| d WIKIDATA COLLABORATIVE PROJE   | 1,332,810.            | 1,332,810.                      |  |                             |
| e All other expenses _____   | 370,561.              | 41,970.                         | 306,221.                               | 22,370.                     |
| <b>25 Total functional expenses.</b> Add lines 1 through 24e   | 112,162,122.          | 84,125,149.                     | 16,173,111.                            | 11,863,862.                 |
| <b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . . | 0.                    |                                 |  |                             |

**Part X Balance Sheet**

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

|   |  | (A)<br>Beginning of year |              | (B)<br>End of year    |
|---|--|--------------------------|--------------|-----------------------|
| <b>Assets</b>   | <b>1</b> Cash - non-interest-bearing . . . . .   | 18,764,794.              | <b>1</b>     | 24,221,504.           |
|   | <b>2</b> Savings and temporary cash investments . . . . .  | 84,028,191.              | <b>2</b>     | 47,873,033.           |
|   | <b>3</b> Pledges and grants receivable, net . . . . .  | 300,000.                 | <b>3</b>     | 300,000.              |
|   | <b>4</b> Accounts receivable, net. . . . .   | 0.                       | <b>4</b>     | 0.                    |
|   | <b>5</b> 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 . . . . . | 0.                       | <b>5</b>     | 0.                    |
|   | <b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .   | 0.                       | <b>6</b>     | 0.                    |
|   | <b>7</b> Notes and loans receivable, net . . . . .   | 0.                       | <b>7</b>     | 0.                    |
|   | <b>8</b> Inventories for sale or use . . . . .   | 84,740.                  | <b>8</b>     | 110,209.              |
|   | <b>9</b> Prepaid expenses and deferred charges . . . . .   | 1,179,845.               | <b>9</b>     | 1,930,165.            |
|   | <b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .   | <b>10a</b> 19,576,640.   |              |                       |
|   | <b>b</b> Less: accumulated depreciation . . . . .  | <b>10b</b> 12,125,625.   | 5,688,104.   | <b>10c</b> 7,451,015. |
|   | <b>11</b> Investments - publicly traded securities . . . . .   | 64,587,832.              | <b>11</b>    | 107,595,820.          |
|   | <b>12</b> Investments - other securities. See Part IV, line 11 . . . . .   | 0.                       | <b>12</b>    | 0.                    |
|   | <b>13</b> Investments - program-related. See Part IV, line 11. . . . .   | 0.                       | <b>13</b>    | 0.                    |
|   | <b>14</b> Intangible assets . . . . .  | 0.                       | <b>14</b>    | 0.                    |
|   | <b>15</b> Other assets. See Part IV, line 11 . . . . .   | 1,386,203.               | <b>15</b>    | 1,781,216.            |
| <b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . . | 176,019,709.   | <b>16</b>                | 191,262,962. |                       |
| <b>Liabilities</b>  | <b>17</b> Accounts payable and accrued expenses . . . . .  | 8,210,386.               | <b>17</b>    | 9,260,302.            |
|   | <b>18</b> Grants payable . . . . .   | 0.                       | <b>18</b>    | 0.                    |
|   | <b>19</b> Deferred revenue . . . . .   | 61,450.                  | <b>19</b>    | 0.                    |
|   | <b>20</b> Tax-exempt bond liabilities . . . . .  | 0.                       | <b>20</b>    | 0.                    |
|   | <b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D. . . . .   | 0.                       | <b>21</b>    | 0.                    |
|   | <b>22</b> Loans and other 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 . . . . .     | 0.                       | <b>22</b>    | 0.                    |
|   | <b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .   | 0.                       | <b>23</b>    | 0.                    |
|   | <b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .   | 0.                       | <b>24</b>    | 0.                    |
|   | <b>25</b> 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 . . . . .  | 2,106,448.               | <b>25</b>    | 1,686,935.            |
|   | <b>26 Total liabilities.</b> Add lines 17 through 25. . . . .  | 10,378,284.              | <b>26</b>    | 10,947,237.           |
| <b>Net Assets or Fund Balances</b>  | <b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>  |                          |              |                       |
|   | <b>27</b> Net assets without donor restrictions . . . . .  | 161,502,538.             | <b>27</b>    | 178,247,468.          |
|   | <b>28</b> Net assets with donor restrictions . . . . .   | 4,138,887.               | <b>28</b>    | 2,068,257.            |
|   | <b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>   |                          |              |                       |
|   | <b>29</b> Capital stock or trust principal, or current funds . . . . .   |                          | <b>29</b>    |                       |
|   | <b>30</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .   |                          | <b>30</b>    |                       |
|   | <b>31</b> Retained earnings, endowment, accumulated income, or other funds . . . . .   |                          | <b>31</b>    |                       |
| <b>32</b> Total net assets or fund balances . . . . .                         | 165,641,425.   | <b>32</b>                | 180,315,725. |                       |
| <b>33</b> Total liabilities and net assets/fund balances . . . . .            | 176,019,709.   | <b>33</b>                | 191,262,962. |                       |

**Part XI Reconciliation of Net Assets**

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

|           |  |           |              |
|-----------|--|-----------|--------------|
| <b>1</b>  | Total revenue (must equal Part VIII, column (A), line 12)  | <b>1</b>  | 124,631,267. |
| <b>2</b>  | Total expenses (must equal Part IX, column (A), line 25)   | <b>2</b>  | 112,162,122. |
| <b>3</b>  | Revenue less expenses. Subtract line 2 from line 1   | <b>3</b>  | 12,469,145.  |
| <b>4</b>  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                      | <b>4</b>  | 165,641,425. |
| <b>5</b>  | Net unrealized gains (losses) on investments   | <b>5</b>  | 2,068,841.   |
| <b>6</b>  | Donated services and use of facilities   | <b>6</b>  | 0.           |
| <b>7</b>  | Investment expenses  | <b>7</b>  | 0.           |
| <b>8</b>  | Prior period adjustments   | <b>8</b>  | 0.           |
| <b>9</b>  | Other changes in net assets or fund balances (explain on Schedule O)   | <b>9</b>  | 136,314.     |
| <b>10</b> | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | <b>10</b> | 180,315,725. |

**Part XII Financial Statements and Reporting**

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

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

|           | Yes | No |
|-----------|-----|----|
| <b>2a</b> |     | X  |
| <b>2b</b> | X   |    |
| <b>2c</b> | X   |    |
| <b>3a</b> |     | X  |
| <b>3b</b> |     |    |

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**.  
Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . .

g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? |    | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|---|---|----|---|---|
|                                    |          |   | Yes   | No |   |   |
| (A)                                |          |   |   |    |   |   |
| (B)                                |          |   |   |    |   |   |
| (C)                                |          |   |   |    |   |   |
| (D)                                |          |   |   |    |   |   |
| (E)                                |          |   |   |    |   |   |
| <b>Total</b>                       |          |   |   |    |   |   |

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

Schedule A (Form 990 or 990-EZ) 2019

JSA  
9E1210 1.000

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions) 12
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 14: Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)). 14 97.76%
Row 15: Public support percentage from 2018 Schedule A, Part II, line 14 15 98.18%

16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. [X]
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.
17a 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.
b 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 2019, 2018. Row 15: Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)). Row 16: Public support percentage from 2018 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2019, 2018. Row 17: Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)). Row 18: Investment income percentage from 2018 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

19b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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



**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

|          |   | Yes      | No |
|----------|---|----------|----|
| <b>1</b> | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i> | <b>1</b> |    |

**Section D. All Type III Supporting Organizations**

|          |  | Yes      | No |
|----------|--|----------|----|
| <b>1</b> | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | <b>1</b> |    |
| <b>2</b> | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>   | <b>2</b> |    |
| <b>3</b> | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>  | <b>3</b> |    |

**Section E. Type III Functionally Integrated Supporting Organizations**

|          |  |           |     |    |
|----------|--|-----------|-----|----|
| <b>1</b> | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).  |           |     |    |
| <b>a</b> | <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.  |           |     |    |
| <b>b</b> | <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.   |           |     |    |
| <b>c</b> | <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).   |           |     |    |
| <b>2</b> | Activities Test. Answer (a) and (b) below.   |           | Yes | No |
| <b>a</b> | 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? <i>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.</i> | <b>2a</b> |     |    |
| <b>b</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? <i>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.</i>  | <b>2b</b> |     |    |
| <b>3</b> | Parent of Supported Organizations. Answer (a) and (b) below.   |           |     |    |
| <b>a</b> | 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? <i>Provide details in Part VI.</i>  | <b>3a</b> |     |    |
| <b>b</b> | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>   | <b>3b</b> |     |    |

