PUBLIC INSPECTION COPY

Return of Organization Exempt From Income Tax

Form 990

Department of the Treasury

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

OMB No. 1545-0047

Open to Public Inspection

▶ 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.

Internal Revenue Service 07/01, 2015, and ending 06/30,20 16 A For the 2015 calendar year, or tax year beginning D Employer identification number C Name of organization B Check if applicable WIKIMEDIA FOUNDATION, INC. 20-0049703 Number and street (or P.O. box if mail is not delivered to street address) Room/suite F Telephone number (415) 839-6885 149 NEW MONTGOMERY, 6TH FLOOR Initial return City or town, state or province, country, and ZIP or foreign postal code Amended G Gross receipts \$ 100,303,426. SAN FRANCISCO, CA 94105 Yes X No JAIME VILLAGOMEZ H(a) Is this a group return for Application Name and address of principal officer: subordinates? 149 NEW MONTGOMERY 6TH FLOOR SAN FRANCISCO, CA 94105 H(b) Are all subordinates included? If "No." attach a list, (see instructions 501(c) ((insert no.) 4947(a)(1) or Website: ▶ WWW.WIKIMEDIAFOUNDATION.ORG H(c) Group exemption number L Year of formation: 2003 M State of legal domicile: Form of organization: X Corporation Other > Trust Association Part I Summary 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 Governance SHARE IN FREE KNOWLEDGE. 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 8. Number of voting members of the governing body (Part VI, line 1a) 8. 229. 80,000. 6 Total number of volunteers (estimate if necessary) 35,945. 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a -4,635. b Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Prior Year 78,151,457. 77,451,505. Contributions and grants (Part VIII, line 1h) COPY FOR 78,112. 25,498. Program service revenue (Part VIII, line 2g). PUBLIC INSPECTION 444,315. 586,634. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 70,467. 10,834. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 78,691,737. 78,127,085. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 11,429,017. 4.614.390. Benefits paid to or for members (Part IX, column (A), line 4) 14 31,713,546. 26,125,610. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). 15 295.878 246,510. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ _____7,619,631. 21,465,616. 21,623,404. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 65,061,845. 52,452,126. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 13,629,892. 25,674,959. Revenue less expenses. Subtract line 18 from line 12 Assets or **Beginning of Current Year** End of Year 82,753,985. 97,642,735. 20 Total assets (Part X, line 16) 5,859,940 4,933,687 21 Total liabilities (Part X, line 26) 91,782,795 77,820,298. Net assets or fund balances. Subtract line 21 from line 20. 22 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. Vulleyno 12-2017 Date Sign Signature of officer CFO VILLAGOMEZ Here JAIME Type or print name and title Date Print/Type preparer's name Check Valerio 9 Ball 5/9/17 Paid self-employed P00178114 VALERIE J BALL Preparer 13-5565207 Firm's name ► KPMG LLP Firm's EIN ▶ Use Only 415-963-5100 Phone no. Firm's address ▶ 55 SECOND STREET, #1400 SAN FRANCISCO, CA 94105 Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2015)

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Fon	n 990 (2015) Page 2
Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
_	Briefly describe the organization's mission:
•	ATTACHMENT 1
_	Did the association undertake any circlificant associate during the year which were not listed on the
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services? Yes X No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
	ATTACHMENT 2
_	
4b	(Code:) (Expenses \$
	ATTACHMENT 3
_	
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
_	Otto and the Control of Control o
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
40	Total program service expenses ► 46,977,975.
JSA	Poten program sorting superiors (2015)
	37135U 1561 5/9/2017 8:21:43 AM V 15-7.18 2341015 PAGE

PAGE 4

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

Part I	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
		24a		х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
•		24c		
d		24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
-	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
		25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A culter of former officer, director, trastica, or may complete assistant and an extension	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			l
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			"
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	ا مما		x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		^
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			v
	or IV, and Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	256		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	26	1	x
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	 	<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37	l	x
	Part VI School and analysis and applied in School and O. for Port VI. lines 11b and	_		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	38	x	
	19? Note. All Form 990 filers are required to complete Schedule O.			(2045)

Par	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
h	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0.			
	Did the organization comply with backup withholding rules for reportable payments to vendors and	3.50		
C	reportable gaming (gambling) winnings to prize winners?	1c	Х	
•	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
Za				MIN
-	Statements, filed for the calendar year ending with or within the year covered by this return.	2b	х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	30		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		v	
	account)?	4a	Х	10.000
b	If "Yes," enter the name of the foreign country: ▶ UNITED KINGDOM			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).	10,000		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	_X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		X
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
C	required to file Form 8282?	7c		X
4	If "Yes," indicate the number of Forms 8282 filed during the year			
a	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
e	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
1	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		100	
8		8		
220	sponsoring organization have excess business holdings at any time during the year?	The sale		
9	Sponsoring organizations maintaining donor advised funds.	9a		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9b		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	8450B		
10	Section 501(c)(7) organizations. Enter:			10 100
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 950, Fart VIII, line 12, 101 public use of club recimites.	PAUR		3 42
11	Section 501(c)(12) organizations. Enter:		THE REAL PROPERTY.	
	Gross income from members of shareholders	- XIII		
b	Gross income from other sources (Do not net amounts due or paid to other sources		127	
	adainst amounts due of received from them.)	12a		
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	120		1000
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]		1	300
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	No. of Street, or other Designation of the least of the l	100000
а	Is the organization licensed to issue qualified health plans in more than one state?	ısa		
	Note. See the instructions for additional information the organization must report on Schedule O.			7-2-3
b	Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	44-		X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990	(2015)
JSA		r orm	330	(2013)

Part VI

Section A. Governing Body and Management

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

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
10.55	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			v
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	Х	<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	-	X
6	Did the organization have members or stockholders?			_
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Х	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
b	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
·	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	92700		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coae	Yes	No
		10a	163	X
10a	Did the organization have local chapters, branches, or affiliates?	iva		Α
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b		
12727	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		West.	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No,"</i> go to line 13	12a	Х	
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
b	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	I SERVICE A	Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	Х	
a	The organization's CEO, Executive Director, or top management official	15b	11	х
b	Other officers or key employees of the organization	, 55	102	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		х
ls.	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	133		
ь	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			200
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion 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 (or 1024 if applicable), 990, and 990-1 (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply. X Own website			
	I om negative	orest	nalia	, and
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	CIEST	polic)	y, and
00	financial statements available to the public during the tax year.	s: >		
20	State the name, address, and telephone number of the person who possesses the organization's books and record JAIME VILLAGOMEZ 149 NEW MONTGOMERY, 6TH FLOOR SAN FRANCISCO, CA 94105 415-839-6885	2000	000	

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Form 990 (2015)

PAGE 8

Part VII	Compensation of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	ano
	Independent Contra		·	·	•	• •	•	-	• •	
	Check if Schedule (O contains	a response	or note to	any lir	ne in this Part	VII			

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

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

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

Check this box if neither the organization nor	any related	orga	niza	tion	CO	mpen	sate	ed any current offic	er, director, or trus	stee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office Individua	unle	Pos heck ss pe	mon nom	n din st Highest compensated is of employee	an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1)JIMMY WALES	2.00			:						
FOUNDER	0.	X	$oxed{oxed}$		<u> </u>			0.	0.	<u> </u>
(2)CHRISTOPHE HENNER	2.00							_	_	
CHAIR	0.	Х		Х			_	0.	0.	0.
(3)MARIA SEFIDARI	2.00				ļ				l .	
VICE CHAIR	0.	X	ļ	X	<u> </u>		_	0.	0.	<u> </u>
(4)KELLY BATTLES	2.00									
TRUSTEE	0.	X	_	<u> </u>			_	. 0.	0.	
(5)DARIUSZ JEMIELNIAK	2.00	1		1				_		_
TRUSTEE	0.	Х	L	ļ	_		<u> </u>	0.	0.	<u> </u>
(6)GUY KAWASAKI	2.00								_	
TRUSTEE	0.	Х	<u> </u>	<u> </u>				0.	0.	0.
(7)ALICE WIEGAND	2.00									_
TRUSTEE	0.	X	_		L.			0.	0.	<u> </u>
(8)NATALIIA TYMKIV	2.00				1					_
TRUSTEE	0.	Х			╙	ļ	_	0.	0.	0
(9)JAN-BART DE VREEDE	2.00]							1	_
CHAIR - THRU DEC/15	0.	X	<u> </u>	X		<u> </u>	<u> </u>	0.	0.	0.
(10) PHOEBE AYERS	2.00]								
TRUSTEE - THRU JUL/15	0.	X		<u> </u>				0.	0.	0.
(11)PATRICIO LORENTE	2.00								1	_
CHAIR - FROM JAN/16	0.	X	$oxed{oxed}$	X	_		<u> </u>	0.	0.	0
(12)JAMES HEILMAN	2.00]							_	_
TRUSTEE - THRU DEC/15	0.	X	$oldsymbol{oldsymbol{oldsymbol{eta}}}$	<u> </u>	<u> </u>	<u> </u>	 	0.	0.	0.
(13)ARNNON GESHURI	2.00]		_	_	1
TRUSTEE - JAN/16	0.	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0.	0.	<u> </u>
(14)DENNY VRANDECIC	2.00	1								
TRUSTEE - THRU APR/16	0.	Х		<u> </u>	<u> </u>	<u> </u>	1	0.	0.	0.

