EXTENDED TO MAY 16, 2022

Form **990**

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. 2021 A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, Check if applicable C Name of organization D Employer identification number Address change WIKIMEDIA FOUNDATION, INC. Name change 20-0049703 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 1 MONTGOMERY STREET, SUITE 1600 (415)839-6885210,780,361. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return 94104 SAN FRANCISCO, CA H(a) Is this a group return Applica-tion pending F Name and address of principal officer: JAIME VILLAGOMEZ for subordinates? Yes X No 1 MONTGOMERY ST, SUITE 1600, SAN FRANCISCO, Yes **H(b)** Are all subordinates included? Tax-exempt status: X = 501(c)(3) = 501(c)(insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: ► WWW.WIKIMEDIAFOUNDATION.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Other > . Year of formation: 2003 **M** State of legal domicile: **FL** Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: WIKIMEDIA FDN SUPPORTS **Activities & Governance** WIKIPEDIA, ITS SISTER PROJECTS. (SEE SCHEDULE O) if the organization discontinued its operations or disposed of more than 25% of its net assets. 9 3 Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 320 5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 311000 Total number of volunteers (estimate if necessary) 6 115,023. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Current Year Prior Year** 120,919,258. 155,312,041. Contributions and grants (Part VIII, line 1h) 8 0. Program service revenue (Part VIII, line 2g) 2,980,572. 2,688,670. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 731,437. 986,354. 11 124,631,267. 158,987,065. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 23,030,121. 10,115,194. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 55,634,913. 67,857,675. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 435,770. 16a Professional fundraising fees (Part IX, column (A), line 11e) 389,022. **b** Total fundraising expenses (Part IX, column (D), line 25) 33,061,318. 33,308,068. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 112,162,122. 111,669,959. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 12,469,145. 47,317,106. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 70 191,262,962. 240,235,101 Total assets (Part X, line 16) 10,947,237. 9,057,564. 21 Total liabilities (Part X, line 26) 三年 180,315,725. Net assets or fund balances. Subtract line 21 from line 20 ... Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

| June Villagome? | 11 M 11 May 2022 Sice vasto presidentes de la construcción de la con Date Sign JAIME VILLAGOMEZ, CFO Here Type or print name and title

Date 5/09/2022 PTIN Print/Type preparer's name P01517891 DAVID M HIGHFILL Paid self-employed Firm's name ► KPMG LLP Firm's EIN ▶ 13-5565207 Preparer Firm's address 550 SOUTH HOPE STREET, **SUITE 1500** Use Only Phone no. 213-972-4000 LOS ANGELES, CA 90071 X Yes May the IRS discuss this return with the preparer shown above? See instructions No

Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the 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. (SEE SCHEDULE O)
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 \$56 , 541 , 398 • including grants of \$) (Revenue \$)
	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 SOFTWARE, HARDWARE, AND
	SERVICES NEEDED TO KEEP THE WEBSITES RUNNING, ALONG WITH DEDICATED
	TECHNICAL RESOURCES TO BUILD, IMPROVE, AND MAINTAIN THE TECHNICAL
	INFRASTRUCTURE OF WIKIMEDIA PROJECTS. THESE ONGOING ENGINEERING EFFORTS
	AND PRODUCT IMPROVEMENTS REQUIRE RESEARCH AND DESIGN WORK, AS WELL AS
	LEGAL SUPPORT. ALL OF THIS ALLOWS FOR THE BEST EXPERIENCE FOR OUR
	READERS AND VOLUNTEER COMMUNITY, ENSURING USERS CONTINUE TO ACCESS,
	CONTRIBUTE TO, AND GROW THE WORLD'S LARGEST ONLINE FREE KNOWLEDGE
	RESOURCE.
4b	(Code:) (Expenses \$24,637,870. including grants of \$10,115,193.) (Revenue \$)
	THE WIKIMEDIA FOUNDATION GRANTMAKING AND PROGRAM ACTIVITIES FOCUSES ON
	GROWING WIKIMEDIA IN VARIOUS REGIONS AROUND THE WORLD AND EXPANDING DIVERSITY WITHIN THE CONTRIBUTOR BASE. THESE PROGRAMS AND EFFORTS
	DIRECTLY SUPPORT CONTRIBUTORS THROUGH GRANTS FOR PROJECTS, PROGRAMS,
	AND CAMPAIGNS BY INDIVIDUALS AND ORGANIZATIONS. GRANTMAKING AND PROGRAM
	ACTIVITIES TEAM ALSO STRIVES TO FURTHER THE MISSIONS OF WIKIMEDIA, SUCH
	AS OPEN ACCESS AND EDUCATION, THROUGH ACTIVITIES LIKE VOLUNTEER
	SUPPORT, ENGAGEMENT PROGRAMS, PARTNERSHIPS, EVALUATION, RESEARCH, AND
	COMMUNICATIONS. BECAUSE OPENNESS AND INCLUSIVITY ARE KEY TO THE SUCCESS
	OF THE WIKIMEDIA PROJECTS, GRANTMAKING AND PROGRAM ACTIVITIES AIM TO
	BROADEN THE DIVERSITY OF VOICES AND EXPAND THE REACH OF OUR PROJECTS TO
	DIVERSE INDIVIDUALS (SEE SCHEDULE O)
4c	(Code:) (Expenses \$
70	(Code) (Expenses a
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 81,179,268.
	Form 990 (2020)

Form 990 (2020) WIKIMEDIA FOUNDATION, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
•	Schedule D, Part III	├°		
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			.
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	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	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	"		
13	·	19		x
20-	complete Schedule G, Part III	20a		X
20a	• •	20a 20b		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		\vdash
21			Х	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Λ	<u> </u>

Form 990 (2020) WIKIMEDIA FOUNDATION, INC.

Part IV | Checklist of Required Schedules (continued)

1 3	Continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	NO
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	. 24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a_		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	·		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
0.4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	. 31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
Par	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
. ui	Check if Schedule O contains a response or note to any line in this Part V			
	Chook it Confedule C contains a response of note to any line in this Fait v		Vos	No
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	5	Yes	INO
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	ð		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
,	(gambling) winnings to prize winners?	1c	Х	
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)	705		age •				
ı uı	Statements negarating other into rinings and rax compliance (continued)			T				
٥-	Establishment and continue to the Ferm W.O. Taraccitist of Warrand To. Oletanosta		Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 320							
	, , , , , , , , , , , , , , , , , , , ,	1	Х					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b						
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		v					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	├				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		_				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		v					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х					
b	If "Yes," enter the name of the foreign country VINITED KINGDOM							
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			₹.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	\vdash	X				
	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).		v					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	├				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	├				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		37				
	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e		x				
е	7 7 7 171							
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
_	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		-				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
a	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
a	Gross income from members or shareholders 11a	-						
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
40-	amounts due or received from them.)	40-						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O.							
О	Enter the amount of reserves the organization is required to maintain by the states in which the							
_	organization is licensed to issue qualified health plans They the amount of receives an head							
	Enter the amount of reserves on hand Did the experience on a property of a index tempine coming the tay year?	44-		X				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		v				
	excess parachute payment(s) during the year?	15		X				
40	If "Yes," see instructions and file Form 4720, Schedule N.	40		X				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	<u> </u>	$\perp \Delta$				

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If "Yes," complete Form 4720, Schedule O.

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

	Check if Schedule O contains a response or note to any line in this Part VI				X				
Sec	tion A. Governing Body and Management								
				Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	9							
	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 on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent	9							
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?	. L	2		Х				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, trustees, or key employees to a management company or other person?	L:	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	4		Х				
5									
6	Did the organization have members or stockholders?	. [6		Х				
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?	7	7a	Х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	. 7	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?	8	За	X					
b	Each committee with authority to act on behalf of the governing body?		3b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9	9		Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
				Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	. 10	0a		Х				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10	0b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	1	1a	Х					
b									
12a									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12	2b	Х					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	. 12	2c	Х					
13	Did the organization have a written whistleblower policy?	. 🔼	13	Х					
14	Did the organization have a written document retention and destruction policy?	1	14	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?								
а	The organization's CEO, Executive Director, or top management official	1	5a	Х					
	Other officers or key employees of the organization		5b	Х					
	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?	. 10	6a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	. 16	6b						
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE O								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)	(3)s or	nly) a	availa	ble				
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website X Upon request Other (explain on Schedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,	and fin	nanc	ial					
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
	JAIME VILLAGOMEZ - 415-839-6885								
	1 MONTGOMERY, SUITE 1600, SAN FRANCISCO, CA 94104								