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

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| <b>Section A - Adjusted Net Income</b>  |           | (A) Prior Year | (B) Current Year<br>(optional) |
|---|-----------|----------------|--------------------------------|
| <b>1</b> Net short-term capital gain  | <b>1</b>  |                |                                |
| <b>2</b> Recoveries of prior-year distributions   | <b>2</b>  |                |                                |
| <b>3</b> Other gross income (see instructions)  | <b>3</b>  |                |                                |
| <b>4</b> Add lines 1 through 3.   | <b>4</b>  |                |                                |
| <b>5</b> Depreciation and depletion   | <b>5</b>  |                |                                |
| <b>6</b> 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) | <b>6</b>  |                |                                |
| <b>7</b> Other expenses (see instructions)  | <b>7</b>  |                |                                |
| <b>8 Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)   | <b>8</b>  |                |                                |
| <b>Section B - Minimum Asset Amount</b>   |           | (A) Prior Year | (B) Current Year<br>(optional) |
| <b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):  |           |                |                                |
| <b>a</b> Average monthly value of securities  | <b>1a</b> |                |                                |
| <b>b</b> Average monthly cash balances  | <b>1b</b> |                |                                |
| <b>c</b> Fair market value of other non-exempt-use assets   | <b>1c</b> |                |                                |
| <b>d Total</b> (add lines 1a, 1b, and 1c)   | <b>1d</b> |                |                                |
| <b>e Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):   |           |                |                                |
| <b>2</b> Acquisition indebtedness applicable to non-exempt-use assets   | <b>2</b>  |                |                                |
| <b>3</b> Subtract line 2 from line 1d.  | <b>3</b>  |                |                                |
| <b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  | <b>4</b>  |                |                                |
| <b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)   | <b>5</b>  |                |                                |
| <b>6</b> Multiply line 5 by .035.   | <b>6</b>  |                |                                |
| <b>7</b> Recoveries of prior-year distributions   | <b>7</b>  |                |                                |
| <b>8 Minimum Asset Amount</b> (add line 7 to line 6)  | <b>8</b>  |                |                                |
| <b>Section C - Distributable Amount</b>   |           |                | Current Year                   |
| <b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)  | <b>1</b>  |                |                                |
| <b>2</b> Enter 85% of line 1.   | <b>2</b>  |                |                                |
| <b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)   | <b>3</b>  |                |                                |
| <b>4</b> Enter greater of line 2 or line 3.   | <b>4</b>  |                |                                |
| <b>5</b> Income tax imposed in prior year   | <b>5</b>  |                |                                |
| <b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).   | <b>6</b>  |                |                                |
| <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).   |           |                |                                |

Schedule A (Form 990 or 990-EZ) 2019

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

| Section D - Distributions  | Current Year |
|--|--------------|
| 1 Amounts paid to supported organizations to accomplish exempt purposes  |              |
| 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity      |              |
| 3 Administrative expenses paid to accomplish exempt purposes of supported organizations  |              |
| 4 Amounts paid to acquire exempt-use assets  |              |
| 5 Qualified set-aside amounts (prior IRS approval required)  |              |
| 6 Other distributions (describe in Part VI). See instructions.   |              |
| 7 <b>Total annual distributions.</b> Add lines 1 through 6.  |              |
| 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. |              |
| 9 Distributable amount for 2019 from Section C, line 6   |              |
| 10 Line 8 amount divided by line 9 amount  |              |

| Section E - Distribution Allocations (see instructions)   | (i)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2019 | (iii)<br>Distributable<br>Amount for 2019 |
|---|-----------------------------|--|---|
| 1 Distributable amount for 2019 from Section C, line 6  |                             |  |   |
| 2 Underdistributions, if any, for years prior to 2019 (reasonable cause required - explain in Part VI). See instructions.   |                             |  |   |
| 3 Excess distributions carryover, if any, to 2019   |                             |  |   |
| a From 2014 . . . . .   |                             |  |   |
| b From 2015 . . . . .   |                             |  |   |
| c From 2016 . . . . .   |                             |  |   |
| d From 2017 . . . . .   |                             |  |   |
| e From 2018 . . . . .   |                             |  |   |
| f <b>Total</b> of lines 3a through e  |                             |  |   |
| g Applied to underdistributions of prior years  |                             |  |   |
| h Applied to 2019 distributable amount  |                             |  |   |
| i Carryover from 2014 not applied (see instructions)  |                             |  |   |
| j 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 <b>Excess distributions carryover to 2020.</b> Add lines 3j and 4c.   |                             |  |   |
| 8 Breakdown of line 7:  |                             |  |   |
| a Excess from 2015 . . . . .  |                             |  |   |
| b Excess from 2016 . . . . .  |                             |  |   |
| c Excess from 2017 . . . . .  |                             |  |   |
| d Excess from 2018 . . . . .  |                             |  |   |
| e Excess from 2019 . . . . .  |                             |  |   |

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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 ATTACHMENT 1
 

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## SCHEDULE A, PART II - OTHER INCOME

| DESCRIPTION           | 2015           | 2016           | 2017           | 2018            | 2019            | TOTAL           |
|-----------------------|----------------|----------------|----------------|-----------------|-----------------|-----------------|
| MISCELLANEOUS REVENUE | 34,524.        | 75,918.        | 85,984.        | 120,602.        | 677,436.        | 994,464.        |
| TOTALS                | <u>34,524.</u> | <u>75,918.</u> | <u>85,984.</u> | <u>120,602.</u> | <u>677,436.</u> | <u>994,464.</u> |

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

**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](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

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

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

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

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

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

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

|  |  |
|--|--|
| Name of organization<br>WIKIMEDIA FOUNDATION, INC. | Employer identification number<br>20-0049703 |
|--|--|

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities (see instructions) . . . . .

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

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

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0-. | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. |
|----------|-------------|---------|---|--|
| (1)      |             |         |   |  |
| (2)      |             |         |   |  |
| (3)      |             |         |   |  |
| (4)      |             |         |   |  |
| (5)      |             |         |   |  |
| (6)      |             |         |   |  |

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

Schedule C (Form 990 or 990-EZ) 2019

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

**A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check  if the filing organization checked box A and "limited control" provisions apply.

| <b>Limits on Lobbying Expenditures</b><br>(The term "expenditures" means amounts paid or incurred.)   |  | (a) Filing organization's totals                | (b) Affiliated group totals                              |                    |                               |   |  |   |  |  |   |                   |              |  |  |
|---|--|---|--|--------------------|-------------------------------|---|--|---|--|--|---|-------------------|--------------|--|--|
| <b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .   |  |   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .  |  | 25,065.   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>c</b> Total lobbying expenditures (add lines 1a and 1b) . . . . .  |  | 25,065.   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>d</b> Other exempt purpose expenditures . . . . .  |  | 84,100,084.                                     |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) . . . . .  |  | 84,125,149.                                     |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.   |  | 1,000,000.                                      |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table> |  | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is:                       | Not over \$500,000 | 20% of the amount on line 1e. | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | Over \$17,000,000 | \$1,000,000. |  |  |
| If the amount on line 1e, column (a) or (b) is:   | The lobbying nontaxable amount is:                 |   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Not over \$500,000  | 20% of the amount on line 1e.                      |   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Over \$500,000 but not over \$1,000,000   | \$100,000 plus 15% of the excess over \$500,000.   |   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Over \$1,000,000 but not over \$1,500,000   | \$175,000 plus 10% of the excess over \$1,000,000. |   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Over \$1,500,000 but not over \$17,000,000  | \$225,000 plus 5% of the excess over \$1,500,000.  |   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Over \$17,000,000   | \$1,000,000.                                       |   |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) . . . . .  |  | 250,000.  |  |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .  |  | 0.  | 0.   |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .  |  | 0.  | 0.   |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .  |  |   | <input type="checkbox"/> Yes <input type="checkbox"/> No |                    |                               |   |  |   |  |  |   |                   |              |  |  |

**4-Year Averaging Period Under Section 501(h)**

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

| <b>Lobbying Expenditures During 4-Year Averaging Period</b>      |          |          |          |          |           |
|--|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in)                      | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) Total |
| <b>2a</b> Lobbying nontaxable amount                             | 34.      | 718.     | 4,380.   | 1,253.   | 6,385.    |
| <b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))   |          |          |          |          | 9,578.    |
| <b>c</b> Total lobbying expenditures                             | 669.     | 14,366.  | 87,597.  | 25,065.  | 127,697.  |
| <b>d</b> Grassroots nontaxable amount                            |          |          |          |          |           |
| <b>e</b> Grassroots ceiling amount (150% of line 2d, column (e)) |          |          |          |          |           |
| <b>f</b> Grassroots lobbying expenditures                        |          |          |          |          |           |

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

Table with 3 main columns: Description, (a) Yes/No, and (b) Amount. Rows include questions about lobbying activities like volunteers, staff, media, mailings, etc.