Form 990 (2015)

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(A) Name and title	(B) Average hours per		not ch	Pos heck	more	than o		(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)				irect	Highest compensated		from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
15) FRIEDA BRIOSCHI TRUSTEE - THRU JUN/16	2.00	х						0.	0.	(
16) STU WEST TRUSTEE - THRU DEC/15	2.00	х						0.	0.	(
17) SAMUEL KLEIN TRUSTEE - JUL/2015	2.00	х						0.	0.	(
18) LILA TRETIKOV EXECUTIVE DIRECTOR-THRU MAR/16	40.00			х				344,336.	0.	31,982
19) KATHERINE MAHER EXECUTIVE DIR - FROM APR/16	40.00			х				166,353.	0.	13,461
20) JAIME VILLAGOMEZ CFO & TREASURER - FROM FEB/16	40.00			х				0.	0.	C
21) GARFIELD BYRD TREASURER & CFA - THRU SEP/16	40.00			х				161,063.	0.	20,368
22) GEOFF BRIGHAM SECRETARY & GENERAL COUNSEL	40.00			х				258,972.	0.	26,876
23) TERENCE GILBEY COO	40.00				х			250,231.	0.	18,794
24) LISA SEITZ-GRUWELL CHIEF REVENUE OFFICER	40.00				х			168,067.	0.	25,933
25) ERIK MOELLER VP OF PRODUCT	40.00					х		302,046.	0.	2,863
1b Sub-total	ection A .	 	 	: :		: : :	•	2,474,778.	0.	199,201 199,201
2 Total number of individuals (including but not reportable compensation from the organization)	limited to t	hose 7	liste	ed al	bov	e) who	o re	eceived more than	\$100,000 of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu	er, directo	or, or	tru dividi	uste	е,	key 6	emp	bloyee, or highes	t compensated	Yes N

		1	163	110
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		Х
	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Х

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
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 ▶ 17

Form 990 (2015) PAGE 10

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	ye	es,	and I	ligl	nest Compensat	ed Employ	ees (c	ontinued)
(A) Name and title	(B) Average hours per week (list any hours for	Position (do not check more than one box, unless person is both ar officer and a director/trustee						(D) Reportable compensation from the	Reportable compensation from related organizations	on from d ions	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-	MISC)	from the organization and related organizations
26) GAYLE YOUNG	40.00							Secretaria Princes			
CHIEF TALENT & CULTURE OFFICER	0.	_		_		Х		183,725.		0.	6,323
27) ANTHONY NEGRIN DIRECTOR OF ENGINEERING	40.00					х		177,720.		0.	18,699
28) STANISLAV MALYSHEV	40.00							,			
SR. SOFTWARE ENGINEER	0.					Х		180,499.		0.	23,410
29) DAMON SICORE VP OF ENGINEERING	40.00					х		281,766.		0.	10,492
VP OF ENGINEERING	0.					Λ		201,700.			10,152
							11 - 1				
	 -	-									
1b Sub-total	ection A .	: : :	: :	: :			A A A				
2 Total number of individuals (including but not reportable compensation from the organizatio	limited to t n ▶	hose 79		d a	bov	e) who	o re	ceived more than	\$100,000	of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched	er, directo	or, or ch ind	tru	uste ual	e,	key e	emp	oloyee, or highes	t compens	ated	Yes N
4 For any individual listed on line 1a, is the organization and related organizations grindividual	eater than	1 \$15 	50,0 • •	00?	? If	"Yes)," • •	complete Schedu •••••	le J for :	such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co es," comple	mpen te Scl	sati hedu	on ile J	fron I for	n any such	un per	related organization	on or indivi	dual 	5 X
Section B. Independent Contractors											
Complete this table for your five highest com- compensation from the organization. Report of year.	pensated i compensati	ndepe ion fo	ende r the	ent e ca	con	tracto dar ye	rs t ar e	hat received more ending with or with	than \$100 nin the orga	0,000 c anizatio	of n's tax
(A) Name and business add	dress							(B) Description of se	ervices	C	(C) Compensation
Total number of independent contractors (i more than \$100,000 in compensation from the contractors of t	ncluding b	ut no	t lin	nite	d to	thos	se I	isted above) who	received		

	990 (2			OUNDATION,	INC.		20-00497	03 Page 9
Par	t VIII			es or note to se	uling in this Bort VIII	T		
		Check if Schedule O co	ontains a respon	ise of note to an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, and similar amounts not included Noncash contributions included Total. Add lines 1a-1f	1b 1c 1d 1d 1e grants. 1f above 1f		78,151,457.			
nue				Business Code				
Program Service Revenue	2a b c d	WIKIMANIA CONFERENCE		518210	25,498.	25,498.		
grar	e	All other program service rev	ionuo.					
Pro	g	Total. Add lines 2a-2f			25,498.	WITE STATE		
	3 4 5		cluding divider tax-exempt bond	nds, interest,	1,089,009.			1,089,009.
	6a b c d	Gross rents	(i) Securities	(ii) Other	0.			
	b	assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	20,917,437.					
1	d	Net gain or (loss)		▶	-644,694.			-644,694
Other Revenue		Gross income from fundra events (not including \$ of contributions reported on See Part IV, line 18 Less: direct expenses Net income or (loss) from fu	line 1c).		0.	18-		
		Gross income from gaming See Part IV, line 19	activities.					
	b c	Less: direct expenses Net income or (loss) from g	b aming activities	0.001	0.			
	10a	Gross sales of invent returns and allowances	ory, less	85,502.				
	b c	Less: cost of goods sold	les of inventory,		35,945.		35,945.	
		Miscellaneous Revenu	ie	Business Code				
	11a b	MISCELLANEOUS REVENUE		900099	34,522.			34,522
	c d	All other revenue						

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478,837. Form 990 (2015)

PAGE 12

34,522.

Total revenue. See instructions. .

e Total. Add lines 11a-11d · · · · · · · · · · · · · · · · · ▶

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 resp	onse or note to any line	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21,	5,151,622.	5,151,622.		***
2	Grants and other assistance to domestic individuals. See Part IV, line 22	324,905.	324,905.		
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	5,952,490.	5,952,490.		
	Benefits paid to or for members	1,275,026.	417,470.	824,912.	32,644.
6	trustees, and key employees	0.	127,770	921,722	
7	Other salaries and wages	24,762,700.	19,651,690.	3,014,323.	2,096,687.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	757,163.	533,013.	146,823.	77,327.
9	Other employee benefits	3,309,502.	2,423,205.	624,872.	261,425. 139,228.
10 11	Payroll taxes	1,609,155.	1,163,964.	305,963.	139,228.
	Management , , , , , , , , , , , , , , , , , , ,	1,750,605.	792,790.	866,469.	91,346.
	Legal	116,370.	192,190.	116,370.	71,540.
	Accounting	415.		415.	
	De Professional fundraising services. See Part IV, line 17.	295,878.	-		295,878.
	Investment management fees	0.			
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	3,891,310.	2,009,565.	1,223,095.	658,650.
12	Advertising and promotion	51,858.	40,348.	11,510.	
13	Office expenses	482,564.	57,562.	372,457.	52,545.
14	Information technology	2,537,235.	2,340,128.	195,192.	1,915
15	Royalties,	0.	889,657.	370,739.	95,404.
16		1,355,800. 803,557.	681,044.	74,246.	48,267
17 18	Payments of travel or entertainment expenses	803,337.	001,044.	74,240.	40/201.
	for any federal, state, or local public officials	1,909,846.	1,708,486.	133,272.	68,088.
19		8,413.	8,413.	155,272.	00,000
20 21	Interest	0.	5,125.		
22	Depreciation, depletion, and amortization	2,720,834.	2,031,181.	689,653.	
23	Insurance	559,569.		559,569.	
24		•			
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	2 604 692			3,604,682.
-	DONATIONS PROCESSING FEES	3,604,682. 719,300.	626,235.	57,469.	35,596
	STAFF DEVELOPMENT/ENRICHMENT	588,350.	113,737.	461,120.	13,493.
	RECRUITING	199,542.		199,542.	
	All other expenses	323,154.	60,470.	216,228.	46,456
25	Total functional expenses. Add lines 1 through 24e	65,061,845.	46,977,975.	10,464,239.	7,619,631.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)	0.			
JSA					Form 990 (2015