Form **990** (2020)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	ge per per box, unless person is both an efficient and a director (trustee)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of				
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	g organ		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations		
(1) KATHERINE MAHER EXECUTIVE DIRECTOR (THRU 4/30/21)	40.00			х				406,339.	0.	16,979.
(2) GRANT INGERSOLL	40.00									
CHIEF TECHNOLOGY OFFICER	0.00	1			х			319,337.	0.	36,186.
(3) AMANDA KETON	40.00							0_0,0011		
GENERAL COUNSEL & SECRETARY	0.00	1		Х				315,364.	0.	34,928.
(4) JAIME VILLAGOMEZ	40.00							,		,
CFO & TREASURER	0.00			Х				308,943.	0.	38,699.
(5) JANEEN UZZELL	40.00									-
CHIEF OPERATING OFFICER	0.00				Х			314,718.	0.	21,350.
(6) ANTHONY NEGRIN	40.00									
CHIEF PRODUCT OFFICER	0.00				Х			290,056.	0.	34,860.
(7) LISA SEITZ	40.00									
CHIEF ADVANCEMENT OFFICER	0.00				Х			281,713.	0.	41,580.
(8) ROBYN ARVILLE	40.00									
CHIEF TALENT/CULTURE OFFICER	0.00				Х			278,335.	0.	28,244.
(9) HEATHER WALLS	40.00									
CHIEF CREATIVE OFFICER	0.00					Х		257,361.	0.	8,265.
(10) MARGARET NOVOTNY	40.00									
SENIOR DIRECTOR, DESIGN	0.00					X		220,573.	0.	37,975.
(11) ANTHONY SEBRO	40.00									
DEPUTY GENERAL COUNSEL	0.00					X		220,393.	0.	38,144.
(12) ERIKA BJUNE	40.00								_	
VP, ENGINEERING	0.00					Х		220,049.	0.	20,296.
(13) ANGELA REID	40.00	1								
VP, CMTY RES/SUST (FROM 07/21)	0.00					X		221,945.	0.	7,632.
(14) NATALIIA TYMKIV	8.00	ļ								_
CHAIR	0.00	Х						0.	0.	0.
(15) JIMMY WALES	4.00									_
TRUSTEE (FOUNDER)	0.00	X				_		0.	0.	0.
(16) DARIUSZ JEMIELNIAK	4.00	٠,							<u> </u>	_
TRUSTEE (17) ESRA'A AL SHAFEI	0.00	X			_			0.	0.	0.
TRUSTEE	4.00	v						0.	0.	0.
032007 12-23-20	1 0.00	X			<u> </u>	<u> </u>	<u> </u>	J 0.	U •	Form 990 (2020)

032007 12-23-20 Form **990** (2020)

20-0049703

Section A. Officers, Directors, Trus	stees, Key Em	oloy	ees,	and	l Hiç	ghes	t C	ompensated Employee	s (continued)			
(A)	(C)						(D)	(E)		(F)		
Name and title	Average	(do	not c	Posi heck r			nne	Reportable	Reportable	Es	stimate	∍d
	hours per	box	, unle	ss per	rson is both an lirector/trustee)		n an	compensation	compensation	an	nount	of
	week		cer ar	nd a di	irecto	r/trus	tee)	from	from related		other	
	(list any	ector						the	organizations	1	pensa	
	hours for	or dir	a a			ted		organization	(W-2/1099-MISC)	l	om the	
	related	stee	trustee			bens		(W-2/1099-MISC)			anizati	
	organizations below	altru	onal t		loye	E S				l	d relate	
	line)	Individual trustee or director	Institutional t	Officer	Key employee	Highest compensated employee	Former			orga	anizatio	ons
(18) JAMES HEILMAN	4.00	르	Ë	JO.	- X	<u>= = = = = = = = = = = = = = = = = = = </u>	요					
TRUSTEE	0.00	х						0.	0.			0.
(19) LISA LEWIN	4.00	T-										
TRUSTEE	0.00	х						0.	0.			0.
(20) RAJU NARISETTI	4.00											
TRUSTEE	0.00	Х						0.	0.			0.
(21) SHANI EVENSTEIN SIGALOV	4.00											
TRUSTEE	0.00	Х						0.	0.			0.
(22) TANYA CAPUANO	4.00											_
TRUSTEE	0.00	Х						0.	0.			0.
(23) MARIA SEFIDARI CHAIR THRU 6/21	8.00											_
TRUSTEE	0.00	Х						0.	0.			0.
		-										
			\vdash									
		1										
1b Subtotal	1							3,655,126.	0.	36	5,1	38.
c Total from continuation sheets to Part V								0.	0.			0.
d Total (add lines 1b and 1c)								3,655,126.	0.	36	5,13	38.
2 Total number of individuals (including but i	not limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			
compensation from the organization												197
										\Box	Yes	No
3 Did the organization list any former officer	, director, trust	ee, k	сеу е	empl	oye	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for	such individual									3		X
4 For any individual listed on line 1a, is the s	•							•	•			
and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	Jf	or such individual		4	Х	
5 Did any person listed on line 1a receive or												
rendered to the organization? If "Yes," cor	nplete Schedul	e J fo	or sı	ıch r	oers	on .				5		X
Section B. Independent Contractors												
1 Complete this table for your five highest co										tion fro	mc	
the organization. Report compensation for	the calendar ye	ear e	ndir	ng w	ith c	or wi	<u>thin</u>	the organization's tax y	ear.			

(A) Name and business address	(B) Description of services	(C) Compensation
JONES DAY, 555 CALIFORNIA STREET, 26TH		
FLOOR, SAN FRANCISCO, CA 94104	LEGAL SERVICES	901,872.
SNOHETTA DESIGN AS, AKERSHUSSTRANDA 21,		
SKUR 39, OSLO, NORWAY 0150	BRAND STRATEGY	613,221.
GLUZDOV.COM, INC DBAS PEEDAND FUNCTION		
1243 S 7TH ST, PHILADELPHIA, PA 19147	ENGINEERING SERVICES	538,746.
SWIFT + POSSIBLE LLC		
1250 NW 17TH AVE, PORTLAND, OR 97209	PUBLIC RELATIONS	461,455.
MINASSIAN MEDIA, INC, 151 WEST 25TH		
STREET, FLOOR 12, NEW YORK, NY 10001	PUBLIC RELATIONS	319,214.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization > 13		

Form **990** (2020)

Form 990 (2020) WIKIMED
Part VIII Statement of Revenue

			Check if Schedule O contains a resp	nnse (or note to any lin	e in this Part VIII			
			Officer if Correcting Contains a resp.	J113C (or riote to arry iiii	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under
									sections 512 - 514
nts tts	1	а	Federated campaigns 1a						
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues 1b						
An G		С	Fundraising events1c		463,006.				
aifts ar /		d	Related organizations 1d						
s, G			Government grants (contributions) 1e						
Sign			All other contributions, gifts, grants, and						
uti Per			similar amounts not included above 1f		154,849,035.				
o E		~	Noncash contributions included in lines 1a-1f		904,637.				
ou		•	Total. Add lines 1a-1f		, ,	155,312,041.			
<u>U 10</u>		"	Total: Add lines 1a-11		Business Code				
	_				Busiliess Code				
<u>ic</u> e	2								
er v		b							
S		С							
ran Sev		d							
Program Service Revenue		е							
Ā		f	All other program service revenue						
		g	Total. Add lines 2a-2f						
	3		Investment income (including dividends,						
			other similar amounts)			2,703,740.			2,703,740.
	4		Income from investment of tax-exempt be						
	5		Royalties						
	Ŭ		(i) Rea	 I	(ii) Personal				
	6	_		•	(1) 1 01001141				
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
	7	а	Gross amount from sales of (i) Securi		(ii) Other				
			assets other than inventory 7a 51,695,	126.					
		b	Less: cost or other basis						
ne			and sales expenses	196.					
Revenue		С	Gain or (loss) 7c -15,	070.					
Re		d	Net gain or (loss)	<u></u>		-15,070.			-15,070.
her	8	а	Gross income from fundraising events (not						
₽			including \$ 463,006. of						
			contributions reported on line 1c). See						
			Part IV, line 18	8a	0.				
		h	Less: direct expenses	8b	500.				
			Net income or (loss) from fundraising eve	_		-500.			-500,
			Gross income from gaming activities. See						
	3	u		´ 9a					
		L	Part IV, line 19	9b					
			Less: direct expenses						
			Net income or (loss) from gaming activities	:S	P				
	10	а	Gross sales of inventory, less returns		10- 600				
			and allowances	10a					
		b	Less: cost of goods sold	10b	82,600.				
		С	Net income or (loss) from sales of inventor	ry		115,023.		115,023.	
_ω					Business Code				
no e	11	а	ENDOWMENT PROCESSING FEES			863,529.			863,529.
ane Dug		b	OTHER REVENUE			7,665.			7,665.
Miscellaneous Revenue		С	CREDIT CARD REBATE			637.			637.
Sc		_	All other revenue						
Σ			Total. Add lines 11a-11d			871,831.			
	12		Total revenue. See instructions			158,987,065.	0.	115,023.	3,560,001.
						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	, , ,

Form 990 (2020) WIKIMEDIA FOUNDATION, INC. Part IX Statement of Functional Expenses

Secti	ion 501(c)(3) and 501(c)(4) organizations must comp			nplete column (A).	
	Check if Schedule O contains a respon	nse or note to any line in (A)	this Part IX(B)	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	6,595,547.	6,595,547.		
2	Grants and other assistance to domestic	44 505	44 505		
3	individuals. See Part IV, line 22 Grants and other assistance to foreign	44,585.	44,585.		
3	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	3,475,062.	3,475,062.		
4	Benefits paid to or for members		-		
5	Compensation of current officers, directors,				
	trustees, and key employees	3,200,369.	2,183,273.	812,466.	204,630.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	52,302,332.	40,552,065.	7,095,027.	4,655,240.
8	Pension plan accruals and contributions (include		-	.,,	
	section 401(k) and 403(b) employer contributions)	1,445,512.		242,852.	125,398.
9	Other employee benefits	8,022,951.	6,074,193.	1,097,599.	851,159.
10	Payroll taxes	2,886,511.	2,133,288.	484,876.	268,347.
11	Fees for services (nonemployees):				
	Management	1,919,969.	1,637,982.	245,912.	36,075.
	Legal Accounting	135,772.	1,031,902.	135,772.	30,073.
	Lobbying	38,604.		133,772	
	5 () () () () () ()	389,022.	33,332.		389,022.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	9,606,269.		1,837,762.	1,193,667.
12	Advertising and promotion	40,416.	40,416.	474,754.	00 420
13	Office expenses	764,699. 4,097,788.	190,507. 3,081,796.	917,755.	99,438. 98,237.
14 15	Information technology Royalties	4,031,100.	3,001,790.	911,133.	90,257.
16	Occupancy	1,337,115.	900,823.	326,643.	109,649.
17	Travel	17,885.	11,043.	4,445.	2,397.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials \dots	11.05	2 225	1 000	
19	Conferences, conventions, and meetings	11,865.	9,995.	1,870.	
20	Interest				
21 22	Payments to affiliates Depreciation, depletion, and amortization	2,430,311.	1,722,727.	707,584.	
23	Insurance	540,364.	2,722,7274	540,364.	
24	Other expenses. Itemize expenses not covered	2 = 0 , 0 0 10		===,===	
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	DONATIONS PROC. FEES	6,386,483.			6,386,483.
b	PAYROLL FEES	3,012,370.	2,503,421.	302,184.	206,765.
С	COLLABORATIVE PROJECT	1,916,006.	1,916,006.		
d	RECRUITING	423,793.	78,278.	329,049.	16,466.
	All other expenses	628,359. 111,669,959.	337,555. 81,179,268.	97,741. 15,654,655.	193,063. 14,836,036.
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization	<u> </u>	01,1/3,400.	10,004,000.	14,030,030.
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					000