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

Table with 3 rows and 3 columns: Question, Yes, No. Questions about dues, lobbying expenditures, and carryover.

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

Table with 5 rows and 3 columns: Question, Sub-label, Amount. Questions about dues, political expenses, and carryover.

Part IV Supplemental Information

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

Horizontal lines for providing supplemental information.

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**Part IV** Supplemental Information *(continued)*

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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

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

Table with 3 columns: Line number, Description, and Held at the End of the Tax Year. Includes rows for purpose(s) of easements, total number, acreage, and monitoring expenses.

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.

Table with 3 columns: Line number, Description, and Amount. Includes rows for art collections, revenue included, and assets included.

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

Schedule D (Form 990) 2019

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange program
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment %
The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations
(ii) Related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b

- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category<br>(including name of security)       | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---|----------------|--|
| (1) Financial derivatives . . . . .   |                |  |
| (2) Closely held equity interests . . . . .                                   |                |  |
| (3) Other _____   |                |  |
| (A)   |                |  |
| (B)   |                |  |
| (C)   |                |  |
| (D)   |                |  |
| (E)   |                |  |
| (F)   |                |  |
| (G)   |                |  |
| (H)   |                |  |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶ |                |  |

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment   | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---|----------------|--|
| (1)   |                |  |
| (2)   |                |  |
| (3)   |                |  |
| (4)   |                |  |
| (5)   |                |  |
| (6)   |                |  |
| (7)   |                |  |
| (8)   |                |  |
| (9)   |                |  |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) . ▶ |                |  |

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

| 1. (a) Description of liability   | (b) Book value |
|---|----------------|
| (1) Federal income taxes  |                |
| (2) LEASE INCENTIVES - TI ALLOWANCE   | 1,070,701.     |
| (3) STRAIGHT LINE RENT EXPENSE ADJ  | 473,876.       |
| (4) PRIOR YEAR GRANT EXCESS FUNDS   | 73,868.        |
| (5) OTHER LIABILITIES   | 68,490.        |
| (6)   |                |
| (7)   |                |
| (8)   |                |
| (9)   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) . . . . . ▶ |                |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII



**Part XIII** Supplemental Information (continued)

SCHEDULE D, PART XI, LINE 2D

|                                 |          |
|---------------------------------|----------|
| RECLASS OF FUNDRAISING EXPENSES | \$55,878 |
|                                 | =====    |
|                                 | \$55,878 |

SCHEDULE D, PART XII, LINE 2D

|                                 |          |
|---------------------------------|----------|
| RECLASS OF FUNDRAISING EXPENSES | \$55,878 |
|                                 | =====    |
|                                 | \$55,878 |

SCHEDULE D, PART XII, LINE 4B

|                        |           |
|------------------------|-----------|
| RETURN OF UNUSED GRANT | \$136,314 |
|------------------------|-----------|

SCHEDULE D, PART X, LINE 2

ASC 740, INCOME TAXES

THE FOUNDATION HAS EVALUATED THE FINANCIAL STATEMENT IMPACT OF POSITIONS  
 TAKEN OR EXPECTED TO BE TAKEN IN ITS TAX RETURNS. MANAGEMENT HAS  
 DETERMINED THAT NO TAX LIABILITIES NEED TO BE RECORDED UNDER APPLICABLE  
 ACCOUNTING GUIDANCE.

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ 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](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

| (a) Region  | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in the region | (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region | (f) Total expenditures for and investments in the region |
|---|-------------------------------------|--|--|--|--|
| <b>(1)</b> EAST ASIA AND THE PACIFIC              | 0.                                  | 7.   | PROGRAM SERVICES   | SEE PART V   | 648,490.   |
| <b>(2)</b> EUROPE                                 | 0.                                  | 42.  | PROGRAM SERVICES   | SEE PART V   | 8,601,047.   |
| <b>(3)</b> MIDDLE EAST AND NORTH AFRICA           | 0.                                  | 1.   | PROGRAM SERVICES   | SEE PART V   | 369,122.   |
| <b>(4)</b> NORTH AMERICA                          | 0.                                  | 3.   | PROGRAM SERVICES   | SEE PART V   | 1,360,506.   |
| <b>(5)</b> RUSSIA/INDEPENDENT STATES              | 0.                                  | 1.   | PROGRAM SERVICES   | SEE PART V   | 20,115.  |
| <b>(6)</b> SOUTH AMERICA                          | 0.                                  | 4.   | PROGRAM SERVICES   | SEE PART V   | 140,467.   |
| <b>(7)</b> SOUTH ASIA                             | 0.                                  | 9.   | PROGRAM SERVICES   | SEE PART V   | 461,022.   |
| <b>(8)</b> SUB-SAHARAN AFRICA                     | 0.                                  | 4.   | PROGRAM SERVICES   | SEE PART V   | 297,217.   |
| <b>(9)</b> EAST ASIA AND THE PACIFIC              | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 627,400.   |
| <b>(10)</b> EUROPE                                | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 3,886,138.   |
| <b>(11)</b> MIDDLE EAST AND NORTH AFRICA          | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 331,751.   |
| <b>(12)</b> NORTH AMERICA                         | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 468,059.   |
| <b>(13)</b> RUSSIA/INDEPENDENT STATES             | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 298,598.   |
| <b>(14)</b> SOUTH AMERICA                         | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 503,935.   |
| <b>(15)</b> SOUTH ASIA                            | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 267,623.   |
| <b>(16)</b> SUB-SAHARAN AFRICA                    | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 463,362.   |
| <b>(17)</b> EAST ASIA AND THE PACIFIC             | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 123,831.   |
| <b>3a</b> Subtotal                                |                                     | 71.  |  |  | 18,868,683.  |
| <b>b</b> Total from continuation sheets to Part I |                                     |  |  |  | 518,967.   |
| <b>c</b> Totals (add lines 3a and 3b)             |                                     | 71.  |  |  | 19,387,650.  |

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

Schedule F (Form 990) 2019

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ 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](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

| (a) Region  | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in the region | (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region | (f) Total expenditures for and investments in the region |
|---|-------------------------------------|--|--|--|--|
| (1) EAST ASIA AND THE PACIFIC                               | 0.                                  | 0.   | GRANTMAKING  | CONFERENCE SCHOLARSHIP   | 2,274.   |
| (2) EUROPE  | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 282,213.   |
| (3) EUROPE  | 0.                                  | 0.   | GRANTMAKING  | CONFERENCE SCHOLARSHIP   | 14,667.  |
| (4) MIDDLE EAST AND NORTH AFRICA                            | 0.                                  | 0.   | GRANTMAKING  | CONFERENCE SCHOLARSHIP   | 5,514.   |
| (5) NORTH AMERICA   | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 5,405.   |
| (6) NORTH AMERICA   | 0.                                  | 0.   | GRANTMAKING  | CONFERENCE SCHOLARSHIP   | 2,592.   |
| (7) RUSSIA/INDEPENDENT STATES                               | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 1,635.   |
| (8) RUSSIA/INDEPENDENT STATES                               | 0.                                  | 0.   | GRANTMAKING  | CONFERENCE SCHOLARSHIP   | 5,429.   |
| (9) SOUTH AMERICA   | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 9,199.   |
| (10) SOUTH AMERICA  | 0.                                  | 0.   | GRANTMAKING  | CONFERENCE SCHOLARSHIP   | 7,521.   |
| (11) SOUTH ASIA   | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 29,947.  |
| (12) SOUTH ASIA   | 0.                                  | 0.   | GRANTMAKING  | CONFERENCE SCHOLARSHIP   | 9,160.   |
| (13) SUB-SAHARAN AFRICA                                     | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 131,790.   |
| (14) SUB-SAHARAN AFRICA                                     | 0.                                  | 0.   | GRANTMAKING  | CONFERENCE SCHOLARSHIP   | 9,861.   |
| (15) CENTRAL AMERICA/CARIBBEAN                              | 0.                                  | 0.   | GRANTMAKING  | FURTHER MISSION  | 1,760.   |
| (16)  |                                     |  |  |  |  |
| (17)  |                                     |  |  |  |  |
| <b>3a</b> Subtotal . . . . .                                |                                     |  |  |  |  |
| <b>b</b> Total from continuation sheets to Part I . . . . . |                                     |  |  |  |  |
| <b>c</b> Totals (add lines 3a and 3b)                       |                                     |  |  |  |  |