JSA 5E1052 1.000

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pa	art X		<u> x </u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	19,215,059.	1	22,721,982.
	2	Savings and temporary cash investments	17,473,879.	2	24,013,315.
	3	Pledges and grants receivable, net	2,203,725.	3	993,623.
	4	Accounts receivable, net	0.	4	3,746.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
	ĺ	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
ets	7	Notes and loans receivable, net	0.	7	0.
Assets	8	Inventories for sale or use	57,174.	8	70,518.
•	9	Prepaid expenses and deferred charges	1,265,790.	9	778,063.
	10 a	Land, buildings, and equipment: cost or			
	1	other basis. Complete Part VI of Schedule D 10a 17,278,070.			
	ь	Less: accumulated depreciation [10b] 12,265,574.	5,089,075.	-	
	11	Investments - publicly traded securities	36,774,647.		42,918,359.
	12	Investments - other securities. See Part IV, line 11		12	0.
	13	Investments - program-related. See Part IV, line 11		13	0.
	14	Intangible assets		14	0.
	15	Other assets. See Part IV, line 11	674,636.		1,130,633.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	82,753,985.	16	97,642,735.
	17	Accounts payable and accrued expenses	4,691,017.		5,270,844.
	18	Grants payable	1-00-	18	0.
	19	Deferred revenue	7,276.		0.
	20	Tax-exempt bond liabilities	0.		0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	<u> </u>	21	0.
88	22	Loans and other payables to current and former officers, directors,		1	ŀ
Liabilities		trustees, key employees, highest compensated employees, and	0	22	
ie de		disqualified persons. Complete Part II of Schedule L			0.
_	23	Secured mortgages and notes payable to unrelated third parties		24	0.
	24	Unsecured notes and loans payable to unrelated third parties.	<u>.</u>	24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	235,394.	25	589,096.
		of Schedule D	4,933,687.		5,859,940.
s	26	Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0,000,000
92E	27	Unrestricted net assets	71,764,845.	27	87,680,104.
<u>a</u>	28	Temporarily restricted net assets	6,055,453.	28	4,102,691.
8	29	Permanently restricted net assets	0.	29	0.
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
Š,	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ž	33	Total net assets or fund balances	77,820,298.	33	91,782,795.
_	34	Total liabilities and net assets/fund balances	82,753,985.	34	97,642,735.
_					Form 990 (2015)

Form 990 (2015)

PAGE 14

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2015)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Employer identification number

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

WII	KIMI	EDIA FOUNDATION, INC	C.				20	-0049703
Рa	rt I	Reason for Public Cha	rity Status (All o	organizations must c	omplet	e this pa	art.) See instructions	
The	orga	anization is not a private fou	ndation because it	is: (For lines 1 throug	h 11, ch	eck only	one box.)	
1	\prod	A church, convention of chu	urches, or associa	tion of churches desci	ribed in s	ection 1	70(b)(1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90 or 990)-EZ).)	
3		A hospital or a cooperative	hospital service o	rganization described i	in sectio	n 170(b)	(1)(A)(iii).	
4	П	A medical research organiz	zation operated in	conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and st		•	•			•
5		An organization operated t		a college or universit	v owne	d or ope	erated by a governme	ental unit described in
-		section 170(b)(1)(A)(iv). (C		•	•	·		
6		A federal, state, or local go		rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7	х	An organization that norma						om the general public
•		described in section 170(b)	-		•	•		
8		A community trust describe			Part II.)			
9		An organization that norma					contributions, member	ership fees, and gross
•		receipts from activities rela						
		support from gross invest						
		acquired by the organizatio						•
10		An organization organized						
11		An organization organized	•	•	-			rry out the purposes of
		one or more publicly suppo						
		the box in lines 11a through						the state of the s
а	Γ	Type I. A supporting orga						
		the supported organization	•	•				
		organization. You must c		=				•
þ		Type II. A supporting org	•		nnection	with its	supported organization	on(s), by having
		control or management of						
		organization(s). You must						
c	Г	Type III functionally inte			ited in c	onnectio	n with, and functional	lly integrated with.
	_	its supported organization						
d	Γ	Type III non-functionally		•				ted organization(s)
		that is not functionally into	-					
		requirement (see instruct	-					
e	Γ	Check this box if the orga						I, Type III
		functionally integrated, or						
f	En	ter the number of supported	l organizations					
g	Pre	ovide the following information	on about the suppo	orted organization(s).				
	(i) N	lame of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-9 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
				,				,
					Yes	No		
(A)								
·~·								
(B)								
					<u> </u>			
(C)								
,								-
(D)								
(E)								
					 	-		
Tota	al							

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

Schedule A (Form 990 or 990-EZ) 2015

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.) Part II

Sec	tion A. Public Support			-			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	36,990,502.	45,272,234.	52,647,756.	77,451,505.	78,151,457.	292,513,454.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	38,990,502.	45,272,234.	52,647,756.	77,451,505.	78,151,457.	292,513,454.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6	Public support. Subtract line 5 from line 4.						292,513,454.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	38,990,502.	45,272,234.	52,647,756.	77,451,505.	78,151,457.	292,513,454.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	50,814.	340,082.	1,093,303.	950,012.	1,089,009.	3,523,220.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	3,722.	23,933.	13,444.	17,611.	35,945.	94,655.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . ATCH. 1	-56,379.	19,900.	914.	2,927.	34,522.	1,884.
11	Total support. Add lines 7 through 10						296,133,213.
12	Gross receipts from related activities, etc. (s					12	1,193,959.
13	First five years. If the Form 990 is forganization, check this box and stop here			d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3) ▶
_	tion C. Computation of Public Sup			44(0)		44	98.78%
14	Public support percentage for 2015 (li	ne o, column (1) Sabadula A. Da	olvided by line	r r, column (r))		15	98.34%
15	Public support percentage from 2014 331/3% support test - 2015. If the o	scriedule A, Pa	not check the	hav an line 13	and line 14 is	331/3 % or mo	
ıoa	this box and stop here. The organization						
h	331/3% support test - 2014. If the o						. —
J	check this box and stop here. The organization						
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization						
	Part VI how the organization meets t						
	organization						- L
b	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the orga						
	Explain in Part VI how the organizati supported organization						▶ □
18	Private foundation. If the organization	did not check a	a box on line 13,	, 16a, 16b, 17a	, or 17b, check	this box and see	•
	instructions			<u></u>			<u>., ▶ </u>
					S	chedule A (Form 9	90 or 990-EZ) 2015

PAGE 17

Part III	Support Schedule	for Or	ganizations	Described	in S	Section	509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support					· · · · · · · · · · · · · · · · · · ·	
Calen	idar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees		'	1			
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
-	unrelated trade or business under section 513						
4	Tax revenues levied for the						
•	organization's benefit and either paid					l	
	to or expended on its behalf						
5	The value of services or facilities				,	1	
•	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						-
8	Public support. (Subtract line 7c from						
•	line 6.)		ĺ		ļ		
Sec	tion B. Total Support		-				
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar				i		
	sources						
ь	Unrelated business taxable income (less						
	section 511 taxes) from businesses					1	
	acquired after June 30, 1975				1		
c	Add lines 10a and 10b						
11	Net income from unrelated business			, ,	<u> </u>		
	activities not included in line 10b.					1	
	whether or not the business is regularly						
42	Other income. Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
••	and 12.)]	
14	First five years. If the Form 990 is f	or the organiza	tion's first, seco	nd, third, fourth	, or fifth tax y	ear as a section	501(c)(3)
• •	organization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2015 (line 8			mn (f))		15	%
16	Public support percentage from 2014 Sche	edule A, Part III, lii	ne 15	<u> </u>		16	%
Sec	tion D. Computation of Investmen	nt Income Per	centage			, , , , , , , , , , , , , , , , , , , 	
17	Investment income percentage for 2015 (li	ne 10c, column (f) divided by line	13, column (f))		17	
18	Investment income percentage from 2014					18	%
19 a	331/3% support tests - 2015. If the or						
	17 is not more than 331/3%, check th						
b	331/3% support tests - 2014. If the orga						
	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19t	o, check this be	ox and see instr	uctions -

Schedule A (Form 990 or 990-EZ) 2015

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
_	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10Ь		

Schedu	e A (Form 990 or 990-EZ) 2015		F	Page 5
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a cappartag organization.	11a		
	77 Idinity monitor of a person cookings in (a) and its	11b		
	A 33 % controlled criticly of a person decarable in (a) 5. (b) essential in the state of the sta	11c		
Secti	on B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations		1.4	
	Г		Yes	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
_	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2_		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		-
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instance) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see its part VI).			
С			Yes	No
2 a	Activities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part V identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

WIKIMEDIA FOUNDATION, INC.