Form **990** (2020)

Pai	rt X	Balance Sneet				
		Check if Schedule O contains a response or note to any li	ne in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		24,221,504.	1	20,435,443
	2	Savings and temporary cash investments		47,873,033.	2	67,248,371
	3	Pledges and grants receivable, net	300,000.	3	1,390,399	
	4	Accounts receivable, net		4		
	5	Loans and other receivables from any current or former of				
		trustee, key employee, creator or founder, substantial con				
		controlled entity or family member of any of these persons	s		5	
	6	Loans and other receivables from other disqualified person				
		under section 4958(f)(1)), and persons described in section	n 4958(c)(3)(B)		6	
δ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		110,209.	8	29,874
ğ	9	5		1,930,165.	9	2,123,520
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a	19,749,257.			
	b	Less: accumulated depreciation 10b	11,546,724.	7,451,015.	10c	8,202,533
	11	Investments - publicly traded securities		107,595,820.	11	137,484,143
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets			14	1,595,469
	15	Other assets. See Part IV, line 11		1,781,216.	15	1,725,349
	16	Total assets. Add lines 1 through 15 (must equal line 33)		191,262,962.	16	240,235,101
	17	Accounts payable and accrued expenses	9,260,302.	17	7,633,332	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of S	***************************************		21	
es	22	Loans and other payables to any current or former officer,				
≅		trustee, key employee, creator or founder, substantial con				
Liabilities		controlled entity or family member of any of these persons			22	
_	23	Secured mortgages and notes payable to unrelated third p			23	
	24	Unsecured notes and loans payable to unrelated third par			24	
	25	Other liabilities (including federal income tax, payables to				
		parties, and other liabilities not included on lines 17-24). C	omplete Part X	1 606 025		1 404 000
		_		1,686,935.	25	1,424,232
	26		▶ ▼	10,947,237.	26	9,057,564
Ø		Organizations that follow FASB ASC 958, check here				
nce		and complete lines 27, 28, 32, and 33.		170 247 460	07	220 204 335
alaı	27	Net assets without donor restrictions	178,247,468. 2,068,257.	27	229,294,335. 1,883,201	
Ö	28	Net assets with donor restrictions		2,000,237.	28	1,003,201
ڃ		Organizations that do not follow FASB ASC 958, check	nere			
P		and complete lines 29 through 33.			00	
şt	29	Capital stock or trust principal, or current funds			29	
SS	30	Paid-in or capital surplus, or land, building, or equipment f			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or o		180,315,725.	31	231,177,536
ž	32	Total net assets or fund balances			32	
	33	Total liabilities and net assets/fund balances		191,262,962.	33	240,235,101

LOIII	1990 (2020) WIKIMEDIA POONDATION, INC.	20	00=7	705	Pag	ge 🕰
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,98		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,669		
3	Revenue less expenses. Subtract line 2 from line 1	3	47	,31	7,1	06.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	180	,31	5,7	25.
5	Net unrealized gains (losses) on investments	5	3	,240),3	56.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		304	1,3	49.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	231	<u>,17'</u>	7,5	<u>36.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					Щ
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	-				
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	lit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2020)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Inspection

Employer identification number

Name of the organization WIKIMEDIA FOUNDATION, 20-0049703 INC. Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	88816654.	99036753.	115839832	120919258	155312041	579924538
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	88816654.	99036753.	115839832	120919258	155312041	579924538
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)						
6	Public support. Subtract line 5 from line 4.						579924538
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	88816654.	99036753.	115839832	120919258	155312041	579924538
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1287010.	1774136.	2819428.	3177662.	2703740.	11761976.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	65,091.	79,807.	88,924.	101,429.	115,023.	450,274.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	75,918.	85,984.	120,602.	677,436.		
11	Total support. Add lines 7 through 10						593968559
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax y	year as a section 5	01(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	ic Support Per	centage				
	Public support percentage for 2020 (I		•	column (f))		14	97.64 %
	Public support percentage from 2019	,	/			15	97 . 76 %
16a	33 1/3% support test - 2020. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2019. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact			=	•	VI how the organiz	zation
	meets the facts-and-circumstances to	-			-		
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets the						. —
	organization meets the facts-and-circ						.
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b			
					Sche	edule A (Form 990	or 990-EZ) 2020

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per- formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5					1	
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						_
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6	(a) 2010	(6) 2011	(6) 2010	(4) 2019	(6) 2020	(i) iotai
10a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is						
regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3) organizati	on,
check this box and stop here						>
Section C. Computation of Publi						
15 Public support percentage for 2020 (li		•	column (f))		15	%
16 Public support percentage from 2019					16	%
Section D. Computation of Inves					T I	
17 Investment income percentage for 20					17	%
18 Investment income percentage from 2					18	<u>%</u>
19a 33 1/3% support tests - 2020. If the						. —
more than 33 1/3%, check this box an b 33 1/3% support tests - 2019. If the						
line 18 is not more than 33 1/3%, chec						
20 Private foundation If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- 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).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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).
- 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.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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9a		
9b		
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30		
10a		
10b		

Pai	TIV 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 lines 11b and			
	11c below, the governing body of a supported organization?	a		
	A family member of a person described in line 11a above?	b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
<u> </u>	detail in Part VI.	С		
Sec	tion B. Type I Supporting Organizations	—		
		`	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, directors, or trustees were allocated among the			
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sac	supervised, or controlled the supporting organization.	<u></u>		
<u> </u>	non o. Type ii oupporting organizations	Т,	v	NI -
	Ware a majority of the averagination's directors by twistons during the tay year also a majority of the directors		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			
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			
		Τ,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		165	NO
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in line 2, above, 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.			
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruc	tion <u>s</u>).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	3		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.)		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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? If "Yes" or "No" provide details in Part VI.	3		
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.)		

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. Section A - Adjusted Net Income 1	Par	t V Type III Non-Functionally Integrated 509(a)(3) Support	ng Organia	zations	
All other Type III non-functionally integrated supporting organizations must complete Sections A through E. Section A - Adjusted Net Income (A) Prior Year (A) Prior Year (Optional) 1 Net short-term capital gain 1 1 2 Recoveries of prior-year distributions 2 2 3 Other gross income (see instructions) 3 3 4 Add lines 1 through 3. 4 4 5 Depreciation and depletion 5 5 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 Other expenses (see instructions) 7 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 8 Section B - Minimum Asset Amount (A) Prior Year (B) Current Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 Average monthly value of securities 1 10 1 Average monthly value of securities 1 10 2 Average monthly value of other non-exempt-use assets 1 10 3 Average monthly value of other non-exempt-use assets 1 10 4 Total (add lines 1a, 1b, and 1c) 10 4 Discount claimed for blockage or other factors (sexplain in Capital in Part VIII) 2 Acquisition indebtedness applicable to non-exempt-use assets 2 2 3 Subtract line 2 from line 1d. 3 3 3 Subtract line 2 from line 1d. 4 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions) 5 5 Net value of other proving distributions 7 7 7 Recoveries of prior-year distributions 7 7 8 Minimum Asset Amount (add line 7 to line 6) 8 8 Minimum asset Amount for prior year (from Section B, line 8, column A) 1 9 Enter Q35 of line 1 1 9 Clotek here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see	1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (explain in	Part VI). See instructions.
Net short-term capital gain 1				•	
2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Other gross income (see instructions) 4 Add lines 1 through 3. 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 Portion of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 2 Average monthly cash balances 1 b Average monthly cash balances 1 c Fair market value of other non-exempt-use assets 1 c d Total (add lines 1a, th, and 1c) 1 d d Total (add lines 1a, th, and 1c) 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Cash deemed held for exempt use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply into 5 by 0.035. 6 Multiply into 5 by 0.035. 7 Recoveries of prior-year distributions 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 Adjusted net income for prior year (from Section B, line 8, column A) 2 Enter 0.85 of line 1. 3 Minimum asset amount for prior year (from Section B, line 8, column A) 5 Net Fair greater of line 2 or line 3. 6 Distr	Sect	on A - Adjusted Net Income		(A) Prior Year	
3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 5 Depreciation and depletion 5 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 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 Portion B Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Rection B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1 Agureage monthly value of securities 1 D Average monthly value of securities 1 D Average monthly value of securities 1 D Isocount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 2 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 Aguisted net income for prior year (from Section A, line 8, column A) 7 Letter or Distributable Amount 8 Current Year 7 Letter or Os of line 1. 8 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see	1	Net short-term capital gain	1		
4 Add lines 1 through 3.	2	Recoveries of prior-year distributions	2		
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Schedule A (Form 990 or 990-EZ) 2020

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _{(continue}	ed)	
Sect	on D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exe	1			
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3	
4	Amounts paid to acquire exempt-use assets			4	
_5	Qualified set-aside amounts (prior IRS approval required - pr	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	_		10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	,	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
c	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
<u>i_</u>	Carryover from 2015 not applied (see instructions)				
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
<u>b</u>	Applied to 2020 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				

Schedule A (Form 990 or 990-EZ) 2020

Breakdown of line 7:
 Excess from 2016
 Excess from 2017
 Excess from 2018
 Excess from 2019
 Excess from 2020

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)	<u>je o</u>
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:	
MISCELLANEOUS REVENUE	
2016 AMOUNT: \$ 75,918.	
2017 AMOUNT: \$ 85,984.	
2018 AMOUNT: \$ 120,602.	
2019 AMOUNT: \$ 677,436.	
2020 AMOUNT: \$ 871,831.	