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

Schedule F (Form 990) 2019

JSA  
9E1274 1.000

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

| 1    | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region               | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|------|--------------------------|--|--------------------------|----------------------|--------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
| (1)  |                          |  | EAST ASIA/PACIFIC        | FURTHER MISS         | 627,400.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (2)  |                          |  | EUROPE/ICELAND/GREENLAND | FURTHER MISS         | 3,886,138.               | WIRE                            |                                  | N/A                                   | N/A   |
| (3)  |                          |  | MIDDLE EAST/NORTH AFRICA | FURTHER MISS         | 331,751.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (4)  |                          |  | NORTH AMERICA            | FURTHER MISS         | 468,059.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (5)  |                          |  | RUSSIA/NEWLY IND. STATES | FURTHER MISS         | 298,598.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (6)  |                          |  | SOUTH AMERICA            | FURTHER MISS         | 503,935.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (7)  |                          |  | SOUTH ASIA               | FURTHER MISS         | 267,623.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (8)  |                          |  | SUB-SAHARAN AFRICA       | FURTHER MISS         | 463,362.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (9)  |                          |  |                          |                      |                          |                                 |                                  |                                       |   |
| (10) |                          |  |                          |                      |                          |                                 |                                  |                                       |   |
| (11) |                          |  |                          |                      |                          |                                 |                                  |                                       |   |
| (12) |                          |  |                          |                      |                          |                                 |                                  |                                       |   |
| (13) |                          |  |                          |                      |                          |                                 |                                  |                                       |   |
| (14) |                          |  |                          |                      |                          |                                 |                                  |                                       |   |
| (15) |                          |  |                          |                      |                          |                                 |                                  |                                       |   |
| (16) |                          |  |                          |                      |                          |                                 |                                  |                                       |   |

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . **58.**

3 Enter total number of other organizations or entities . . . . .



**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance        | (b) Region               | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of noncash assistance | (g) Description of noncash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|--|--------------------------|--------------------------|--------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
| (1) FURTHER MISSION                    | EAST ASIA/PACIFIC        | 11.                      | 123,831.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (2) SCHOLARSHIPS TO ATTEND CONFERENCE  | EAST ASIA/PACIFIC        | 4.                       | 2,274.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (3) FURTHER MISSION                    | EUROPE/ICELAND/GREENLAND | 22.                      | 282,213.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (4) SCHOLARSHIPS TO ATTEND CONFERENCE  | EUROPE/ICELAND/GREENLAND | 35.                      | 14,667.                  | WIRE                            |                                  | N/A                                   | N/A   |
| (5) SCHOLARSHIPS TO ATTEND CONFERENCE  | MIDDLE EAST/NORTH AFRICA | 7.                       | 5,514.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (6) FURTHER MISSION                    | NORTH AMERICA            | 5.                       | 5,405.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (7) SCHOLARSHIPS TO ATTEND CONFERENCE  | NORTH AMERICA            | 2.                       | 2,592.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (8) FURTHER MISSION                    | RUSSIA/NEWLY IND. STATES | 2.                       | 1,635.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (9) SCHOLARSHIPS TO ATTEND CONFERENCE  | RUSSIA/NEWLY IND. STATES | 14.                      | 5,429.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (10) FURTHER MISSION                   | SOUTH AMERICA            | 5.                       | 9,199.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (11) SCHOLARSHIPS TO ATTEND CONFERENCE | SOUTH AMERICA            | 6.                       | 7,521.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (12) FURTHER MISSION                   | SOUTH ASIA               | 9.                       | 29,947.                  | WIRE                            |                                  | N/A                                   | N/A   |
| (13) SCHOLARSHIPS TO ATTEND CONFERENCE | SOUTH ASIA               | 15.                      | 9,160.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (14) FURTHER MISSION                   | SUB-SAHARAN AFRICA       | 31.                      | 131,790.                 | WIRE                            |                                  | N/A                                   | N/A   |
| (15) SCHOLARSHIPS TO ATTEND CONFERENCE | SUB-SAHARAN AFRICA       | 13.                      | 9,861.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (16) FURTHER MISSION                   | CENT. AMERICA/CARIBBEAN  | 1.                       | 1,760.                   | WIRE                            |                                  | N/A                                   | N/A   |
| (17)                                   |                          |                          |                          |                                 |                                  |                                       |   |
| (18)                                   |                          |                          |                          |                                 |                                  |                                       |   |

**Part IV Foreign Forms**

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

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE THE U.S.:

GRANTS TO ORGANIZATIONS:

ORGANIZATIONS THAT HAVE MET EACH GRANT PROGRAM'S ELIGIBILITY CRITERIA ARE ELIGIBLE TO PARTICIPATE IN A PUBLIC APPLICATION PROCESS. TO DO SO, THEY SUBMIT A GRANT PROPOSAL THAT CONTAINS A DESCRIPTION OF THE MISSION-RELATED WORK THEY ARE PROPOSING, A BUDGET, A START DATE AND COMPLETION DATE OR DURATION OF THE GRANT PERIOD, AND A DESCRIPTION OF HOW THIS WORK WILL ACHIEVE THE WIKIMEDIA FOUNDATION'S MISSION OR THE WIKIMEDIA MOVEMENT STRATEGIC PRIORITIES. WHEN AN APPLICANT IS AWARDED A GRANT AND BECOMES A GRANTEE, THE GRANTEE COMPLETES SCREENING REQUIREMENTS AND SIGNS A GRANT AGREEMENT. THE AGREEMENT STIPULATES THAT THEY WILL USE GRANT FUNDS FOR CHARITABLE PURPOSES CONSISTENT WITH THE WIKIMEDIA FOUNDATION'S MISSION AND THE PURPOSES DESCRIBED IN THE GRANT PROPOSAL; THAT THEY AGREE TO THE REPORTING REQUIREMENTS, INCLUDING MAINTAINING RECEIPTS/DOCUMENTATION OF EXPENSES FOR FOUR YEARS; THAT THEY AGREE TO PROCEDURES FOR NOTIFYING THE WIKIMEDIA FOUNDATION OF IMPORTANT CHANGES THAT MAY AFFECT THE GRANT; AND THAT THEY WILL RETURN ANY UNUSED GRANT FUNDS AFTER THE END OF THE GRANT'S TERM. ONCE EACH GRANT IS COMPLETE, THE GRANTEE WILL SUBMIT A NARRATIVE AND FINANCIAL REPORT OR SERIES OF REPORTS THAT DEMONSTRATE HOW THE GRANT FUNDS WERE SPENT AND DESCRIBE THE IMPACT OF THE WORK.

GRANTS TO INDIVIDUALS:

GRANTS TO INDIVIDUALS FOLLOW THE SAME PROCESS AS OTHER GRANTS UNLESS THEY ARE TRAVEL SCHOLARSHIPS. INDIVIDUALS APPLY FOR TRAVEL SCHOLARSHIPS

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

(PRIMARILY TO ATTEND THE ANNUAL CONFERENCE, WIKIMANIA) AND APPLICATIONS ARE REVIEWED AND EITHER ACCEPTED OR DENIED. IN MOST CASES, TRAVEL IS THEN ARRANGED FOR THE INDIVIDUAL AND PAID FOR DIRECTLY BY THE WIKIMEDIA FOUNDATION. IN VERY LIMITED CASES, INDIVIDUALS BOOK TRAVEL THEMSELVES AND PROVIDE RECEIPTS TO THE FOUNDATION WHICH THEN REIMBURSES THEM BASED ON THE RECEIPTS. ADDITIONALLY, THE FOUNDATION ALSO REIMBURSES (UPON REQUEST) FOR OTHER RELATED TRAVEL EXPENSES SUCH AS VISA APPLICATION COSTS AND INCIDENTALS LIKE MEALS AND AIRPORT TRANSFERS.

METHOD OF ACCOUNTING

THE GRANTS AND EXPENDITURES REPORTED IN SCHEDULE F WERE BASED ON THE ACCRUAL METHOD OF ACCOUNTING.