PAGE 20

20-0049703 WIKIMEDIA FOUNDATION, INC. Schedule A (Form 990 or 990-EZ) 2015 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year (A) Prior Year Section A - Adjusted Net Income (optional) 1 1 Net short-term capital gain 2 2 Recoveries of prior-year distributions 3 3 Other gross income (see instructions) 4 4 Add lines 1 through 3 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a a Average monthly value of securities 1b b Average monthly cash balances c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 2 Acquisition indebtedness applicable to non-exempt-use assets 3 3 Subtract line 2 from line 1d 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) **Current Year** Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 4 Enter greater of line 2 or line 3

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2015

5 Income tax imposed in prior year

instructions).

emergency temporary reduction (see instructions)

2341015

5

PAGE 21

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

	le A (Form 990 or 990-EZ) 2015			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continuea)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organic	zations	
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.	<u> </u>		
7_	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(lil) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			<u></u>
а				
b				
C				
d	From 2013			
e	From 2014			-
f	Total of lines 3a through e			
9	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section			
	D, line 7: \$			
а	Applied to underdistributions of prior years			
ь	Applied to 2015 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:		1 4	<u> </u>
a				
b				
	Excess from 2013			
d				
	Excess from 2015			
			Schedule	A (Form 990 or 990-EZ) 2015

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II -	OTHER INCOME	:			ATTACHMENT 1	
DESCRIPTION	2011	2012	2013	2014	2015	TOTAL
FOREIGN EXCHANGE LOSS	-95,005.					-95,005.
MISCELLANEOUS REVENUE	38,626.	19,900.	914.	2,927.	34,522.	96,889.
TOTALS	56,379	19,900	914.	2,927	34,522.	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

▶ Attach to Form 990 or Form 990-EZ. ► Complete if the organization is described below.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

- If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

Tax)	(see separate instructions), then	on Form 990, Part IV, line 5 (Proxy	Tax) (see separate in	structions) or Form 990-E	Z, Part V, line 35c (Proxy
	Section 501(c)(4), (5), or (6) orga e of organization	inizations: Complete Part III.		Employer ider	ntification number
	•			20-004	
	IMEDIA FOUNDATION, I	rganization is exempt under	coction 501(c) or i		
_					illeastori.
1	Provide a description of the	organization's direct and indirect p	onucar campaign ac	LIVILIES III PAIL IV.	
2					
3	Volunteer nours				
Par		rganization is exempt under s			
1		ise tax incurred by the organizatio			
2	Enter the amount of any exc	ise tax incurred by organization m	anagers under secti	on 4955 , , ▶\$	
3	If the organization incurred a	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.				
Pai		rganization is exempt under			<u>). </u>
1	Enter the amount directly e	xpended by the filing organization	for section 527 ex	xempt function ► \$	
2	Enter the amount of the filir	ng organization's funds contributed	to other organizati	ons for section	
2	527 exempt function activities	es		▶\$	
3	line 17b	enditures. Add lines 1 and 2. En		▶ \$	
5	Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en ributions received that were promed or a political action committee (I	er (EIN) of all section ter the amount paid optly and directly de	on 527 political organiza I from the filing organiz livered to a separate po	ations to which the filing ation's funds. Also enter ditical organization, such
	(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) 2015

Sche		DIA FOUNDATION, INC.		049703 Page 2
Pa	section 501(h)).	on is exempt under section 501(c)(3) and		
A (Check ▶ if the filing organization name, address, EIN, exp	belongs to an affiliated group (and list in Pa enses, and share of excess lobbying expend	art IV each affiliated g ditures).	roup member's
В	Check ▶ if the filing organization	checked box A and "limited control" provisi	ons apply.	
-	Limits on Lobb	ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)		
		a legislative body (direct lobbying)	415.	
	Total lobbying expenditures (add lines 1	415.		
	· ·			
	Total exempt purpose expenditures (add	415.		
f	· · · · · · · · · · · · · · · · · · ·	e amount from the following table in both		
•	columns.		83.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
ļ	Not over \$500,000	20% of the amount on line 1e.	and the second	
ĺ	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25	5% of line 1f)	21.	
h	Subtract line 1g from line 1a. If zero or le	ess, enter -0	0.	0
i	· ·	ss, enter -0		0
i		on either line 1h or line 1i, did the organiza		
•		<u>, , , , , , , , , , , , , , , , , , , </u>		Yes No

4-Year Averaging Period Under section 501(h)

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

	Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
2a Lobbying nontaxable amount				21.	21			
b Lobbying ceiling amount (150% of line 2a, column (e))					32			
c Total lobbying expenditures				415.	415			
d Grassroots nontaxable amount								
e Grassroots ceiling amount (150% of line 2d, column (e))								
f Grassroots lobbying expenditures								

Schedule C (Form 990 or 990-EZ) 2015

	(a)		(a) (b)			
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed lescription of the lobbying activity.	Yes	No		Amo	unt	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
a Volunteers?b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c Media advertisements?						
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?						
f Grants to other organizations for lobbying purposes?						
g Direct contact with legislators, their staffs, government officials, or a legislative body?		\longrightarrow				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities?	-	\dashv				
i Other activities? j Total. Add lines 1c through 1i						
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b If "Yes," enter the amount of any tax incurred under section 4912						
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ectio	n		
36 1(0)(0).					Yes	N
1 Were substantially all (90% or more) dues received nondeductible by members?						_
Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		1
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501						
			C 111-7	-, 11116	, 0 , 13	'
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members			1			
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid).	 unts	of				
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	unts	of	2a 2b			
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	unts	of	2a 2b 2c			
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	unts	of	2a 2b			-
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion	unts	of	2a 2b 2c			-
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible	unts es obbyin	of	2a 2b 2c 3			
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year?	unts es obbyin	of	2a 2b 2c			
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	unts es obbyin	of	2a 2b 2c 3			
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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)	es obbyin	of	2a 2b 2c 3	t II-A, I	ines 1	
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	es obbyin	of	2a 2b 2c 3	t II-A, I	lines 1	1 a
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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)	es obbyin	of	2a 2b 2c 3	t II-A, I	ines 1	1 a
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answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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)	es obbyin	of	2a 2b 2c 3	t II-A, I	lines 1	1 aı
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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)	es obbyin	of	2a 2b 2c 3	t II-A, I	lines 1	1 ar
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Schedule C (Form 990 or 990-EZ) 2015

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Internal Revenue Service Name of the organization

Department of the Treasury

► Attach to Form 990. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

Open to Public Inspection Employer Identification number

WIN	IMEDIA FOUNDATION, INC.		20-0049703
	organizations Maintaining Donor Adv	ised Funds or Other Similar Funds or	Accounts.
نکی	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
3	Aggregate value of grants from (during year)		
4	Did the organization inform all donors and donor	advisors in writing that the assets held	in donor advised
5	funds are the organization's property, subject to the	a organization's exclusive legal control?	Yes No
	Did the organization inform all grantees, donors, a	and donor advisors in writing that grant for	· · · · · · · · · · · · · · · · · · ·
6	only for charitable purposes and not for the bene	fit of the donor or donor advisor or for a	any other nurnose
	conferring impermissible private benefit?		
D a	rt II Conservation Easements.		<u> </u>
Га	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the		
•	Preservation of land for public use (e.g., rec		of a historically important land area
	Protection of natural habitat	· - 1	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contribution in	the form of a conservation
2	easement on the last day of the tax year.	old a qualified bolloof ration contribution in	Held at the End of the Tax Year
_	Total number of conservation easements		2a
a b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified		2c
d	Number of conservation easements included in (c		
u	historic structure listed in the National Register		
3	Number of conservation easements modified, trai		
3	tax year >	natoriou, rotoubou, oxtanguistiou, ex terma	the control of the co
4	Number of states where property subject to conse	ervation easement is located >	
5	Does the organization have a written policy re		tion, handling of
•	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec		
•	>	,	
7	Amount of expenses incurred in monitoring, inspec	ting, handling of violations, and enforcing c	onservation easements during the year
•	▶ s	3	•
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of secti	ion 170(h)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?	• • • • • • • • • • • • • • • • • • • •	Yes No
9	In Part XIII, describe how the organization reports		d expense statement, and
•	balance sheet, and include, if applicable, the text of	of the footnote to the organization's financ	ial statements that describes the
	organization's accounting for conservation easeme		
Pa	rt III Organizations Maintaining Collections	s of Art, Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under S	FAS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other simile public service, provide, in Part XIII, the text of the fi	ar assets held for public exhibition, edu	ication, or research in furtherance of
L	If the organization elected, as permitted under		
þ	works of art, historical treasures, or other similar	ar assets held for public exhibition, edu	ication, or research in furtherance of
	public service, provide the following amounts relat	ing to these items:	
	(i) Revenue included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of a	rt, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under S	SFAS 116 (ASC 958) relating to these item	s:
а	Revenue included in Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		⊳ \$
		- Farm 800	Schedule D (Form 990) 2015