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

- 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.

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

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

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			Empl	loyer identification number
	WIKIMED	IA FOUNDATION, I	NC.		20-0049703
Pa	art I-A Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		> \$	
Pa	art I-B Complete if the org	anization is exempt und	ler section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶ \$	
	Enter the amount of any excise tax				
	If the organization incurred a sectio				
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.			=6.1/	1/01
Pa	art I-C Complete if the org	anization is exempt und	ler section 501(c),	<u> </u>	· · ·
	Enter the amount directly expended	, , ,	•	***************************************	
2	Enter the amount of the filing organ				
	exempt function activities				
3	Total exempt function expenditures			•	
4	line 17b Did the filing organization file Form				
4 5	Enter the names, addresses and en				
3	made payments. For each organiza		•	-	
	contributions received that were pro	•	0 0		•
	political action committee (PAC). If				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total					
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.					
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.					
c Total lobbying expenditures	14,366.	87,597.	25,065.	38,604.	165,632.					
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.					
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.					
f Grassroots lobbying expenditures					000 000 F7\ 0000					

Schedule C (Form 990 or 990-EZ) 2020

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

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k	o)
the lobbying activity.	Yes	No	Amo	ount
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?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a 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?	<u> </u>		1.	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5)	, or sec	tion	
301(0)(0).			Yes	N
			100	- '
1 Wars substantially all (2004 or mars) dues resolved pendeductible by members?				
, , , , , , , , , , , , , , , , , , , ,				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		. 2		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the carry lile. Complete if the organization is exempt under section 501(c)(4), section	e prior year? n 501(c)(5)	2 3 , or sec		0 :-
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	e prior year? n 501(c)(5) "No" OR (b	, or sec b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	e prior year? n 501(c)(5) "No" OR (b	, or sec b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5) "No" OR (b	, or sec b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5) "No" OR (b	or second Part I		3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded section the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (See instructions) Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5) "No" OR (b	2 3, or secon) Part I	II-A, line	3, is
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

WIKIMEDIA FOUNDATION, INC.

Employer identification number 20-0049703

Par	t I Organizations Maintaining Donor Advised	d Funds or Othe	r Si	milar Funds	or Ac	coun	its. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.					
		(a) Donor adv	visec	l funds	((b) Fun	ds and other accounts
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in v	writing that the assets	s hel	d in donor advis	ed fund	ds	
	are the organization's property, subject to the organization's	exclusive legal contro	ol?				Yes No
6	Did the organization inform all grantees, donors, and donor a						
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for	r any	other purpose	conferr	ing	
	impermissible private benefit?						
Par	t II Conservation Easements. Complete if the org	ganization answered '	"Yes	" on Form 990,	Part IV,	line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that app	ly).				
	Preservation of land for public use (for example, recreated	tion or education)		Preservation of	f a histo	orically	important land area
	Protection of natural habitat			Preservation of	f a certi	fied his	storic structure
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation con	tribu	tion in the form	of a co	nserva	tion easement on the last
	day of the tax year.						Held at the End of the Tax Year
а	Total number of conservation easements					2a	
b						2b	
С	Number of conservation easements on a certified historic stru	ucture included in (a)				2c	
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not	on a	a historic structu	ıre		
	listed in the National Register					2d	
3	Number of conservation easements modified, transferred, rele				organi	zation	during the tax
	year ▶						
4	Number of states where property subject to conservation eas	sement is located	_				
5	Does the organization have a written policy regarding the per	iodic monitoring, insp	ecti	on, handling of			
	violations, and enforcement of the conservation easements it	holds?					Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations	s, and	d enforcing cons	servatio	n ease	ments during the year
							
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and	l enf	orcing conserva	tion eas	sement	ts during the year
	> \$						
8	Does each conservation easement reported on line 2(d) above	•					
	and section 170(h)(4)(B)(ii)?						Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its re	eveni	ue and expense	statem	ent an	d
	balance sheet, and include, if applicable, the text of the footn	ote to the organization	on's t	financial stateme	ents tha	at desc	ribes the
Dav	organization's accounting for conservation easements.	Ant Hintonian T			h 0	::I	
Par	t III Organizations Maintaining Collections of		rea	isures, or Ot	ner 3	IIIIIIa	Assets.
	Complete if the organization answered "Yes" on Form						
1a	If the organization elected, as permitted under FASB ASC 95	· ·					
	of art, historical treasures, or other similar assets held for pub	•				nce of p	oublic
	service, provide in Part XIII the text of the footnote to its finan						
b	If the organization elected, as permitted under FASB ASC 95						
	art, historical treasures, or other similar assets held for public	exhibition, education	n, or	research in furth	nerance	of pub	olic service,
	provide the following amounts relating to these items:						_
	(i) Revenue included on Form 990, Part VIII, line 1						\$
_							\$
2	If the organization received or held works of art, historical treating to the control of the con				ı gain, p	orovide)
	the following amounts required to be reported under FASB A						Φ.
а	Revenue included on Form 990, Part VIII, line 1						\$
b	Assets included in Form 990, Part X						\$

032051 12-01-20

Schedule D (Form 990) 2020

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

Par	t III Organi	zations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	r Other	Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its											
	collection items	(check all that apply):										
а	Public exh	nibition	c	i 🗌	Loan or exc	hange progra	am					
b	Scholarly	research	e	,	Other							
С	Preservati	on for future generations										
4	Provide a descri	ption of the organization's co	ollections and explain	n how th	ey further th	ne organizatio	on's exemp	ot purpos	e in Part	XIII.		
5		did the organization solicit of										
	to be sold to rais	se funds rather than to be ma	aintained as part of t	he orgar	nization's co	llection?				Yes		No
Par	t IV Escrov	v and Custodial Arran	gements. Compl	ete if the	organizatio	n answered	"Yes" on F	orm 990,	Part IV, I	ine 9, or		
	reported	an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization	on an agent, trustee, custod	ian or other intermed	liary for o	contributions	s or other as:	sets not in	cluded				
	on Form 990, Pa	art X?							\square	Yes		No
b		the arrangement in Part XIII										
										Amount		
С	Beginning balan	ce						1c				
d	Additions during	the year						1d				
е		ring the year						1e				
f								1f				
2 a		tion include an amount on F						/?		Yes		No
		the arrangement in Part XIII.]
Par	t V Endow	ment Funds. Complete	if the organization ar	swered	"Yes" on Fo	rm 990, Part	IV, line 10	١.				
			(a) Current year	(b) F	rior year	(c) Two yea	rs back (e	d) Three ye	ears back	(e) Four	years	back
1a	Beginning of year	ar balance										
b												
С		earnings, gains, and losses										
d	Grants or schola	arships										
е	Other expenditu											
	and programs											
f		xpenses										
g	End of year bala											
2	Provide the estir	mated percentage of the cur	rent year end balanc	e (line 1ç	g, column (a)) held as:						
а	Board designate	ed or quasi-endowment		%								
b	Permanent endo	owment >	%									
С	Term endowmer	nt >	%									
	The percentages	s on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are there endow	ment funds not in the posse	ssion of the organiza	ation tha	t are held ar	nd administe	red for the	organizat	tion	_		
	by:										Yes	No
	(i) Unrelated or	rganizations								3a(i)		
		anizations								3a(ii)		
b	If "Yes" on line 3	Ba(ii), are the related organiza	ations listed as requir	ed on S	chedule R?					3b		
4		XIII the intended uses of the		wment f	unds.							
Par	t VI Land, E	Buildings, and Equipm	ient.									
	Complete	e if the organization answere	d "Yes" on Form 990), Part IV	<u>/, line 11a. S</u>	See Form 990), Part X, lii	ne 10.				
	Descri	ption of property	(a) Cost or o	ther	(b) Cost	or other	, , ,	cumulated	d	(d) Book	value	е
			basis (investr	nent)	basis	(other)	depi	eciation				
1a	Land											
b												
С	Leasehold impro	ovements				4,581.		10,77		963	; , 8 (<u>07.</u>
			I		17,67	<u>4,676.</u>	10,4	35,95	0.	7,238	,72	<u> 26.</u>
Total	. Add lines 1a thr	ough 1e. <i>(Column (d) must e</i>	egual Form 990. Part	X. colun	nn (B). line 1	0c.)			▶	8,202	.,53	33.

Schedule D (Form 990) 2020

Part VII	Investments - Other Securities.

Tart VIII III Vestillerits - Other Securities.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

Part IX Other Assets.