SCHEDULE F, PART I, LINES 1-7, COLUMN (E)

PROGRAM SERVICES INCLUDE SUPPORTING WIKIPEDIA, ITS SISTER PROJECTS AND OPEN SOURCE TECHNOLOGY.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

**2019**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

**Open to Public Inspection**

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17.  
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

|                    | (i) Name and address of individual or entity (fundraiser) | (ii) Activity | (iii) Did fundraiser have custody or control of contributions? |    | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col. (i) | (vi) Amount paid to (or retained by) organization |
|--------------------|---|---------------|--|----|-----------------------------------|---|---|
|                    |   |               | Yes  | No |                                   |   |   |
| 1                  | ATTACHMENT 1  |               |  |    |                                   |   |   |
| 2                  |   |               |  |    |                                   |   |   |
| 3                  |   |               |  |    |                                   |   |   |
| 4                  |   |               |  |    |                                   |   |   |
| 5                  |   |               |  |    |                                   |   |   |
| 6                  |   |               |  |    |                                   |   |   |
| 7                  |   |               |  |    |                                   |   |   |
| 8                  |   |               |  |    |                                   |   |   |
| 9                  |   |               |  |    |                                   |   |   |
| 10                 |   |               |  |    |                                   |   |   |
| <b>Total</b> ..... |   |               |  |    |                                   | 435,770.  |   |

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI,

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

|  |   | (a) Event #1    |         | (b) Event #2   |         | (c) Other events |  | (d) Total events<br>(add col. (a) through col. (c)) |
|--|---|-----------------|---------|----------------|---------|------------------|--|---|
|  |   | FALL FUNDRAISER |         | FALL FUNDRAISE |         | 1.               |  |   |
|  |   | (event type)    |         | (event type)   |         | (total number)   |  |   |
| Revenue  | <b>1</b> Gross receipts . . . . .   | 30,200.         | 26,293. | 40,449.        | 96,942. |                  |  |   |
|  | <b>2</b> Less: Contributions . . . . .  | 28,225.         | 24,468. | 35,799.        | 88,492. |                  |  |   |
|  | <b>3</b> Gross income (line 1 minus line 2) . . . . .                             | 1,975.          | 1,825.  | 4,650.         | 8,450.  |                  |  |   |
| Direct Expenses  | <b>4</b> Cash prizes . . . . .  |                 |         |                |         |                  |  |   |
|  | <b>5</b> Noncash prizes . . . . .   |                 |         |                |         |                  |  |   |
|  | <b>6</b> Rent/facility costs . . . . .  | 5,756.          | 2,360.  | 6,376.         | 14,492. |                  |  |   |
|  | <b>7</b> Food and beverages . . . . .   | 6,712.          | 12,119. | 12,650.        | 31,481. |                  |  |   |
|  | <b>8</b> Entertainment . . . . .  |                 |         |                |         |                  |  |   |
|  | <b>9</b> Other direct expenses . . . . .  | 2,808.          | 2,951.  | 4,146.         | 9,905.  |                  |  |   |
|  | <b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶ |                 |         |                | 55,878. |                  |  |   |
| <b>11</b> Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶ |   |                 |         | -47,428.       |         |                  |  |   |

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

|                 |   | (a) Bingo   |   | (b) Pull tabs/instant bingo/progressive bingo                       |  | (c) Other gaming |  | (d) Total gaming (add col. (a) through col. (c)) |
|-----------------|---|---|---|---|--|------------------|--|--|
|                 |   |   |   |   |  |                  |  |  |
| Revenue         | <b>1</b> Gross revenue . . . . .  |   |   |   |  |                  |  |  |
| Direct Expenses | <b>2</b> Cash prizes . . . . .  |   |   |   |  |                  |  |  |
|                 | <b>3</b> Noncash prizes . . . . .   |   |   |   |  |                  |  |  |
|                 | <b>4</b> Rent/facility costs . . . . .  |   |   |   |  |                  |  |  |
|                 | <b>5</b> Other direct expenses . . . . .  |   |   |   |  |                  |  |  |
|                 | <b>6</b> Volunteer labor . . . . .  | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No |  |                  |  |  |
|                 | <b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶        |   |   |   |  |                  |  |  |
|                 | <b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶ |   |   |   |  |                  |  |  |

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
**a** Is the organization licensed to conduct gaming activities in each of these states? . . . . .  Yes  No  
**b** If "No," explain: \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? . . . . .  Yes  No  
**b** If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

|                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

Director/officer       Employee       Independent contractor

- 17 Mandatory distributions:
  - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
  - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE G PART I

THE PROFESSIONAL FUNDRAISERS LISTED PROVIDES CONSULTING SERVICES TO ASSIST THE FOUNDATION IN ITS FUNDRAISING EFFORTS, AND ARE NOT ATTRIBUTED TO ANY SPECIFIC CHARITABLE CONTRIBUTIONS RAISED. DURING THE YEAR, SUPPORT WAS PROVIDED THROUGH EMAILING DONORS FOR FUNDRAISERS AND DESIGNING A FUNDRAISING BANNER. ADDITIONALLY, THE PROFESSIONAL FUNDRAISERS DID NOT HAVE CONTROL OVER OR RETAIN ANY FUNDS RAISED.

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

| NAME AND ADDRESS OF FUNDRAISER  | ACTIVITY    | DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS? |    | GROSS RECEIPTS FROM ACTIVITY | AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER | AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION |
|---|-------------|--|----|------------------------------|--|--|
|   |             | YES  | NO |                              |  |  |
| TRILOGY INTERACTIVE LLC<br><br>PO BOX 4177<br>MOUNTAIN VIEW<br>CA 94040 | SEE PART IV |  | X  |                              | 435,770.                                   |  |



**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

| 1 (a) Name and address of organization or government                                      | (b) EIN    | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|---|------------|---------------------------------|--------------------------|-----------------------------------|---|---------------------------------------|------------------------------------|
| (1) ART+FEMINISM, INC<br>323 W 39TH STREET, SUITE 912                                     | 83-2919353 | 501(C)(3)                       | 606,000.                 |                                   |   |                                       | FURTHER MISSION                    |
| (2) BLACK LUNCH TABLE<br>6225 N KENMORE AVE, APT 2N                                       | 82-5436759 | 501(C)(3)                       | 80,000.                  |                                   |   |                                       | FURTHER MISSION                    |
| (3) FRACTURED ATLAS, INC<br>PO BOX 55 HARTSDALE, NY 10530                                 | 11-3451703 | 501(C)(3)                       | 66,867.                  |                                   |   |                                       | FURTHER MISSION                    |
| (4) LONG NOW FOUNDATION<br>PO BOX 475668 SAN FRANCISCO, CA 94147                          | 68-0384748 | 501(C)(3)                       | 20,081.                  |                                   |   |                                       | FURTHER MISSION                    |
| (5) NATIONAL COUNCIL OF TEACHERS OF ENGLISH<br>340 N NEIL ST #104 CHAMPAIGN, IL 61820     | 37-0715886 | 501(C)(3)                       | 46,000.                  |                                   |   |                                       | FURTHER MISSION                    |
| (6) PEACE DEVELOPMENT FUND<br>PO BOX 1280 AMHERST, MA 01004                               | 04-2738794 | 501(C)(3)                       | 107,775.                 |                                   |   |                                       | FURTHER MISSION                    |
| (7) PRESIDENT & FELLOWS OF HARVARD COLLEGE<br>DBA HARVARD BUSINESS SCHOOL 01 SOLDIERS FIE | 04-2103580 | 501(C)(3)                       | 50,000.                  |                                   |   |                                       | RESEARCH SUPPORT                   |
| (8) SOFTWARE FREEDOM CONSERVANCY<br>137 MONTAGUE STREE BROOKLYN, NY 11201                 | 41-2203632 | 501(C)(3)                       | 52,000.                  |                                   |   |                                       | FURTHER MISSION                    |
| (9) TEMPLE UNIVERSITY<br>1803 N. BROAD STREET PHILADELPHIA, PA 19122                      | 23-1365971 | 501(C)(3)                       | 6,110.                   |                                   |   |                                       | FURTHER MISSION                    |
| (10) TIDES FOUNDATION<br>P.O. BOX 29903 SAN FRANCISCO, CA 94129                           | 51-0198509 | 501(C)(3)                       | 5,000,000.               |                                   |   |                                       | FURTHER MISSION                    |
| (11) TIDES ADVOCACY<br>PO BOX 29229 SAN FRANCISCO, CA 94129                               | 94-3153687 | 501(C)(3)                       | 8,723,000.               |                                   |   |                                       | FURTHER MISSION                    |
| (12) WIKI EDUCATION FOUNDATION<br>11 FUNSTON AVE SUITE A                                  | 30-0790695 | 501(C)(3)                       | 400,000.                 |                                   |   |                                       | FURTHER MISSION                    |

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

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

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

Schedule I (Form 990) (2019)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

**Part I General Information on Grants and Assistance**

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

| 1 (a) Name and address of organization or government          | (b) EIN    | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|---|------------|---------------------------------|--------------------------|-----------------------------------|---|---------------------------------------|------------------------------------|
| (1) WIKIMEDIA NYC, INC.<br>227 DEAN STREET BROOKLYN, NY 11217 | 27-0520584 | 501(C)(3)                       | 52,210.                  |                                   |   |                                       | FURTHER MISSION                    |
| (2) YALE UNIVERSITY<br>PO BOX 805 NEW HAVEN, CT 06503         | 06-0646973 | 501(C)(3)                       | 130,000.                 |                                   |   |                                       | RESEARCH SUPPORT                   |
| (3) CREATIVE COMMONS<br>PO BOX 1866 MOUNTAIN VIEW, CA 94042   | 04-3585301 | 501(C)(3)                       | 90,000.                  |                                   |   |                                       | FURTHER MISSION                    |
| (4)   |            |                                 |                          |                                   |   |                                       |                                    |
| (5)   |            |                                 |                          |                                   |   |                                       |                                    |
| (6)   |            |                                 |                          |                                   |   |                                       |                                    |
| (7)   |            |                                 |                          |                                   |   |                                       |                                    |
| (8)   |            |                                 |                          |                                   |   |                                       |                                    |
| (9)   |            |                                 |                          |                                   |   |                                       |                                    |
| (10)  |            |                                 |                          |                                   |   |                                       |                                    |
| (11)  |            |                                 |                          |                                   |   |                                       |                                    |
| (12)  |            |                                 |                          |                                   |   |                                       |                                    |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 15.