Sched	dule D (Form 990) 2015							Page 2
Par	t III Organizations Maintaining C	ollections of	Art, Hist	orical Trea	sures,	or Oth	er Similar Asse	ts (continued)
3	Using the organization's acquisition, ac	cession, and	other recor	ds, check an	y of the	e followi	ng that are a sigr	nificant use of its
	collection items (check all that apply):							
а	Public exhibition		d [Loan or ex	change	program	ıs	
b	Scholarly research		e [Other				
С	Preservation for future generation	s						
4	Provide a description of the organization		s and expla	ain how they	further	the org	anization's exemp	t purpose in Part
•	XIII.		·	•		•		
5	During the year, did the organization soli	icit or receive o	donations o	f art. historica	al treasu	ires, or o	ther similar	
•	assets to be sold to raise funds rather that							Yes No
Par	rt IV Escrow and Custodial Arrang							
	Complete if the organization a	nswered "Yes	s" on Form	990. Part I	V, line 9	9, or rep	orted an amount	t on Form
	990, Part X, line 21.				. •			
1a	Is the organization an agent, trustee, cu	stodian or othe	er intermed	liary for contr	ibutions	or other	assets not	
	included on Form 990, Part X?							Yes No
h	If "Yes," explain the arrangement in Par	t XIII and com	olete the fo	lowing table:				
	ii 100, explain the direngement with a		p. 0.0			Ţ	Amount	
_	Beginning balance				10	 		
ب د	Additions during the year							
	Distributions during the year							
e	Ending balance					1		
f	Did the organization include an amount					istodial a	account liability?	Yes No
	If "Yes," explain the arrangement in Par							
		(Alli. Check II	ere ii tale e	Apianation has	been p	TOTIGOG	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•••••
Par	rt V Endowment Funds. Complete if the organization a	nswered "Ye	s" on Forn	990 Part l	V line	10		
) Current year	(b) Pric		Two yea		(d) Three years back	(e) Four years back
		ij Carreix year	(2)	year (e	, 1110 ,00		(4)	(e) r our yourd back
1a				-				
b	Contributions	 				-		
C	Net investment earnings, gains,							
	and losses							
d	Grants or scholarships			<u></u>				
e	Other expenditures for facilities					į		
	and programs							
f	Administrative expenses					-		
g	End of year balance		<u> </u>					
2	Provide the estimated percentage of the			e (line 1g, colı	ımn (a))	held as:		
а	Board designated or quasi-endowment		_%					
b	Permanent endowment >	.%						
C	Temporarily restricted endowment ▶							
	The percentages on lines 2a, 2b, and 2							
3a	Are there endowment funds not in the p	ossession of t	he organiza	ation that are	held an	id admini	istered for the	W. IN
	organization by:							Yes No
	(I) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" on line 3a(ii), are the related org				e R?		• • • • • • • • •	3b
4	Describe in Part XIII the intended uses of		tion's endo	wment funds.			<u>-</u>	
Par	rt VI Land, Buildings, and Equipme Complete if the organization a	nt. Snewered "Ye	e" on For	m 990 Part	IV line	11a Se	e Form 990 Par	rt X line 10
	Description of property		other basis	(b) Cost or other				d) Book value
		(inves	stment)	(other)			ciation	· · · · · · · · · · · · · · · · · · ·
1a	Land							
b	Buildings							
C	Leasehold improvements			}	,640.		74,677.	346,963.
ď	Equipment	• •		16,656	429.	11,99	90,897.	4,665,533.
	Other							
Tota	al. Add lines 1a through 1e. (Column (d) n	nust equal Fori	n 990, Part	X, column (B)	, line 10	Oc.)	▶	5,012,496.

Schedule D (Form 990) 2015

	MINISTER TO STREET	10000 - 10000 - 10000 - 10000 - 10000 - 10000 - 10000 - 10000 - 10000 - 10000 - 10000 - 10000 - 100000 - 100000 - 100000 - 1000000 - 1000000 - 10000000 - 10000000 - 10000000 - 100000000
Schedule D ((Form 990) 2015	Page •
Part VII	Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (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: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (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)	
otal (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.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CAPITAL LEASE LIABILITY	231,067.
(3)OTHER LIABILITIES	153,824.
(4) STRAIGHT LINE RENT ADJUSTMENT	130,337.
(5) GRANT REFUND LIABILITY	73,868.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	589,096.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

5E1270 1.000

Schedule D (Form 990) 2015

1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part IV, line 12a. 1 Total expenses and losses per audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and use of facilities 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities c Other (Describe in Part XIII.)	Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	٦.	
Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments			1	79,909,962.
a Net unrealized gains (losses) on investments 2b 1,065,523. b Donated services and use of facilities 2b 1,065,523. c Recoveries of prior year grants. 2c 2d 3 3 Color (Poscribe in Part XIII.) e Add lines 2a through 2d 2 2a 3 Subtract line 2e from line 1 3 78,586,240. 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 105,497. c Add lines 4a and 4b 4b 4c 105,497. c Add lines 4a and 4b 5 5 70.1 Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements				· · · · · ·
b Donated services and use of facilities c Recoveries of prior year grants c Other (Describe in Part XIII.) c Add lines 2a through 2d				
c Recoveries of prior year grants. d Other (Describe in Part XIII.) e Add lines 2a through 2d	_	Net unlealized gains (1035e3) on investments 111111111111111111111111111111111111		
Other (Describe in Part XIII.) 2e 1,323,722.	_	Donated services and use of identities		
e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.). c Add lines 4a and 4b. 5 Total expenses and losses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 a Investment expenses not included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Add lines 4a and 4b C Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 G5, 061, 845. Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.	_	Other (Describe in Part VIII.)		
3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b		Add lines 2a through 2d	2е	1,323,722.
Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b. 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Total expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b. 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 65, 061, 845. Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	_	Subtract line 2e from line 1	3	78,586,240.
a Investment expenses not included on Form 990, Part VIII, line 7b. 4a 4b 105, 497. b Other (Describe in Part XIII.)				
b Other (Describe in Part XIII.) c Add lines 4a and 4b . Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 1 Total expenses and losses per audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.	-			
c Add lines 4a and 4b		Other (Describe in Part XIII.)	}	
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		Add lines 4a and 4b	4c	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		78,691,737.
Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other (Describe in Part XIII.) e Add lines 2a through 2d Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.	Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	irn.	
Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1		1	65,947,465.
b Prior year adjustments	2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	а	Donated services and use of facilities		
c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.	b	Filor year aujustinicitis		
d Other (Describe in Part XIII.) e Add lines 2a through 2d	c	Other losses		
e Add lines 2a through 2d	d	Other (Describe in Part XIII.)		
Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b	e	Add lines 2a through 2d	2e	1,065,523.
a Investment expenses not included on Form 990, Part VIII, line 7b			3	64,881,942.
b Other (Describe in Part XIII.)	4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
c Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
c Add lines 4a and 4b	ь	Other (Describe in Part XIII.)		
Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	C	Add lines 4a and 4b	-	
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.			5	65,061,845.
	Provid 2; Par	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
				<u></u>
				

Part XIII Supplemental Information (continued)

SCHEDULE D, PART XI, LINE 4B

EXPENSES RECLASSED FROM REVENUE

\$105,497

SCHEDULE D, PART XII, LINE 4B

EXPENSES RECLASSED FROM REVENUE

\$105,497

RETURN OF UNUSED GRANT

\$ 74,406

==========

TOTAL SCHEDULE D, PART II, LINE 4B

\$179,903

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 BE RECORDED UNDER APPLICABLE

ACCOUNTING GUIDANCE.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ➤ Attach to Form 990. ▶ Information about Schedule F (Form 990) and Its Instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer Identification number

WIKIMEDIA FOUNDATION, INC.	•			20-0049703	
Part I General Information of Form 990, Part IV, line 14		Outside the U	Inited States. Complete	if the organization answer	red "Yes" on
1 For grantmakers. Does the orga assistance, the grantees' eligibili grants or assistance?	ty for the grant	ts or assistance	e, and the selection criteri	a used to award the	X Yes No
2 For grantmakers. Describe in assistance outside the United Sta	ites.				na otner
3 Activities per Region. (The follow (a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundralsing, 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 region	(f) Total expenditures for and investments in region
(1) EAST ASIA AND THE PACIFIC		4.	PROGRAM SERVICES	SEE PART V	334,988.
(2) EUROPE		49.	PROGRAM SERVICES	SEE PART V	3,513,543.
(3) MIDDLE EAST AND NORTH AFRICA		2.	PROGRAM SERVICES	SEE PART V	122,625.
(4) NORTH AMERICA		7.	PROGRAM SERVICES	SEE PART V	500,889.
(5) SOUTH ASIA		6.	PROGRAM SERVICES	SEE PART V	242,164.
(6) EAST ASIA AND THE PACIFIC			GRANTMAKING	FURTHER MISSION	1,672.
(7) EUROPE			GRANTMAKING	FURTHER MISSION	4,318,846.
(8) MIDDLE EAST AND NORTH AFRICA			GRANTMAKING	FURTHER MISSION	210,152.
(9) NORTH AMERICA			GRANTMAKING	FURTHER MISSION FURTHER MISSION	5,690. 312,170.
(11) RUSSIA/INDEPENDENT STATES (11) SOUTH AMERICA			GRANTMAKING GRANTMAKING	FURTHER MISSION	248,878.
(12) SOUTH ASIA			GRANTMAKING	FURTHER MISSION	269,430.
(13) SUB-SAHARAN AFRICA			GRANTMAKING	FURTHER MISSION	44,349.
(14) EAST ASIA AND THE PACIFIC			GRANTMAKING	FURTHER MISSION	28,476.
(15) EAST ASIA AND THE PACIFIC			GRANTMAKING	CONFERENCE SCHOLARSHIP	15,552.
(16) EUROPE			GRANTMAKING	CONFERENCE SCHOLARSHIP	6,033.
(17) EUROPE		-	GRANTMAKING	FURTHER MISSION	157,868. 10,333,325.
3a Sub-total		68.			

Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, see the Instructions for Form 990.

10,666,640. Schedule F (Form 990) 2015

2341015

sheets to Part I

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

2015

OMB No. 1545-0047

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.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Employer identification number

20-0049703 WIKIMEDIA FOUNDATION, INC. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the X Yes grants or assistance? 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.) (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total (a) Region region (by type) (e.g., fundraising, program services, a program service, expenditures for offices in the émployees. describe specific type of region agents, and and investments independent investments. service(s) in region in region grants to recipients contractors located in the region) in region GRANTMAKING CONFERENCE SCHOLARSHIP 42,352. (1) MIDDLE EAST AND NORTH AFRICA GRANTMAKING FURTHER MISSION 84,558. (2) MIDDLE EAST AND NORTH AFRICA CONFERENCE SCHOLARSHIP 5.882. GRANTMAKING (3) NORTH AMERICA FURTHER MISSION 932. (4) NORTH AMERICA GRANTMAKING 30,706. GRANTMAKING CONFERENCE SCHOLARSHIP (5) RUSSIA/INDEPENDENT STATES FURTHER MISSION 10,201. GRANTMAKING (6) RUSSIA/INDEPENDENT STATES CONFERENCE SCHOLARSHIP 13,380. GRANTMAKING (7) SOUTH AMERICA FURTHER MISSION 32,265. GRANTMAKING (8) SOUTH AMERICA 25,855. (9) SOUTH ASIA GRANTMAKING FURTHER MISSION GRANTMAKING CONFERENCE SCHOLARSHIP 71,706. (10) SOUTH ASIA GRANTMAKING FURTHER MISSION 13,850. (11) SUB-SAHARAN AFRICA CONFERENCE SCHOLARSHIP 400. GRANTMAKING (12) SUB-SAHARAN AFRICA 1,228. CONFERENCE SCHOLARSHIP (13) CENTRAL AMERICA/CARIBBEAN GRANTHAKING (14)(15)_ (16) (17)3a Sub-total....... Total from continuation sheets to Part I

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

Totals (add lines 3a and 3b)

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

Page 2

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ICELAND/GREENLAND	FURTHER MISS	4,318,846.	WIRE		N/A	N/A
(2)			MIDDLE EAST/NORTH AFRICA	FURTHER MISS	210,152.	WIRE		N/A	N/A
(3)			NORTH AMERICA	FURTHER MISS	5,690.	WIRE		N/A	N/A
(4)			RUSSIA/NEWLY IND. STATES	FURTHER MISS	312,170.	WIRE		N/A	N/A
(5)			SOUTH AMERICA	FURTHER MISS	248,878.	WIRE		N/A	N/A
(6)			SOUTH ASIA	FURTHER MISS	269,430.	WIRE		N/A	N/A
(7)	150		SUB-SAHARAN AFRICA	FURTHER MISS	44,349.	WIRE		N/A	N/A
(8)			SUB-SAHAROR AFRICA	FORTHER MISS	44,343.	WIRE		1878	N/A
(9)									
(11)									
(12)									
								(2)	
(13)					***************************************				
(14)									
(15)									
(16) 2 Er	ster total number of recipion	at organizations listed ab	ove that are recognized as	charities by the	foreign country, re	cognized as tax	r-evemnt		
			ovided a section 501(c)(3) e			cognized as tax	-6x6mpt		37.

20-0049703

Schedule F (Form 990) 2015

Page :

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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) FURTHER MISSION	EAST ASIA/PACIFIC	10.	29 ,47 6	WIRE		N/A	n/a
(2) SCHOLARSHIPS TO ATTEND CONFERENCE	EAST ASIA/PACIFIC	7.	15,552.	WIRE		N/A	n/a
(3) SCHOLARSHIPS TO ATTEMP CONFERENCE	EUROPE/ICELAND/GREENLAND	10.	6,033.	WIRE		N/A	n/A
(4) FURTHER MISSION	EUROPE/ICELAND/GREENLAND	38.	157,868.	WIRE		n/A	N/A
(5) SCHOLARSHIPS TO ATTEND CONFERENCE	MIDDLE EAST/NORTH AFRICA	18.	42,352.	WIRE		N/A	А\и
(6) FURTHER MISSION	MIDDLE EAST/NORTH AFRICA	13.	84,558.	WIRE		N/A	N/A
(7) SCHOLARSHIPS TO ATTEND CONFERENCE	NORTH AMERICA	3.	5,882.	WIRE		N/A	n/a
(8) FURTHER MISSION	NORTH AMERICA	2.	232.	WIRE		N/A	n/A
(9) SCHOLARSHIPS TO ATTEND CONFERENCE	RUSSIA/NEWLY IND. STATES	14.	30,706.	WIRE		n/A	N/A
(10) FURTHER MISSION	RUSSIA/NEWLY IND. STATES	7.	10,201.	WIRE		n/A	N/A
(11) SCHOLARSHIPS TO ATTEMD CONFERENCE	SOUTH AMERICA	6.	13,380.	WIRE		N/A	B/A
(12) FURTHER MISSION	SOUTH AMERICA	6.	32,265.	WIRE		N/A	N/A
(13) FURTHER MISSION	SOUTH ASIA	19.	25,855.	WIRE		31/A	N/A
(14) SCHOLARSHIPS TO ATTEND CONFERENCE	SOUTH ASIA	31.	71,706.	WIRE		n/A	N/A
(15) FURTHER MISSION	SUB-SAHARAN AFRICA	7.	13,850.	WIRE		N/A	N/A
(16) SCHOLARSHIPS TO ATTEND CONFERENCE	SUB-SAHARAN AFRICA	2.	400.	WIRE		N/A	<u>N/A</u>
(17) SCHOLARSHIPS TO ATTEND CONFERENCE	CENT. AMERICA/CARIBBEAN	2.	1,288.	WIRE	<u> </u>	N/A	N/A
(18)							edule F /Form 990) 2

Schedule F (Form 990) 2015

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

Schedule F (Form 990) 2015

Part V Supplen

Supplemental Information

Complete this part to 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, 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

(PRIMARILY TO ATTEND THE ANNUAL CONFERENCE, WIKIMANIA) AND APPLICATIONS

Part V

Supplemental Information

Complete this part to 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).

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.

METHOD OF ACCOUNTING

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

SCHEDULE F, PART I, LINES 1-5, COLUMN (E)

PROGRAM SERVICES INCLUDE SUPPORTING WIKIMEDIA AND OPEN SOURCE TECHNOLOGY.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization

Open to Public Inspection

MITE	IMEDIA FOUNDATION, INC.					20-0049703	
	— Fundraising Activities Con	mplete if the orga	anization a	answered	"Yes" on Form		
Par	Form 990-EZ filers are not				100 0111 01111	000,7 0.1177,0	201-20
1	Indicate whether the organization rai				activities. Check	all that apply.	
a		e			non-government g		
b		f			government grant		
c	H	g			ising events	-	
d	H:	8	оро	olal randra	ioning oromic		
	Did the organization have a written of	or oral agraement	with any in	dividual (in	ocluding officers of	lirectore trustees	
2 a	or key employees listed in Form 990	Part VII) or entity	v in connec	tion with c	professional fundra	ising services?	X Yes No
h	If "Yes," list the ten highest paid ind						fundraiser is to be
~	compensated at least \$5,000 by the		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	3		
			(III) Did fur	draiser have		(v) Amount paid to	(vi) Amount paid to
	(i) Name and address of individual	(ii) Activity		or control of	(iv) Gross receipts from activity	(or retained by) fundraiser listed in	(or retained by)
	or entity (fundraiser)		contrit	outions?	nom activity	col. (i)	organization
			Yes	No			(2)
1							
	ATTACHMENT 1						
2							
3		-	+				
3							
4							
		1					
6							
7							
8							
9							
10							
						205 070	
Tota	List all states in which the organiza	tion in registered	or liaanaa	P	oontributions or	295,878.	
3	registration or licensing.	ation is registered	or licensed	i to solicit	Contributions of	nas been notined	it is exempt from
	AK, AR, CA, CO, CT, DC, FL, GA, HI		NC ND (211			
	KY, LA, ME, MD, MA, MI, MN, MS, MO		, NC, ND,	Jn,			
OK,	OR, PA, RI, SC, TN, UT, VA, WA, WV	, WI,					
-							
-							
							-
-							
-							
ž							

Pa	rt I	Fundraising Events. Complete than \$15,000 of fundraising even gross receipts greater than \$5,000.	it contributions and gros	vered "Yes" on Form 9 is income on Form 990	990, Part IV, line 18, or 0-EZ, lines 1 and 6b. l	reported more List events with
		grade roothing Branch man Adja	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			(event type)	(event type)	(lotal number)	col. (c))
nue		Q				
Revenue	1	Gross receipts				
<u>.</u>	2	Less: Contributions				
	3	Gross income (line 1 minus				
_		line 2),				
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
t Exp	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses	<u></u>			
	11	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orga than \$15,000 on Form 990-E	0 from line 3, column (d) <u></u>	<u>></u>	orted more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Re	1	Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes% No	Yes% No	Yes% No	
	7	Direct expense summary. Add lines 2	through 5 in column (d)			
	8	Net gaming income summary. Subtra	act line 7 from line 1, col	umn (d)	.	
9 a	Is	nter the state(s) in which the organizat the organization licensed to conduct o "No," explain:		of these states?		, Yes No
		ere any of the organization's gaming I	icenses revoked, suspe		ing the tax year?	, Yes No
	_					G (Form 990 or 990-EZ) 201

WIKIMEDIA FOUNDATION, INC.