(8) (9)

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
<u>(1)</u>	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE INCENTIVES - TI ALLOWANCE	818,893.
(3) STRAIGHT LINE RENT EXPENSE ADJ	454,740.
(4) ENDOWMENT FUND PAYABLE	9,862.
(5) OTHER LIABILITIES	140,737.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,424,232.

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

Schedule D (Form 990) 2020

_	Complete if the organization answered "Yes" on Form 990, Part IV, line 1			1	162,701,630.
1				1	102,701,030.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	3,240,356.		
a b	Net unrealized gains (losses) on investments Donated services and use of facilities		473,709.	1	
C	Recoveries of prior year grants		475,705.	1	
d	Other (Describe in Part XIII.)		500.	1	
	Add lines 2a through 2d			2e	3,714,565.
3	Subtract line 2e from line 1				158,987,065.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				, , , , , , , , , , , , , , , , , , , ,
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)				158,987,065.
Pa	t XII Reconciliation of Expenses per Audited Financial State	ments Wit	h Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1			1	444 000 040
1	Total expenses and losses per audited financial statements			1	111,839,819.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	450 500		
а	Donated services and use of facilities		473,709.	4	
b	Prior year adjustments			4	
С	Other losses		F00	4	
	Other (Describe in Part XIII.)		500.		474 200
	Add lines 2a through 2d			2e	474,209. 111,365,610.
3	Subtract line 2e from line 1			3	111,303,010.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	الما			
a	Investment expenses not included on Form 990, Part VIII, line 7b		304,349.	4	
	Other (Describe in Part XIII.) Add lines 4a and 4b		•		304,349.
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			4c 5	111,669,959.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F			; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	additional infoi	mation.		
PAI	T X, LINE 2:				
	2 740, INCOME TAXES				
THE	FOUNDATION HAS EVALUATED THE FINANCIAL	STATEME	NT IMPACT C	F P	OSITIONS
TAI	EN OR EXPECTED TO BE TAKEN IN ITS TAX RE	TURNS.	MANAGEMENT	HAS	
DET	ERMINED THAT NO TAX LIABILITIES NEED TO	BE RECO	RDED UNDER	APP	LICABLE
A C (OUNTING GUIDANCE.				
<u>ACC</u>	CONTING COLDINGE.				
PAI	T XI, LINE 2D - OTHER ADJUSTMENTS:				
REC	LASS OF FUNDRAISING EXPENSES				500.
ד גם	T XII, LINE 2D - OTHER ADJUSTMENTS:				
	LASS OF FUNDRAISING EXPENSES			Sobo	5 0 0 • dule D (Form 990) 2020
U3205	12-01-20			SUNE	uule D (FOITH 990) 2020

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

2020
Open to Public Inspection

Name of the organization

Form 990, Part IV, line 14b.

Employer identification number

WIKIMEDIA FOUNDATION, INC. 20-0049703

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? _____X Yes ____

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

(a) Region	(b) Number of		n be duplicated if additional space is n	(e) If activity listed in (d)	(f) Total
(a) Hegien	offices	`émployees,	(by type) (such as, fundraising, pro-	is a program service,	expenditures
	in the region	agents, and independent	gram services, investments, grants to	describe specific type	for and investments
		contractors in the region	recipients located in the region)	of service(s) in the region	in the region
CENTRAL AMERICA AND					
THE CARIBBEAN -					
ANTIGUA & BARBUDA,				SUPPORT WIKIPEDIA AND	
ARUBA, BAHAMAS,		1	PROGRAM SERVICES	OPEN SOURCE TECHNOLOGY	112,260.
EAST ASIA AND THE					
PACIFIC - AUSTRALIA,					
BRUNEI, BURMA,				SUPPORT WIKIPEDIA AND	
CAMBODIA,		12	PROGRAM SERVICES	OPEN SOURCE TECHNOLOGY	1,139,859.
EUROPE (INCLUDING					
ICELAND & GREENLAND)					
- ALBANIA, ANDORRA,				SUPPORT WIKIPEDIA AND	
AUSTRIA, BELGIUM		24	PROGRAM SERVICES	OPEN SOURCE TECHNOLOGY	11,376,247.
MIDDLE EAST AND					, ,
NORTH AFRICA -					
ALGERIA, BAHRAIN,				SUPPORT WIKIPEDIA AND	
DJIBOUTI, EGYPT,		2	PROGRAM SERVICES	OPEN SOURCE TECHNOLOGY	478,211.
NORTH AMERICA -					·
CANADA AND MEXICO,					
BUT NOT THE UNITED				SUPPORT WIKIPEDIA AND	
STATES		4	PROGRAM SERVICES	OPEN SOURCE TECHNOLOGY	2,176,853.
SOUTH AMERICA -					
ARGENTINA, BOLIVIA,					
BRAZIL, CHILE,				SUPPORT WIKIPEDIA AND	
COLUMBIA, ECUADOR,		2	PROGRAM SERVICES	OPEN SOURCE TECHNOLOGY	106,743.
SOUTH ASIA -					,
AFGHANISTAN,					
BANGLADESH, BHUTAN,				SUPPORT WIKIPEDIA AND	
INDIA, MALDIVES,		7	PROGRAM SERVICES	OPEN SOURCE TECHNOLOGY	563,058.
SUB-SAHARAN AFRICA -					,
ANGOLA, BENIN,					
BOTSWANA, BURKINA				SUPPORT WIKIPEDIA AND	
FASO,		2	 PROGRAM SERVICES	OPEN SOURCE TECHNOLOGY	647,888.
3 a Subtotal	0				16,601,119.
b Total from continuation					, ,
sheets to Part I	0	0			3,475,062.
c Totals (add lines 3a					

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

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Schedule F (Form 990) 2020

20,076,181.

and 3b)

Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) Part I (c) Number of (f) Total (a) Region (b) Number of (d) Activities conducted in region (e) If activity listed in (d) offices expenditures employees or (by type) (i.e., fundraising, is a program service, in the region agents in program services, grants to describe specific type for region recipients located in the region) region of service(s) in region CENTRAL AMERICA AND THE CARIBBEAN -ANTIGUA & BARBUDA, ARUBA, BAHAMAS, GRANTMAKING FURTHER MISSION 125. EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA, GRANTMAKING FURTHER MISSION 167,806. EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM FURTHER MISSION GRANTMAKING 666,875. MIDDLE EAST AND NORTH AFRICA -ALGERIA, BAHRAIN, DJIBOUTI, EGYPT GRANTMAKING FURTHER MISSION 82,799. NORTH AMERICA -CANADA AND MEXICO, BUT NOT THE UNITED STATES GRANTMAKING FURTHER MISSION 33,626. RUSSIA AND NEIGHBORING STATES -ARMENIA, AZERBIJAN, BELARUS GRANTMAKING FURTHER MISSION 110,829. SOUTH AMERICA -ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR, GRANTMAKING FURTHER MISSION 267,027. SOUTH ASIA -AFGHANISTAN. BANGLADESH, BHUTAN, INDIA, MALDIVES, GRANTMAKING FURTHER MISSION 3,339. SUB-SAHARAN AFRICA -ANGOLA, BENIN, BOTSWANA, BURKINA GRANTMAKING FURTHER MISSION 860,439. FASO CENTRAL AMERICA AND THE CARIBBEAN -ANTIGUA & BARBUDA, ARUBA, BAHAMAS, FURTHER MISSION GRANTMAKING 2,800. **Totals**

Schedule F (Form 990)			TION, INC.	20-004970	3 Page
Part I Continuation	on of Activitie	s per Region	Schedule F (Form 990), Part I, line	3)	_
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
EAST ASIA AND THE					
PACIFIC - AUSTRALIA,					
BRUNEI, BURMA,					
CAMBODIA,			GRANTMAKING	FURTHER MISSION	40,562
EUROPE (INCLUDING					,
ICELAND & GREENLAND)					
- ALBANIA, ANDORRA,					
AUSTRIA, BELGIUM			GRANTMAKING	FURTHER MISSION	496,615
MIDDLE EAST AND					,
NORTH AFRICA -					
ALGERIA, BAHRAIN,					
DJIBOUTI, EGYPT,			GRANTMAKING	FURTHER MISSION	2,170
NORTH AMERICA -					
CANADA AND MEXICO,					
BUT NOT THE UNITED					
STATES			GRANTMAKING	FURTHER MISSION	3,546
RUSSIA AND					,,,,,
NEIGHBORING STATES -					
ARMENIA, AZERBIJAN,					
BELARUS,			GRANTMAKING	FURTHER MISSION	1,495
SOUTH AMERICA -				TORTHUM HISSION	1,133
ARGENTINA, BOLIVIA,					
BRAZIL, CHILE,					
COLUMBIA, ECUADOR,			GRANTMAKING	FURTHER MISSION	151,907
SOUTH ASIA -				TORTHUM HISSION	131,307
AFGHANISTAN,					
BANGLADESH, BHUTAN,					
INDIA, MALDIVES,			GRANTMAKING	FURTHER MISSION	75,198
SUB-SAHARAN AFRICA -			GRANIMAKING	PORTINER MISSION	73,130
ANGOLA, BENIN,					
BOTSWANA, BURKINA					
•			GRANTMAKING	FURTHER MISSION	507 904
FASO,			GRANIMAKING	FURTHER MISSION	507,904
Totals	•				3,475,062

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FM\ appraisal, other)
		CENTRAL AMERICA	FURTHER MISSION	105	MIDE	0		
		AND THE CARIBBEAN	FURTHER MISSION	125.	WIRE	0.		
		EAST ASIA AND THE	FURTHER MISSION	167,806.	MIDE	0.		
		PACIFIC	FURTHER MISSION	107,800.	WIRE	0.		
		EUROPE (INCLUDING						
		GREENLAND)	FURTHER MISSION	666,875.	WIRE	0.		
		MIDDLE EAST AND						
			FURTHER MISSION	82,799.	WIRE	0.		
		NORTH AMERICA	FURTHER MISSION	33,626.	WIRE	0.		
		RUSSIA AND NEIGHBORING						
		STATES	FURTHER MISSION	110,829.	WIRE	0.		
		SOUTH AMERICA	FURTHER MISSION	267,027.	WIRE	0.		
		SOUTH ASIA	FURTHER MISSION	3,339.	 WIRE	0.		