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

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

Schedule I (Form 990) (2019)

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

| (a) Type of grant or assistance           | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 SUPPORT FOR PROJECTS TO FURTHER MISSION | 4.                       | 70,700.                  |                                   | FMV   |  |
| 2   |                          |                          |                                   |   |  |
| 3   |                          |                          |                                   |   |  |
| 4   |                          |                          |                                   |   |  |
| 5   |                          |                          |                                   |   |  |
| 6   |                          |                          |                                   |   |  |
| 7   |                          |                          |                                   |   |  |

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

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

SCHEDULE I, PART I, QUESTION 2

GRANTS TO ORGANIZATIONS:

ORGANIZATIONS THAT HAVE MET EACH GRANT PROGRAM'S ELIGIBILITY CRITERIA ARE

ELIGIBLE TO PARTICIPATE IN A PUBLIC APPLICATION PROCESS. TO DO SO, THEY

SUBMIT A GRANT PROPOSAL THAT CONTAINS A DESCRIPTION OF THE

MISSION-RELATED WORK THEY ARE PROPOSING, A BUDGET, A START DATE AND

COMPLETION DATE OR DURATION OF THE GRANT PERIOD, AND A DESCRIPTION OF HOW

THIS WORK WILL ACHIEVE THE WIKIMEDIA FOUNDATION'S MISSION OR THE

WIKIMEDIA MOVEMENT STRATEGIC PRIORITIES. WHEN AN APPLICANT IS AWARDED A

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

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1                               |                          |                          |                                   |   |  |
| 2                               |                          |                          |                                   |   |  |
| 3                               |                          |                          |                                   |   |  |
| 4                               |                          |                          |                                   |   |  |
| 5                               |                          |                          |                                   |   |  |
| 6                               |                          |                          |                                   |   |  |
| 7                               |                          |                          |                                   |   |  |

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

GRANT AND BECOMES A GRANTEE, THE GRANTEE COMPLETES SCREENING REQUIREMENTS AND SIGNS A GRANT AGREEMENT. THE AGREEMENT STIPULATES THAT THEY WILL USE GRANT FUNDS FOR CHARITABLE PURPOSES CONSISTENT WITH THE WIKIMEDIA FOUNDATION'S MISSION AND THE PURPOSES DESCRIBED IN THE GRANT PROPOSAL; THAT THEY AGREE TO THE REPORTING REQUIREMENTS, INCLUDING MAINTAINING RECEIPTS/DOCUMENTATION OF EXPENSES; THAT THEY AGREE TO PROCEDURES FOR NOTIFYING THE WIKIMEDIA FOUNDATION OF IMPORTANT CHANGES THAT MAY AFFECT THE GRANT; AND THAT THEY WILL RETURN ANY UNUSED GRANT FUNDS AFTER THE END OF THE GRANT'S TERM. ONCE EACH GRANT IS COMPLETE, THE GRANTEE WILL SUBMIT A NARRATIVE AND FINANCIAL REPORT OR SERIES OF REPORTS THAT DEMONSTRATE

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

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1                               |                          |                          |                                   |   |  |
| 2                               |                          |                          |                                   |   |  |
| 3                               |                          |                          |                                   |   |  |
| 4                               |                          |                          |                                   |   |  |
| 5                               |                          |                          |                                   |   |  |
| 6                               |                          |                          |                                   |   |  |
| 7                               |                          |                          |                                   |   |  |

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

HOW THE GRANT FUNDS WERE SPENT AND DESCRIBE THE IMPACT OF THE WORK.

GRANTS TO INDIVIDUALS:

GRANTS TO INDIVIDUALS FOLLOW THE SAME PROCESS AS OTHER GRANTS UNLESS THEY ARE TRAVEL SCHOLARSHIPS. INDIVIDUALS APPLY FOR TRAVEL SCHOLARSHIPS (PRIMARILY TO ATTEND THE ANNUAL CONFERENCE, WIKIMANIA) AND APPLICATIONS ARE REVIEWED AND EITHER ACCEPTED OR DENIED. IN MOST CASES, TRAVEL IS THEN ARRANGED FOR THE INDIVIDUAL AND PAID FOR DIRECTLY BY THE WIKIMEDIA FOUNDATION. IN VERY LIMITED CASES, INDIVIDUALS BOOK TRAVEL THEMSELVES AND PROVIDE RECEIPTS TO THE FOUNDATION WHICH THEN REIMBURSES THEM BASED ON

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

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1                               |                          |                          |                                   |   |  |
| 2                               |                          |                          |                                   |   |  |
| 3                               |                          |                          |                                   |   |  |
| 4                               |                          |                          |                                   |   |  |
| 5                               |                          |                          |                                   |   |  |
| 6                               |                          |                          |                                   |   |  |
| 7                               |                          |                          |                                   |   |  |

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

THE RECEIPTS. ADDITIONALLY, THE FOUNDATION ALSO REIMBURSES (UPON REQUEST)  
FOR OTHER RELATED TRAVEL EXPENSES SUCH AS VISA APPLICATION COSTS AND  
INCIDENTALS LIKE MEALS AND AIRPORT TRANSFERS.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

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

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

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

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

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

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

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

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
  - b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

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

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

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

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

|           | Yes | No |
|-----------|-----|----|
| <b>1a</b> |     |    |
| <b>1b</b> |     |    |
| <b>2</b>  |     |    |
| <b>3</b>  |     |    |
| <b>4a</b> | X   |    |
| <b>4b</b> |     | X  |
| <b>4c</b> |     | X  |
| <b>5a</b> |     | X  |
| <b>5b</b> |     | X  |
| <b>6a</b> |     | X  |
| <b>6b</b> |     | X  |
| <b>7</b>  |     | X  |
| <b>8</b>  |     | X  |
| <b>9</b>  |     |    |

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

Schedule J (Form 990) 2019

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

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

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

| (A) Name and Title |   | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |    |
|--------------------|---|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|----|
|                    |   | (i) Base compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |  |                         |                                 |   |    |
| 1                  | KATHERINE MAHER<br>CEO/EXECUTIVE DIRECTOR                 | (i)  | 387,284.                            | 0.                                  | 486.   | 11,619.                 | 9,616.                          | 409,005.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 2                  | JAIME VILLAGOMEZ<br>CFO & TREASURER                       | (i)  | 284,256.                            | 0.                                  | 5,100.   | 8,612.                  | 25,112.                         | 323,080.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 3                  | ERIKA BJUNE FROM 7/2019<br>INTERIM CHIEF TECHNOLOGY OFFIC | (i)  | 182,162.                            | 0.                                  | 2,567.   | 7,359.                  | 8,833.                          | 200,921.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 4                  | LISA SEITZ<br>CHIEF ADVANCEMENT OFFICER                   | (i)  | 249,653.                            | 0.                                  | 2,464.   | 7,517.                  | 25,112.                         | 284,746.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 5                  | ANTHONY NEGRIN<br>CHIEF PRODUCT OFFICER                   | (i)  | 236,331.                            | 0.                                  | 1,661.   | 1,599.                  | 19,305.                         | 258,896.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 6                  | VALERIE D'COSTA THRU 11<br>CHIEF OF COMMUNITY ENGAGEMENT  | (i)  | 187,591.                            | 0.                                  | 85,489.  | 6,719.                  | 6,028.                          | 285,827.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 7                  | JOADY LOHR<br>DIRECTOR, HUMAN RESOURCES                   | (i)  | 199,508.                            | 0.                                  | 2,974.   | 8,237.                  | 25,147.                         | 235,866.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 8                  | ANTHONY SEBRO<br>DEPUTY GC, VP, & INTERIM SEC.            | (i)  | 211,116.                            | 0.                                  | 1,861.   | 7,895.                  | 25,112.                         | 245,984.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 9                  | HEATHER WALLS<br>CHIEF CREATIVE OFFICER                   | (i)  | 210,040.                            | 0.                                  | 2,488.   | 0.                      | 6,435.                          | 218,963.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 10                 | JANEEN UZZELL<br>CHIEF OPERATING OFFICER                  | (i)  | 281,647.                            | 0.                                  | 1,105.   | 8,470.                  | 7,032.                          | 298,254.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 11                 | MARGARET NOVOTNY<br>SENIOR DIRECTOR, DESIGN               | (i)  | 190,023.                            | 0.                                  | 3,534.   | 7,781.                  | 25,112.                         | 226,450.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 12                 | ANTHONY LE<br>CONTROLLER                                  | (i)  | 189,435.                            | 0.                                  | 2,168.   | 7,616.                  | 25,147.                         | 224,366.  | 0. |
|                    |   | (ii)   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  | 0. |
| 13                 |   | (i)  |                                     |                                     |  |                         |                                 |   |    |
|                    |   | (ii)   |                                     |                                     |  |                         |                                 |   |    |
| 14                 |   | (i)  |                                     |                                     |  |                         |                                 |   |    |
|                    |   | (ii)   |                                     |                                     |  |                         |                                 |   |    |
| 15                 |   | (i)  |                                     |                                     |  |                         |                                 |   |    |
|                    |   | (ii)   |                                     |                                     |  |                         |                                 |   |    |
| 16                 |   | (i)  |                                     |                                     |  |                         |                                 |   |    |
|                    |   | (ii)   |                                     |                                     |  |                         |                                 |   |    |