Sched	ule G (Form 990 or 990-EZ) 2015
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?
13	Indicate the percentage of gaming activity conducted in: The organization's facility 13a %
a	The organization's facility
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?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ▶ \$
С	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?
•	or spent in the organization's own exempt activities during the tax year > \$
Par	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).
SCH	EDULE G PART I
THE	PROFESSIONAL FUNDRAISER LISTED PROVIDES CONSULTING SERVICES TO ASSIST
THE	FOUNDATION IN ITS FUNDRAISING EFFORTS, AND ARE NOT ATTRIBUTED TO ANY
SPE	CIFIC CHARITABLE CONTRIBUTIONS RAISED. DURING THE YEAR, SUPPORT WAS
PRO	VIDED THROUGH EMAILING DONORS FOR FUNDRAISERS AND DESIGNING A
FUN	DRAISING BANNER. ADDITIONALLY, THE PROFESSIONAL FUNDRAISER DID NOT
HAV	E CONTROL OVER OR RETAIN ANY FUNDS RAISED.
	Schedule G (Form 990 or 990-EZ) 2015

JSA 5E1503 1.000

ATTACHMENT 1

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS? YES NO	GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY ORGANIZATION
--	--	---------------------------------	---	---

TRILOGY INTERACTIVE LLC

SEE PART IV X 295,878.

PO BOX 4177 MOUNTAIN VIEW CA 94040

SCHEDULE I (Form 990)

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

2015

OMB No. 1545-0047

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization						Employer identific	ation number
WIKIMEDIA FOUNDATION, INC.						20-0049703	
Part I General Information on Grants a	ınd Assistanc	e		-			
 Does the organization maintain records to the selection criteria used to award the gra Describe in Part IV the organization's prod 	ants or assistanc	æ?					X Yes No
Part II Grants and Other Assistance to 990, Part IV, line 21, for any rec							es" on Form
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WIKIMEDIA NEW YORK CITY, INC.			İ				
227 DEAN STREET BROOKLYN, NY 11217	27-0520584	501(C)(3)	79,900.				SEE PART IV
(2) TIDES FOUNDATION							
P.O. BOX 29903 SAN FRANCISCO, CA 94129	51-0198509	501 (C) (3)	5,000,000.				SEE PART IV
(3) THE JOHN ERNEST FOUNDATION							
PO BOX 60225 PALO ALTO, CA 94306	94-3170824	501 (C) (3)	10,000.				SEE PART IV
(4) WIKI SOCIETY OF WASHINGTON DC							1
PO BOX 9822 WASHINGTON, DC 20013	45-2106571	501 (C) (3)	56,510.				SEE PART IV
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) 3 Enter total number of other organization	-	_					4.

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

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Schedule I (Form 990) (2015)

20-0049703

Page 2

WIKIMEDIA FOUNDATION, INC.

Schedule I (Form 990) (2015)

Part III

Grants and Other Assistance to Individuals in the United States. 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) Mothod of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 PROGR	PROGRAM SERVICES TO FURTHER WIKIMEDIA'S MISSION	9	. 17, 927.		N/A	5 5 5 5 1 1
2 FURTHE	2 FURTHER MISSION AND CONFERENCE ATTENDANCE	1.	17,084.		и/а	
က						
4						
5						
9						
7						
PartIV	Supplemental Information. Complete this par information.	s part to pro	vide the informat	tion required in	Part I, line 2, Part III,	rt to provide the information required in Part I, line 2, Part III, column (b), and any other additional

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, 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,

Schedulo I (Form 990) (2015)

PAGE 45

WIKIMEDIA FOUNDATION, INC.

Schedule I (Form 990) (2015)

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of velution (book, FMV, appraisal, other)	(f) Description of non-cash assistance
l m						
4						
w						
9						
-						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	is part to prov	vide the informat	ion required in	Part I, line 2, Part III,	column (b), and any other additional

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 HOW THE GRANT

Schedule I (Form 990) (2015)

PAGE 46

WIKIMEDIA FOUNDATION, INC. 20-0049703

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

•	•	
Schedule I (Form 990) (2015)		

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, appraisel, other)

1
2
3
4
5

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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

Schedule I (Form 990) (2015)

Page 2

20-0049703

Page 2

WIKIMEDIA FOUNDATION, INC.

Schedule I (Form 990) (2015) Part III

Grants and Other Assistance to Individuals in the United States. 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	(a) Mothod of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
2						
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LO.						
9						
7						
Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	is part to prov	vide the informal	tion required in	Part I, line 2, Part III,	column (b), and any other additional

THE RECEIPTS.

SCHEDULE I, PART II

PURPOSE OF GRANT TO WIKIMEDIA NYC, INC .: TO SUPPORT WORK TO FURTHER

MISSION.

PURPOSE OF GRANT TO TIDES FOUNDATION: TO SUPPORT WORK TO FURTHER

MISSION.

PURPOSE OF GRANT TO JOHN ERNST FOUNDATION: TO SUPPORT A CONFERENCE TO

Schodule I (Form 990) (2015)

Schedule I (Form 990) (2015)

Page 2

(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 assistanc
······································					
· · · · · · · · · · · · · · · · · · ·					

FURTHER MISSION.

information.

PURPOSE OF GRANT TO WIKI SOCIETY OF WASHINGTON D.C.: TO SUPPORT WORK TO

FURTHER MISSION.

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

WIK:	IMEDIA FOUNDATION, INC. 20-0049703	3		
Part	Questions Regarding Compensation			00.5
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Travel for companions Tax indemnification and gross-up payments Discretionary spending account Housing allowance or residence for personal use Payments for business use of personal residence Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee X Independent compensation consultant X Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a	X	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	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.	4c		X
	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:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
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:			
а	The organization?	6a		X
b	Any related organization?	6b		X
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	10000		
8	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
	in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2015

WIKIMEDIA FOUNDATION, INC. 20-0049703

Schedule J (Form 990) 2015 Page 2

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 are not listed on Form 990, Part VII.

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

		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
LILA TRETIKOV	(i)	342,050.	0.	2,286.	9,250.	22,732.	376,318.	0.
1EXECUTIVE DIRECTOR-THRU MAR/16	(ii)	0.	0.	0.	0.	0.	0.	0.
KATHERINE MAHER	(1)	164,285.	0.	2,068.	4,872.	8,589.	179,814.	0.
2EXECUTIVE DIR - FROM APR/16	(ii)	0.	0.	0.	0.	0.	0.	0.
GARFIELD BYRD	(i)	158,578.	0.	2,485.	6,343.	14,025.	181,431.	0.
3TREASURER & CFA - THRU SEP/16	(ii)	0.	0.	0.	0.	0.	0.	0.
GEOFF BRIGHAM	(i)	254,850.	0.	4,122.	4,167.	22,709.	285,848.	0.
SECRETARY & GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
TERENCE GILBEY	(0)	169,391.	0.	80,840.	6,482.	12,312.	269,025.	0.
5 ²⁰⁰	(ii)	0.	0.	0.	0.	0.	0.	0.
ERIK MOELLER	(0)	93,344.	0.	208,702.	0.	2,863.	304,909.	0.
6VP OF PRODUCT	(ii)	0.	0.	0.	0.	0.	0.	0.
GAYLE YOUNG	(0)	82,522.	0.	101,203.	3,331.	2,992.	190,048.	0.
7CHIEF TALENT & CULTURE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
ANTHONY NEGRIN	(0)	177,179.	0.	541.	0.	18,699.	196,419.	0.
8DIRECTOR OF ENGINEERING	(ii)	0.	0.	0.	0.	0.	0.	0.
STANISLAV MALYSHEV	(i)	178,409.	0.	2,090.	7,246.	16,164.	203,909.	0.
9SR. SOFTWARE ENGINEER	(ii)	0.	0.	0.	0.	0.	0.	0.
DAMON SICORE	(i)	181,451.	0.	100,315.	0.	10,492.	292,258.	0.
10VP OF ENGINEERING	(ii)	0.	0.	0.	0.	0.	0.	0.
LISA SEITZ-GRUWELL	(i)	165,911.	0.	2,156.	4,950.	20,983.	194,000.	0.
11CHIEF REVENUE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(0)							
12	(ii)							
	(0)							
13	(ii)							
	(0)							
14	(11)							ļ
	(0)							
15	(II)							
	(0)							·
16	(II)				<u> </u>			