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

_

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3 Enter total number of other organizations or entities

Schedule F (Form 990) 2020

Part II Continuation	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organizatio	(b) IRS code section and EIN (if applicable)		(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)
		SUB-SAHARAN						
		AFRICA	FURTHER MISSION	860,439.	WIRE	0.		
								
								<u> </u>
								<u> </u>

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

(a) type of grant or assistance	Part III can be duplicated if	additional space is needed	d				
FURTHER MISSION AND THE CARIBBEAN 2 2,800. NIRE 0. EAST ASIA AND THE CARIBBEAN 2 2,800. NIRE 0. EAST ASIA AND THE CARIBBEAN 2 40,562. NIRE 0. EUROPE (INCLUDING ICELAND 4 0. FURTHER MISSION GREENLAND) 32 496,615. NIRE 0. FURTHER MISSION NORTH AFRICA 3 2,170. NIRE 0. FURTHER MISSION NORTH AFRICA 4 3,546. NIRE 0. FURTHER MISSION STATES 2 1,495. NIRE 0. FURTHER MISSION STATES 2 1,495. NIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907. NIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907. NIRE 0.	(a) Type of grant or assistance	(b) Region		(d) Amount of cash grant		noncash	(h) Method of valuation (book, FMV, appraisal, other)
### FURTHER MISSION AND THE CARIBBEAN 2 2,800. WIRE 0. ###################################							
EAST ASIA AND THE 17		CENTRAL AMERICA					
FURTHER MISSION PACIFIC 17 40,562.WIRE 0. EUROPE (INCLUDING ICELAND &	FURTHER MISSION	AND THE CARIBBEAN	2	2,800.	WIRE	0.	
FURTHER MISSION PACIFIC 17 40,562.WIRE 0. EUROPE (INCLUDING ICELAND & 12 496,615.WIRE 0. FURTHER MISSION SREENLAND) 32 496,615.WIRE 0. FURTHER MISSION NORTH AFRICA 3 2,170.WIRE 0. FURTHER MISSION NORTH AMERICA 4 3,546.WIRE 0. FURTHER MISSION STATES 2 1,495.WIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907.WIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907.WIRE 0.							
EUROPE (INCLUDING ICELAND & 32 496,615.WIRE 0. FURTHER MISSION GREENLAND) 32 496,615.WIRE 0. FURTHER MISSION NORTH AFRICA 3 2,170.WIRE 0. FURTHER MISSION NORTH AMERICA 4 3,546.WIRE 0. RUSSIA AND RUSSIGNAND NEIGHBORING 5TATES 2 1,495.WIRE 0. FURTHER MISSION STATES 2 1,495.WIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907.WIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907.WIRE 0. FURTHER MISSION SOUTH ASIA 22 75,198.WIRE 0.		EAST ASIA AND THE					
CELAND & GREENLAND 32 496,615.WIRE 0.	FURTHER MISSION	PACIFIC	17	40,562.	WIRE	0.	
CELAND & GREENLAND 32 496,615.WIRE 0.							
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RUSSIA AND NEIGHBORING FURTHER MISSION STATES 2 1,495. WIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907. WIRE 0. FURTHER MISSION SOUTH ASIA 22 75,198. WIRE 0.	FURTHER MISSION		3	2,170.	WIRE	0.	
RUSSIA AND NEIGHBORING FURTHER MISSION STATES 2 1,495. WIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907. WIRE 0. FURTHER MISSION SOUTH ASIA 22 75,198. WIRE 0.							
RUSSIA AND NEIGHBORING FURTHER MISSION STATES 2 1,495. WIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907. WIRE 0. FURTHER MISSION SOUTH ASIA 22 75,198. WIRE 0.							
RUSSIA AND NEIGHBORING FURTHER MISSION STATES 2 1,495. WIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907. WIRE 0. FURTHER MISSION SOUTH ASIA 22 75,198. WIRE 0.							
FURTHER MISSION SOUTH AMERICA 10 151,907. WIRE 0. FURTHER MISSION SOUTH ASIA 22 75,198. WIRE 0.	FURTHER MISSION	NORTH AMERICA	4	3,546.	WIRE	0.	
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FURTHER MISSION STATES 2 1,495. WIRE 0. FURTHER MISSION SOUTH AMERICA 10 151,907. WIRE 0. FURTHER MISSION SOUTH ASIA 22 75,198. WIRE 0.							
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FURTHER MISSION SOUTH ASIA 22 75,198.WIRE 0.				1,133.		-	
FURTHER MISSION SOUTH ASIA 22 75,198.WIRE 0.							
FURTHER MISSION SOUTH ASIA 22 75,198.WIRE 0.							
	FURTHER MISSION	SOUTH AMERICA	10	151,907.	WIRE	0.	
CUID CAHADAN	FURTHER MISSION	SOUTH ASIA	22	75,198.	WIRE	0.	
CUD CAHADAN							
		SUB-SAHARAN					
FURTHER MISSION AFRICA 95 507,904.WIRE 0.	FIRTHER MISSION		95	507 904	WTRE	0	

"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Instructions for Form 5713; don't file with Form 990)

ui t	To leight onlis	
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"	
	the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign	
	Corporation (see Instructions for Form 926)	Yes X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may	
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and	
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a	
	U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"	
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to	
	Certain Foreign Corporations (see Instructions for Form 5471)	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
	. c.s.g a	, <u> </u>
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If	

Schedule F (Form 990) 2020

X Yes

Page 5

Part V | Supplemental Information

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

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

GRANTS TO ORGANIZATIONS:

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

GRANTS TO INDIVIDUALS:

GRANTS TO INDIVIDUALS FOLLOW THE SAME PROCESS AS OTHER GRANTS UNLESS THEY ARE TRAVEL SCHOLARSHIPS. INDIVIDUALS APPLY FOR TRAVEL SCHOLARSHIPS (PRIMARILY TO ATTEND THE ANNUAL CONFERENCE, WIKIMANIA) AND APPLICATIONS ARE REVIEWED AND EITHER ACCEPTED OR DENIED. IN MOST CASES, TRAVEL IS

WIKIMEDIA FOUNDATION, INC. Schedule F (Form 990) 2020 Page 5 Part V | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. THEN ARRANGED FOR THE INDIVIDUAL AND PAID FOR DIRECTLY BY THE WIKIMEDIA FOUNDATION. IN VERY LIMITED CASES, INDIVIDUALS BOOK TRAVEL THEMSELVES AND PROVIDE RECEIPTS TO THE FOUNDATION WHICH THEN REIMBURSES THEM BASED ON THE RECEIPTS. ADDITIONALLY, THE FOUNDATION ALSO REIMBURSES (UPON REQUEST) FOR OTHER RELATED TRAVEL EXPENSES SUCH AS VISA APPLICATION COSTS AND INCIDENTALS LIKE MEALS AND AIRPORT TRANSFERS. METHOD OF ACCOUNTING: THE GRANTS AND EXPENDITURES REPORTED IN SCHEDULE F WERE BASED ON THE ACCRUAL METHOD OF ACCOUNTING.

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization	TA COUNTRACTON THE						ntification number
	Complete if the automication arrays			- Faura 000 Dart IV I	: 4°	20-0049	
required to complete this part	Complete if the organization answe	rea "Y	es" or	1 Form 990, Part IV, I	ine 1	7. Form 990-EZ	Tilers are not
 1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, Pab If "Yes," list the 10 highest paid individual compensated at least \$5,000 by the 	e X Solicitat f Solicitat g X Special or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursua	ion of ion of fundra (includ	non-governising of onal fundation	overnment grants nment grants events ficers, directors, trus undraising services?		X Yes	· · · · · · · · · · · · · · · · · · ·
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribi	ıstody trol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Fotal							
S List all states in which the organizatio or licensing.	n is registered or licensed to solicit c		utions	or has been notified	it is e	exempt from re	gistration
AL, AK, AR, CA, CO, CT, DC, I			D,M	A,MI,MN,MS	, MC	, NV, NH,	NJ,MM,NY
NC, ND, OH, OK, OR, PA, RI,	SC,TN,UT,VA,WA,WV,V	/I					

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

Schedule G (Form 990 or 990-EZ) 2020

Pa	ırt I	Fundraising Events. Complete if the of fundraising event contributions and great properties.				
		or idilidraising event contributions and gr	(a) Event #1 VIRTUAL BDAY	(b) Event #2	(c) Other events 1 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	95,654.	118,557.	248,795.	463,006.
ш	2	Less: Contributions	95,654.	118,557.	248,795.	463,006.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
v	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
irect E	7	Food and beverages				
	8 9	Entertainment Other direct expenses			500.	500.
	10	Direct expense summary. Add lines 4 through				500. -500.
Pa	ırt I	Net income summary. Subtract line 10 from li II Gaming. Complete if the organization				-500•
		\$15,000 on Form 990-EZ, line 6a.		T T		
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				
Direct 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	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	' from line 1, column (d)			
	Ent	ter the state(s) in which the organization condu	ucts gaming activities: _			
		he organization licensed to conduct gaming ad No," explain:				Yes No
10-	10/0	ere any of the organization's gaming licenses re	avokad suspandad ar ta	rminated during the tax v	ear?	Yes No
		re any or the organization's gaming licenses re Yes," explain:	· · · · · · · · · · · · · · · · · · ·			res NO