**Part III Supplemental Information**

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

SCHEDULE J, PART I, LINE 4

PER TERMS OF A SEVERANCE AGREEMENT, UPON SEPARATION FROM THE ORGANIZATION

THE FOLLOWING KEY EMPLOYEE WAS ENTITLED TO RECEIVE A SEVERANCE PAYMENT

DURING 2019: VALERIE D'COSTA, \$83,819

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

**Part I Types of Property**

|  | (a)<br>Check if<br>applicable | (b)<br>Number of contributions or<br>items contributed | (c)<br>Noncash contribution<br>amounts reported on<br>Form 990, Part VIII, line 1g | (d)<br>Method of determining<br>noncash contribution amounts |
|--|-------------------------------|--|--|--|
| 1 Art - Works of art . . . . .   |                               |  |  |  |
| 2 Art - Historical treasures . . . . .                                       |                               |  |  |  |
| 3 Art - Fractional interests . . . . .                                       |                               |  |  |  |
| 4 Books and publications . . . . .   |                               |  |  |  |
| 5 Clothing and household<br>goods . . . . .                                  |                               |  |  |  |
| 6 Cars and other vehicles. . . . .   |                               |  |  |  |
| 7 Boats and planes . . . . .   |                               |  |  |  |
| 8 Intellectual property . . . . .  |                               |  |  |  |
| 9 Securities - Publicly traded . . . . .                                     | X                             | 56 .   | 224,253 .  | AVG MARKET VALUE   |
| 10 Securities - Closely held stock . . . . .                                 |                               |  |  |  |
| 11 Securities - Partnership, LLC,<br>or trust interests . . . . .            |                               |  |  |  |
| 12 Securities - Miscellaneous . . . . .                                      |                               |  |  |  |
| 13 Qualified conservation<br>contribution - Historic<br>structures . . . . . |                               |  |  |  |
| 14 Qualified conservation<br>contribution - Other . . . . .                  |                               |  |  |  |
| 15 Real estate - Residential . . . . .                                       |                               |  |  |  |
| 16 Real estate - Commercial . . . . .  |                               |  |  |  |
| 17 Real estate - Other . . . . .   |                               |  |  |  |
| 18 Collectibles . . . . .  |                               |  |  |  |
| 19 Food inventory . . . . .  |                               |  |  |  |
| 20 Drugs and medical supplies . . . . .                                      |                               |  |  |  |
| 21 Taxidermy . . . . .   |                               |  |  |  |
| 22 Historical artifacts . . . . .  |                               |  |  |  |
| 23 Scientific specimens . . . . .  |                               |  |  |  |
| 24 Archeological artifacts . . . . .   |                               |  |  |  |
| 25 Other ▶ ( )   |                               |  |  |  |
| 26 Other ▶ ( )   |                               |  |  |  |
| 27 Other ▶ ( )   |                               |  |  |  |
| 28 Other ▶ ( )   |                               |  |  |  |

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29**

|   | Yes | No |
|---|-----|----|
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? . . . . . |     | X  |
| b If "Yes," describe the arrangement in Part II.  |     |    |
| 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? . . . . .   | X   |    |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .  |     | X  |
| b If "Yes," describe in Part II.  |     |    |
| 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.   |     |    |

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

Schedule M (Form 990) 2019

JSA

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**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

---

PART I COLUMN (B)

THE ORGANIZATION IS REPORTING 56 NUMBER OF CONTRIBUTIONS DURING THE YEAR.

**SCHEDULE O  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

WIKIMEDIA FOUNDATION, INC.

**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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Employer identification number

20-0049703

FORM 990 PART VI, LINE 7A

THE BOARD CONSISTS OF A MAXIMUM OF TEN TRUSTEES. THREE SEATS ARE SELECTED BY THE WIKIMEDIA COMMUNITY, TWO SEATS ARE SELECTED BY THE WIKIMEDIA AFFILIATES, ONE SEAT IS RESERVED FOR JIMMY WALES AS THE COMMUNITY FOUNDER, AND FOUR SEATS MAY BE SELECTED BY THE BOARD FOR SPECIFIC EXPERTISE. AS WITH ALL BOARD SEATS, THE BOARD MUST INDEPENDENTLY APPOINT THE CANDIDATES FOR THE COMMUNITY AND AFFILIATE SEATS.

FORM 990 PART VI, LINE 11A

REVIEW OF FORM 990:

THE FIRST DRAFT OF THE 990 WAS DEVELOPED BY AN EXTERNAL ACCOUNTING FIRM UNDER THE DIRECTION OF THE CONTROLLER WITH ADDITIONAL GUIDANCE FROM THE CHIEF FINANCIAL OFFICER (CFO). IT WAS REVIEWED FOR ACCURACY AND COMPLETENESS BY THE CFO AND THEN BY THE CEO/EXECUTIVE DIRECTOR OR DELEGATE. THEN A MEETING OF THE AUDIT COMMITTEE WAS HELD AT WHICH THE CFO AND EXTERNAL ACCOUNTING FIRM WALKED THROUGH THE DRAFT IN DETAIL FOR THE AUDIT COMMITTEE'S APPROVAL. A COMPLETE COPY OF THE FORM 990 WAS PROVIDED TO THE VOTING MEMBERS OF THE GOVERNING BODY PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990 PART VI, LINE 12

CONFLICT OF INTEREST:

THE ORGANIZATION'S BOARD MEMBERS, OFFICERS, EXECUTIVES, AND KEY EMPLOYEES (COVERED PERSONS) COMPLETE ANNUALLY A CONFLICT OF INTEREST STATEMENT THE

|  |  |
|--|--|
| Name of the organization<br>WIKIMEDIA FOUNDATION, INC. | Employer identification number<br>20-0049703 |
|--|--|

PURPOSE OF WHICH IS TO IDENTIFY ANY PERSONAL, FAMILY AND/OR BUSINESS RELATIONSHIPS AND/OR TRANSACTIONS THAT MAY POSE A POTENTIAL CONFLICT. THE FILED CONFLICT OF INTEREST FORMS ARE SUBMITTED TO AND REVIEWED BY THE GENERAL COUNSEL AND ONLY REVIEWED BY THE BOARD IF NEEDED. ADDITIONALLY, THE COVERED PERSONS ALSO COMPLETES ANNUALLY A PLEDGE OF PERSONAL COMMITMENT THAT AFFIRMS THAT THE INDIVIDUAL IS IN COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY AND THAT THE INDIVIDUAL WILL PROMPTLY NOTIFY THE EXECUTIVE DIRECTOR AND THE BOARD CHAIR WHEN A CONFLICT OR POTENTIAL CONFLICT ARISES. FURTHERMORE, IN THE CASE OF A CONFLICT, THE INDIVIDUAL AGREES TO REFRAIN FROM USING HIS OR HER PERSONAL INFLUENCE TO ENCOURAGE THE FOUNDATION TO ENTER THE TRANSACTION AND MUST PHYSICALLY EXCUSE HIMSELF OR HERSELF FROM ANY FURTHER DISCUSSIONS OTHER THAN TO ANSWER QUESTIONS ABOUT THE TRANSACTION. IN THE CASE OF POTENTIAL CONFLICT, THE REMAINING BOARD MEMBERS REVIEW THE POTENTIAL TRANSACTION TO DETERMINE WHETHER SAID TRANSACTION IS FAIR AND REASONABLE TO THE FOUNDATION AND LEGAL COUNSEL IS CONSULTED AS NECESSARY TO ENSURE THAT SUCH A TRANSACTION WOULD NOT CONSTITUTE AN EXCESS BENEFIT TRANSACTION. REMAINING BOARD MEMBERS REVIEW THE POTENTIAL TRANSACTION TO DETERMINE WHETHER SAID TRANSACTION IS FAIR AND REASONABLE TO THE FOUNDATION AND LEGAL COUNSEL IS CONSULTED AS NECESSARY TO ENSURE THAT SUCH A TRANSACTION WOULD NOT CONSTITUTE AN EXCESS BENEFIT TRANSACTION. WOULD NOT CONSTITUTE AN EXCESS BENEFIT TRANSACTION.