Schedule J (Form 990) 2015

20-0049703

Schedule J (Form 990) 2015

Page 3

Part ||| Supplemental Information

Complete this part to 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 UNDER CERTAIN CIRCUMSTANCES, L. TRETIKOV, EXECUTIVE DIRECTOR, IS ENTITLED TO RECEIVE A SEVERANCE PAYMENT. NO PAYMENT WAS MADE DURING 2015. IN ADDITION, THE FOLLOWING KEY EMPLOYEE AND HIGHEST COMPENSATED EMPLOYEES WERE ALSO ENTITLED TO AND RECEIVED SEVERANCE PAYMENTS DURING 2015: E. MOELLER, \$208,306, G. YOUNG, \$98,446, T. GILBEY, \$80,000, AND D. SICORE, \$100,000.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

▶ Complete If the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

WIK	WIKIMEDIA FOUNDATION, INC. 20-0049703							
Part Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1	noncash cont	(d) f determinin tribution am		
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
•	goods				1			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	I .	44.	173,134	. AVERAGE N	ARKET V	ALUE	
_	Securities - Closely held stock							
10	Securities - Partnership, LLC,			_				
11								
40	or trust interests							
12	Securities - Miscellaneous				-			
13	Qualified conservation							
	contribution - Historic							
	structures							
14								
	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 org	anization during the tax y	ear for contributions for				
	which the organization completed	Form 8283,	Part IV, Donee Acknowledg	jement	29			
	•					Yes	No	
30a	During the year, did the organization	tion receive	by contribution any prope	rty reported in Part I, lir	nes 1 through		1	
	28, that it must hold for at least th	nree years fr	om the date of the initial of	contribution, and which i	s not required			
	to be used for exempt purposes for	the entire h	olding period?			30a	Х	
b	If "Yes," describe the arrangement i							
31	Does the organization have a		tance policy that require	s the review of any	non-standard		1	
- •	contributions?					31 X		
32a	Does the organization hire or use							
	contributions?	•	-			32a	x	
h	If "Yes." describe in Part II.							
33	If the organization did not report as	amount in	column (c) for a type of pro	perty for which column	(a) is checked			
	describe in Part II.				, , .= ===.		1	
_								

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

Schedule M (Form 990) (2015)

Page 2

Supplemental Information. Complete this part to 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 THE NUMBER OF CONTRIBUTIONS DURING THE

YEAR.

Part II

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 Open to Public Inspection

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

► Attach to Form 990 or 990-EZ.

Internal Revenue Service Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number 20-0049703

FORM 990 PART VI, LINE 4

THE BYLAWS WERE AMENDED TO CHANGE THE TERM LENGTH AND LIMIT FOR TRUSTEES. TERM LENGTH WAS CHANGED FROM TWO YEARS TO THREE YEARS AND TO SET THE LIMIT AT TWO TERMS. THE CHANGE APPLIES TO ALL THE SEATS ON THE BOARD WITH THE EXCEPTION THAT THE TERM LIMIT DOES NOT APPLY TO THE FOUNDER, AND WILL APPLY TO FUTURE APPOINTMENTS IN A MANNER TO PRESERVE THE BOARD'S ROTATIONAL SCHEDULE.

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 CHAPTERS AND THEMATIC ORGANIZATIONS, 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 CHAPTER 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 EXECUTIVE DIRECTOR. MEETING OF THE AUDIT COMMITTEE WAS HELD AT WHICH THE CFO 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, AND KEY EMPLOYEES (COVERED PERSONS) COMPLETE ANNUALLY A CONFLICT OF INTEREST STATEMENT THE 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 COMPLETE 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 OUESTIONS 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.

Employer identification number 20-0049703

FORM 990 PART VI LINE 15A

THE WIKIMEDIA FOUNDATION BOARD OF TRUSTEES IS RESPONSIBLE FOR APPROVING
THE COMPENSATION OF THE EXECUTIVE DIRECTOR. FOR 2015 COMPENSATION, THE
BOARD OF TRUSTEES, ALL INDEPENDENT MEMBERS, REVIEWED THE EXECUTIVE
DIRECTOR'S PROPOSED COMPENSATION, AND MADE A DECISION BASED ON
COMPENSATION DATA FROM COMPARABLE ORGANIZATIONS. THE BOARD OF TRUSTEE'S
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.

HTTP://WIKIMEDIAFOUNDATION.ORG/WIKI/BYLAWS

HTTP://WIKIMEDIAFOUNDATION.ORG/WIKI/CONFLICT_OF_INTEREST_POLICY

HTTP://WIKIMEDIAFOUNDATION.ORG/WIKI/FINANCIAL REPORTS

FORM 990 PART XI, LINE 5

RETURN OF UNUSED GRANT

\$ 74,405

TOTAL FORM 990 PART XI, LINE 5

\$ 74,405

WIKIMEDIA FOUNDATION, INC.

Employer identification number 20-0049703

ATTACHMENT 1

FORM 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

AND AFFILIATED ENTITIES, 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 2

FORM 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

Page 2

Schedule O (Form 990 or 990-EZ) 2015

Name of the organization
WIKIMEDIA FOUNDATION, INC.

Employer identification number 20-0049703

ATTACHMENT 2 (CONT'D)

KNOWLEDGE RESOURCE.

ATTACHMENT 3

FORM 990, PART III - PROGRAM SERVICE, LINE 4B

THE WIKIMEDIA FOUNDATION'S COMMUNITY ENGAGEMENT DEPARTMENT AND COMMUNITY PROGRAMS FOCUS ON GROWING WIKIMEDIA BY SUPPORTING PEOPLE AND ORGANIZATIONS ALIGNED WITH THE WIKIMEDIA FOUNDATION MISSION.

THESE PROGRAMS AND EFFORTS DIRECTLY SUPPORT INITIATIVES BY VOLUNTEER CONTRIBUTORS TO WIKIMEDIA'S PROJECTS. THESE INITIATIVES INCREASE THE DIVERSITY AND LEVEL OF ENGAGEMENT IN OUR TECHNICAL AND CONTENT DEVELOPMENT, MOVEMENT GOVERNANCE, AND GLOBAL OUTREACH. IN ADDITION TO OFFERING PROGRAMS, GRANTS AND OTHER CAPACITY-BUILDING RESOURCES ARE PROVIDED TO SUPPORT COMMUNITY-LED INITIATIVES. LEARNING AND EVALUATION METHODS ARE UTILIZED TO HELP MONITOR THE IMPACT OF THIS WORK AND SHARE BEST PRACTICES ACROSS THE WIKIMEDIA MOVEMENT. TRUST AND SAFETY CONCERNS ARE ADDRESSED BY A DEDICATED TEAM TO HELP SAFEGUARD THE WELLBEING OF PARTICIPANTS.

COLLECTIVELY, THESE EFFORTS AIM TO BROADEN THE IMPACT AND REACH OF OUR PROJECTS TO INDIVIDUALS AND GROUPS AROUND THE WORLD.

ATTACHMENT 4

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,

DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,

MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, TN, UT, VA, WA, WV, WI,

Page 2

Name of the organization
WIKIMEDIA FOUNDATION, INC.

Employer identification number 20-0049703

ATTACHMENT 5

	990.	PART VII-	COMPENSATION	OF	THE	FIVE	HIGHEST	PAID	IND.	CONTRACTORS	
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NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
JONES DAY 555 CALIFORNIA STREET, 26TH FL SAN FRANCISCO, CA 94104	LEGAL SERVICES	1,557,553.
FULL CIRCLE GROUP 5671 S REDWOOD ROAD, SUITE 20 SALT LAKE CITY, UT 84123	FACILITATION SVCS	369,896.
COOLEY, LLP 101 CALIFORNIA, 5TH FL SAN FRANCISCO, CA 94111	LEGAL SERVICES	410,560.
EQUINIX, INC. 4252 SOLUTIONS CENTER CHICAGO, IL 60677	DATA CTR. COLOCATION	989,868.
MINASSIAN MEDIA, INC. 151 WEST 25TH STREET NEW YORK, NY 10001	PUBLIC RELATIONS	436,104.

	ATTACHMENT 6
FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD	
GROSS SALES LESS RETURNS AND ALLOWANCES	. 85,502.
INVENTORY AT BEGINNING OF YEAR	. 57,174.
PURCHASES	. 62,902.
SALARIES AND WAGES	
OTHER COSTS	
SUBTOTAL	. 120,076.
MINUS ENDING INVENTORY	. 70,518.
COST OF GOODS SOLD	49,558.