Schedule G (Form 990 or 990-EZ) 2020

032082 11-25-20

Sch	edule G (Form 990 or 990-EZ) 2020 WIKIMEDIA FOUNDATION, INC. 20	0-0049	<u>703</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a	I	%
	An outside facility	130	<u> </u>	70
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party \$\bigs\sum_{\text{\tin}\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\tint{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\texi{\text{\text{\texi}\text{\text{\text{\texi}\text{\texit}\text{\text{\texi{\text{\text{\texi}\texi{\texi{\texi{\te			
С	If "Yes," enter name and address of the third party:			
	The fact of the first and address of the time party.			
	Name			
	Address ►			
	Addices P			
16	Gaming manager information:			
	Name			
	Coming manager companyation • •			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		V	□ No
	retain the state gaming license?		Yes	∟ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	е		
D -	organization's own exempt activities during the tax year ▶ \$			
Ра	Tt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	d Part III, lin	es 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
		<u> </u>		

Schedule G	(Form 990 or 990-EZ)	WIKIMEDIA	FOUNDATION,	INC.	20-0049703	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation (continued)				
_						

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization		ON THE					Employer identification number
WIKIMEDIA Part I General Information on Grants a		ON, INC.					20-0049703
1 Does the organization maintain records							
criteria used to award the grants or assis							No
2 Describe in Part IV the organization's properties Part II Grants and Other Assistance to					onization anawared "	Voo" on Form 000 Port	t IV line 21 for any
recipient that received more than	=				ariizatiori ariswered	res on Form 990, Fan	try, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
TIDES FOUNDATION							
P.O. BOX 29903							TO SUPPORT WORK TO
SAN FRANCISCO, CA 94129	51-0198509	501(C)(3)	5,529,704.	0.			FURTHER MISSION.
,							·
YALE UNIVERSITY							
PO BOX 805							RESEARCH INITIATIVE TO
NEW HAVEN, CT 06503	06-0646973	501(C)(3)	260,000.	0.			FURTHER MISSION.
PEACE DEVELOPMENT FUND							
PO BOX 1280							TO SUPPORT WORK TO
AMHERST, MA 01004	04-2738794	501(C)(3)	150,885.	0.			FURTHER MISSION.
BLACK LUNCH TABLE 6225 N KENMORE AVE APT 2N CHICAGO, IL 60660	82-5436759	501(C)(3)	138,647.	0.			TO SUPPORT WORK TO
enicado, il 0000	02 3430733	501(0)(3)	130,047.	٠.			FORTHER MISSION.
CODE FOR SCIENCE AND SOCIETY INC. 3439 SE HAWTHORNE BLVD, #247	81-3791683	E01/Q)/2)	00.412	0.			TO SUPPORT WORK TO
PORTLAND , OR 97214-5048	01-3/91663	501(0)(3)	99,412.	0.			FURTHER MISSION.
FRACTURED ATLAS, INC PO BOX 55	11 2451702	E01/G)/3)	06.057	•			TO SUPPORT WORK TO
HARTSDALE, NY 10530	11-3451703		86,957.	0.			FURTHER MISSION. 13.
2 Enter total number of section 501(c)(3) a3 Enter total number of other organization	•		e iinė 1 tadie				
LHA For Paperwork Reduction Act Notice							Schedule I (Form 990) 2020

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(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
DIGITAL PUBLIC LIBRARY OF AMERICA 1 WASHINGTON MALL STE 1019 BOSTON, MA 02108	46-1160948	501(C)(3)	54,684.	0.			TO SUPPORT WORK TO FURTHER MISSION.
SOFTWARE FREEDOM CONSERVANCY 137 MONTAGUE STREET BROOKLYN, NY 11201	41-2203632	501(C)(3)	48,750.	0.			TO SUPPORT WORK TO FURTHER MISSION.
ART+FEMINISM, INC 323 W 39TH STREET, SUITE 912 NEW YORK, NY 10018	83-2919353	501(C)(3)	44,982.	0.			TO SUPPORT WORK TO FURTHER MISSION.
WIKIJOURNAL 10134 AVALON VALLEY DRIVE DANBURY, CT 06810	85-1545401	501(C)(3)	41,999.	0.			TO SUPPORT WORK TO FURTHER MISSION.
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVENUE PITTSBURG, PA 15213-3890	25-0969449	501(C)(3)	40,112.	0.			TO SUPPORT WORK TO FURTHER MISSION.
THE AFRICA NARRATIVE 1717 N STREET NW STE 1 WASHINGTON, DC 20036	00-0000000	501(C)(3) PENDIN	39,688.	0.			TO SUPPORT WORK TO FURTHER MISSION.
WIKIMEDIA DC P.O. BOX 9822 WASHINGTON, DC 20016	45-2106571	501(C)(3)	24,508.	0.			TO SUPPORT WORK TO FURTHER MISSION.
ACCESS NOW 34 W 27TH STREET, 6TH FLOOR NEW YORK, NY 10001	27-0597430	501(C)(3)	8,000.	0.			TO SUPPORT WORK TO FURTHER MISSION.

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete il tile	organization answe	sied Tes OffToffffs	990, Partiv, IIIIe 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SUPPORT FOR PROJECTS TO FURTHER MISSION	3	24,689.	0.	FMV	
Part IV Supplemental Information. Provide the information rec	luired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:					
GRANTS TO ORGANIZATIONS:					
ORGANIZATIONS THAT HAVE MET EACH G	RANT PROG	RAM'S ELIC	SIBILITY CR	ITERIA ARE	
ELIGIBLE TO PARTICIPATE IN A PUBLIC	C APPLICA	TION PROCE	ESS. TO DO	SO, THEY	
SUBMIT A GRANT PROPOSAL THAT CONTA	INS A DES	CRIPTION C	F THE MISS	ION-RELATED	
WORK THEY ARE PROPOSING, A BUDGET,	A START	DATE AND C	OMPLETION	DATE OR	
DURATION OF THE GRANT PERIOD, AND	A DESCRIP	TION OF HO	W THIS WOR	K WILL	
ACHIEVE THE WIKIMEDIA FOUNDATION'S	MISSION	OR THE WIK	XIMEDIA MOV	EMENT	
STRATEGIC PRIORITIES. WHEN AN APPL	ICANT IS	AWARDED A	GRANT AND	BECOMES A	

Part IV | Supplemental Information

GRANTEE, THE GRANTEE COMPLETES SCREENING REQUIREMENTS AND SIGNS A GRANT

AGREEMENT. THE AGREEMENT STIPULATES THAT THEY WILL USE GRANT FUNDS FOR

CHARITABLE PURPOSES CONSISTENT WITH THE WIKIMEDIA FOUNDATION'S MISSION AND

THE PURPOSES DESCRIBED IN THE GRANT PROPOSAL; THAT THEY AGREE TO THE

REPORTING REQUIREMENTS, INCLUDING MAINTAINING RECEIPTS/DOCUMENTATION OF

EXPENSES; THAT THEY AGREE TO PROCEDURES FOR NOTIFYING THE WIKIMEDIA

FOUNDATION OF IMPORTANT CHANGES THAT MAY AFFECT THE GRANT; AND THAT THEY

WILL RETURN ANY UNUSED GRANT FUNDS AFTER THE END OF THE GRANT'S TERM. ONCE

EACH GRANT IS COMPLETE, THE GRANTEE WILL SUBMIT A NARRATIVE AND FINANCIAL

REPORT OR SERIES OF REPORTS THAT DEMONSTRATE HOW THE GRANT FUNDS WERE SPENT

AND DESCRIBE THE IMPACT OF THE WORK.

GRANTS TO INDIVIDUALS:

GRANTS TO INDIVIDUALS FOLLOW THE SAME PROCESS AS OTHER GRANTS UNLESS THEY

ARE TRAVEL SCHOLARSHIPS. INDIVIDUALS APPLY FOR TRAVEL SCHOLARSHIPS

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

REVIEWED AND EITHER ACCEPTED OR DENIED. IN MOST CASES, TRAVEL IS THEN

ARRANGED FOR THE INDIVIDUAL AND PAID FOR DIRECTLY BY THE WIKIMEDIA

FOUNDATION. IN VERY LIMITED CASES, INDIVIDUALS BOOK TRAVEL THEMSELVES AND

PROVIDE RECEIPTS TO THE FOUNDATION WHICH THEN REIMBURSES THEM BASED ON THE

RECEIPTS. ADDITIONALLY, THE FOUNDATION ALSO REIMBURSES (UPON REQUEST) FOR

OTHER RELATED TRAVEL EXPENSES SUCH AS VISA APPLICATION COSTS AND

INCIDENTALS LIKE MEALS AND AIRPORT TRANSFERS.

METHOD OF ACCOUNTING:

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

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

QUQU Open to Public

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

WIKIMEDIA FOUNDATION, INC.