FORM 990, PART VI, LINES 15A & 15B

THE WIKIMEDIA FOUNDATION BOARD OF TRUSTEES OR HR COMMITTEE, A BOARD SUB-COMMITTEE IS RESPONSIBLE FOR APPROVING THE COMPENSATION OF THE

|  |  |
|--|--|
| Name of the organization<br>WIKIMEDIA FOUNDATION, INC. | Employer identification number<br>20-0049703 |
|--|--|

CEO/EXECUTIVE DIRECTOR, OTHER OFFICERS AND KEY EMPLOYEES. FOR 2019 COMPENSATION, THE BOARD OF TRUSTEES OR HR COMMITTEE, A BOARD SUB-COMMITTEE, ALL INDEPENDENT MEMBERS, REVIEWED THE PROPOSED COMPENSATION, AND MADE A DECISION BASED ON COMPENSATION DATA FROM COMPARABLE ORGANIZATIONS. THE BOARD OF TRUSTEES OR HR COMMITTEE, A BOARD SUB-COMMITTEE DELIBERATIONS AND DECISION WERE CONTEMPORANEOUSLY DOCUMENTED, INCLUDING WHO ATTENDED AND VOTED AND A DESCRIPTION OF THE COMPARABLE DOCUMENTATION USED AND HOW IT WAS OBTAINED.

FORM 990 PART VI, LINE 19

THE ORGANIZATION'S WEBSITE INCLUDES LINKS TO ITS GOVERNING DOCUMENTS, ITS CONFLICT OF INTEREST POLICY AND ITS AUDITED FINANCIAL STATEMENTS.

[HTTPS://FOUNDATION.WIKIMEDIA.ORG/WIKI/BYLAWS](https://foundation.wikimedia.org/wiki/Bylaws)

[HTTPS://FOUNDATION.WIKIMEDIA.ORG/WIKI/CONFLICT\\_OF\\_INTEREST\\_POLICY](https://foundation.wikimedia.org/wiki/Conflict_of_interest_policy)

[HTTPS://WIKIMEDIAFOUNDATION.ORG/ABOUT/FINANCIAL-REPORTS/](https://wikimediafoundation.org/about/financial-reports/)

FORM 990 PART XI, LINE 9

RETURN OF UNUSED GRANT \$ 136,314

FORM 990, SCHEDULE B

BECAUSE THE FOUNDATION DID NOT RECEIVE CONTRIBUTIONS THAT EXCEEDED 2% OF TOTAL CONTRIBUTIONS AND MET THE PUBLIC SUPPORT TEST, SCHEDULE B IS NOT REQUIRED TO BE FILED.

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number

20-0049703

ATTACHMENT 1FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE MISSION OF THE WIKIMEDIA FOUNDATION IS TO EMPOWER AND ENGAGE PEOPLE AROUND THE WORLD TO COLLECT AND DEVELOP EDUCATIONAL CONTENT UNDER A FREE LICENSE OR IN THE PUBLIC DOMAIN AND TO DISSEMINATE IT EFFECTIVELY AND GLOBALLY. IN COLLABORATION WITH A NETWORK OF CHAPTERS, THE FOUNDATION PROVIDES THE ESSENTIAL INFRASTRUCTURE AND AN ORGANIZATIONAL FRAMEWORK FOR THE SUPPORT AND DEVELOPMENT OF MULTILINGUAL WIKI PROJECTS AND OTHER ENDEAVORS WHICH SERVE THIS MISSION. THE FOUNDATION WILL MAKE AND KEEP USEFUL INFORMATION FROM ITS PROJECTS AVAILABLE ON THE INTERNET FREE OF CHARGE, IN PERPETUITY.

ATTACHMENT 2FORM 990, PART III - PROGRAM SERVICE, LINE 4A

OUR CORE FUNCTIONS INCLUDE SUPPORT FOR WIKIPEDIA.ORG AND THE OTHER WIKIMEDIA WEBSITES, WHICH TOGETHER ARE ONE OF THE WORLD'S MOST POPULAR WEB PROPERTIES, AND THE WORLD'S LARGEST COLLABORATIVE FREE KNOWLEDGE PROJECT. THE WIKIMEDIA FOUNDATION PROVIDES THE SERVERS AND ELECTRICITY NEEDED TO KEEP THE WEBSITES RUNNING, ALONG WITH DEDICATED TECHNICAL RESOURCES TO BUILD, IMPROVE, AND MAINTAIN THE TECHNICAL INFRASTRUCTURE OF WIKIMEDIA PROJECTS. THESE ONGOING ENGINEERING EFFORTS AND PRODUCT IMPROVEMENTS REQUIRE RESEARCH AND DESIGN WORK, AS WELL AS LEGAL SUPPORT. ALL OF THIS ALLOWS FOR THE BEST EXPERIENCE FOR OUR READERS AND VOLUNTEER COMMUNITY, ENSURING USERS CONTINUE TO ACCESS, CONTRIBUTE TO AND GROW THE WORLD'S LARGEST ONLINE FREE KNOWLEDGE RESOURCE.

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| Name of the organization<br>WIKIMEDIA FOUNDATION, INC. | Employer identification number<br>20-0049703 |
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ATTACHMENT 3FORM 990, PART III - PROGRAM SERVICE, LINE 4B

THE WIKIMEDIA FOUNDATION GRANTMAKING AND PROGRAM DEVELOPMENT DEPARTMENT FOCUSES ON GROWING WIKIMEDIA IN VARIOUS REGIONS AROUND THE WORLD AND EXPANDING DIVERSITY WITHIN THE CONTRIBUTOR BASE. THESE PROGRAMS AND EFFORTS DIRECTLY SUPPORT CONTRIBUTORS THROUGH GRANTS FOR PROJECTS, PROGRAMS, AND CAMPAIGNS BY INDIVIDUALS AND ORGANIZATIONS. GRANTMAKING AND PROGRAM DEVELOPMENT TEAM ALSO STRIVES TO FURTHER THE MISSIONS OF WIKIMEDIA, SUCH AS OPEN ACCESS AND EDUCATION, THROUGH PROGRAMS LIKE OUR GLOBAL EDUCATION PROGRAM, AS WELL THROUGH WORLDWIDE PROGRAM EVALUATION, RESEARCH, AND GLOBAL COMMUNICATIONS. BECAUSE OPENNESS AND INCLUSIVITY ARE KEY TO THE SUCCESS OF THE WIKIMEDIA PROJECTS, GRANTMAKING AND DEVELOPMENT AIM TO BROADEN THE DIVERSITY OF VOICES AND EXPAND THE REACH OF OUR PROJECTS TO DIVERSE INDIVIDUALS AND GROUPS AROUND THE WORLD.

ATTACHMENT 4FORM 990, PART VI, LINE 17 - STATES

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

ATTACHMENT 5



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| Name of the organization<br>WIKIMEDIA FOUNDATION, INC. | Employer identification number<br>20-0049703 |
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ATTACHMENT 5 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

| <u>NAME AND ADDRESS</u>   | <u>DESCRIPTION OF SERVICES</u> | <u>COMPENSATION</u> |
|---|--------------------------------|---------------------|
| JONES DAY<br>555 CALIFORNIA STREET<br>SAN FRANCISCO, CA 94104             | LEGAL SERVICES                 | 657,877.            |
| MINASSIAN MEDIA, INC<br>151 WEST 25TH STREET<br>NEW YORK, NY 10001        | PUBLIC RELATIONS               | 407,185.            |
| CULTIVATING LEADERSHIP LLC<br>105 ARMELLINO COURT<br>HIGHTSTOWN, NJ 08520 | PROF DEVELOPMENT               | 344,644.            |
| PEOPLE RUNWAY LLC<br>735 COLORADO AVENUE<br>PALO ALTO, CA 94303           | HR CONSULTING                  | 341,560.            |
| TRILOGY INTERACTIVE LLC<br>PO BOX 4177<br>MOUNTAIN VIEW, CA 94040         | FUNDRAISING SERVICES           | 301,115.            |