Employer identification number 20-0049703

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
	The organization?	5a		<u>X</u>
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			7.7
	The organization?	6a		_ <u>X</u> _
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		<u> </u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2020

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	berients	(6)(1)-(U)	reported as deferred on prior Form 990	
(1) KATHERINE MAHER	(i)	404,053.	0.	2,286.	5,300.	11,679.	423,318.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) GRANT INGERSOLL	(i)	318,004.	0.	1,333.	11,400.	24,786.	355,523.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) AMANDA KETON	(i)	313,024.	0.	2,340.	9,161.	25,767.	350,292.	0.	
GENERAL COUNSEL & SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) JAIME VILLAGOMEZ	(i)	304,179.	0.	4,764.	8,343.	30,356.	347,642.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) JANEEN UZZELL	(i)	311,076.	0.	3,642.	11,400.	9,950.	336,068.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) ANTHONY NEGRIN	(i)	287,864.	0.	2,192.	11,400.	23,460.	324,916.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) LISA SEITZ	(i)	279,103.	0.	2,610.	11,224.	30,356.	323,293.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) ROBYN ARVILLE	(i)	275,725.	0.	2,610.	9,846.	18,398.	306,579.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) HEATHER WALLS	(i)	254,815.	0.	2,546.	0.	8,265.	265,626.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) MARGARET NOVOTNY	(i)	217,888.	0.	2,685.	7,701.	30,274.	258,548.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(11) ANTHONY SEBRO	(i)	217,890.	0.	2,503.	7,854.	30,290.	258,537.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(12) ERIKA BJUNE	(i)	217,193.	0.	2,856.	8,718.	11,578.	240,345.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(13) ANGELA REID	(i)	218,161.	0.	3,784.	6,951.	681.	229,577.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

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

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

➤ Attach to Form 990.

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

Name of the organization WIKIMEDIA FOUNDATION, INC. Employer identification number 20-0049703

Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or litems contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1	(d) Method of de noncash contribe	etermin		S
4	Aut. Moules of out		items contributed	1 Onn 390, r art viii, line r	9			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property	37	67	004 627	T3.677			
9	Securities - Publicly traded	X	67	904,637	• F.W.A			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation 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 organiz	ation during	the tax year for co	ontributions	•			
	for which the organization completed Form 828	-						
	3	,	3				Yes	No
30a	During the year, did the organization receive by	contributio	n anv property rep	orted in Part I. lines 1 thro	ugh 28, that it			
	must hold for at least three years from the date							
	exempt purposes for the entire holding period?		•	William troquired to be		30a		Х
h	If "Yes," describe the arrangement in Part II.					Jour		
31	Does the organization have a gift acceptance p	olicy that re	auires the review o	of any nonstandard contrib	utions?	31	х	
	Does the organization hire or use third parties of					31		
SZa	contributions?		~			32a		Х
b								
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is ch	ecked,			
	describe in Part II.							
ΙНΔ	For Panerwork Reduction Act Notice see	the Instruct	tions for Form 000	`	Schedule I	M (Earn	- 000)	2020

Schedule M (Form 990) 2020

032142 11-23-20

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Inspection

Name of the organization

WIKIMEDIA FOUNDATION, INC. **Employer identification number** 20-0049703

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND THE WIKIMEDIA COMMUNITY TO HELP THE WORLD SHARE IN FREE KNOWLEDGE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IN COORDINATION WITH A NETWORK OF INDIVIDUAL VOLUNTEERS AND OUR
INDEPENDENT MOVEMENT ORGANIZATIONS, INCLUDING RECOGNIZED CHAPTERS,
THEMATIC ORGANIZATIONS, USER GROUPS, AND PARTNERS, 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.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
AND GROUPS AROUND THE WORLD.
FORM 990, PART VI, SECTION A, LINE 7A:
THE BOARD CONSISTS OF A MAXIMUM OF SIXTEEN TRUSTEES. EIGHT SEATS ARE
SELECTED BY THE WIKIMEDIA COMMUNITY, ONE SEAT IS RESERVED FOR JIMMY WALES
AS THE COMMUNITY FOUNDER, AND SEVEN SEATS ARE SELECTED BY THE BOARD FOR
SPECIFIC EXPERTISE.
FORM 990, PART VI, SECTION B, LINE 11B:
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

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

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization WIKIMEDIA FOUNDATION, INC.

Employer identification number 20-0049703

COMPLETENESS BY THE CFO AND THEN BY THE CEO/EXECUTIVE DIRECTOR OR DELEGATE.

THEN A MEETING OF THE AUDIT COMMITTEE WAS HELD AT WHICH THE CFO AND

EXTERNAL ACCOUNTING FIRM WALKED THROUGH THE DRAFT IN DETAIL FOR THE AUDIT

COMMITTEE'S APPROVAL. A COMPLETE COPY OF THE FORM 990 WAS PROVIDED TO THE

VOTING MEMBERS OF THE GOVERNING BODY PRIOR TO FILING WITH THE INTERNAL

REVENUE SERVICE.

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

THE ORGANIZATION'S BOARD MEMBERS, OFFICERS, EXECUTIVES, 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 COMPLETES ANNUALLY A PLEDGE OF PERSONAL COMMITMENT THAT AFFIRMS THAT THE INDIVIDUAL IS IN COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY AND THAT THE INDIVIDUAL WILL PROMPTLY NOTIFY THE EXECUTIVE DIRECTOR AND THE BOARD CHAIR WHEN A CONFLICT OR POTENTIAL CONFLICT ARISES. FURTHERMORE, IN THE CASE OF A CONFLICT, THE INDIVIDUAL AGREES TO REFRAIN FROM USING HIS OR HER PERSONAL INFLUENCE TO ENCOURAGE THE FOUNDATION TO ENTER THE TRANSACTION AND MUST PHYSICALLY EXCUSE HIMSELF OR HERSELF FROM ANY FURTHER DISCUSSIONS OTHER THAN TO ANSWER QUESTIONS ABOUT THE TRANSACTION. IN THE CASE OF POTENTIAL CONFLICT, THE REMAINING BOARD MEMBERS REVIEW THE POTENTIAL TRANSACTION TO DETERMINE WHETHER SAID TRANSACTION IS FAIR AND REASONABLE TO THE FOUNDATION AND LEGAL COUNSEL IS CONSULTED AS NECESSARY TO ENSURE THAT SUCH A TRANSACTION WOULD NOT CONSTITUTE AN EXCESS BENEFIT TRANSACTION. REMAINING BOARD MEMBERS REVIEW THE POTENTIAL

TRANSACTION TO DETERMINE WHETHER SAID TRANSACTION IS FAIR AND REASONABLE TO

Schedule O (Form 990 or 990-EZ) 2020 Page 2 **Employer identification number** Name of the organization 20-0049703 WIKIMEDIA FOUNDATION, INC. THE FOUNDATION AND LEGAL COUNSEL IS CONSULTED AS NECESSARY TO ENSURE THAT SUCH A TRANSACTION WOULD NOT CONSTITUTE AN EXCESS BENEFIT TRANSACTION. FORM 990, PART VI, SECTION B, LINE 15: THE WIKIMEDIA FOUNDATION BOARD OF TRUSTEES OR HR COMMITTEE, A BOARD SUB-COMMITTEE IS RESPONSIBLE FOR APPROVING THE COMPENSATION OF THE CEO/EXECUTIVE DIRECTOR, OTHER OFFICERS AND KEY EMPLOYEES. FOR 2020 COMPENSATION, THE BOARD OF TRUSTEES OR HR COMMITTEE, A BOARD SUB-COMMITTEE, ALL INDEPENDENT MEMBERS, REVIEWED THE PROPOSED COMPENSATION, AND MADE A DECISION BASED ON COMPENSATION DATA FROM COMPARABLE ORGANIZATIONS. THE BOARD OF TRUSTEES OR HR COMMITTEE, A BOARD SUB-COMMITTEE DELIBERATIONS AND DECISION WERE CONTEMPORANEOUSLY DOCUMENTED, INCLUDING WHO ATTENDED AND VOTED AND A DESCRIPTION OF THE COMPARABLE DOCUMENTATION USED AND HOW IT WAS OBTAINED. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AR,CA,FL,GA,HI,IL,KS,KY,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,OR,PA,RI,SC,TN,UT VA,WV<u>,W</u>I FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S WEBSITE INCLUDES LINKS TO ITS GOVERNING DOCUMENTS, ITS CONFLICT OF INTEREST POLICY AND ITS AUDITED FINANCIAL STATEMENTS.

HTTPS://FOUNDATION.WIKIMEDIA.ORG/WIKI/BYLAWS

HTTPS://FOUNDATION.WIKIMEDIA.ORG/WIKI/CONFLICT OF INTEREST POLICY

HTTPS://WIKIMEDIAFOUNDATION.ORG/ABOUT/FINANCIAL-REPORTS/

FORM 990 PART XI, LINE 9

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

WIKIMEDIA FOUL	NDATION, INC.				20-0049	703	
Part I Identification of Disregarded Entities. Complete	ete if the organization answered "Yo	es" on Form 990, Part IV, line 33	3.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Total inco	me End-of-year		(f) controlling entity	g
WIKIMEDIA LLC - 87-3824318							
1209 ORANGE STREET WILMINGTON, DE 19801	CHARITABLE	DELAWARE		0.	WIKIMEDIA F	OUNDATI	ON,
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	on answered "Yes" on Form 990), Part IV, line 34, I	pecause it had one	or more related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
		, , , , , , , , , , , , , , , , , , ,		501(c)(3))		Yes	No
	_						
	_						
For Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.	•	•	•	Schedule R	(Form 99	90) 2020

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

		,	ı	•			_				
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	1	ortionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	Percentage ownership
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets		itions?	20 of Schedule	partner	ownersnip
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
	l						<u> </u>	<u> </u>			

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year	(h) Percentage ownership	Sec 512(t contr	tion b)(13) rolled tity?
		country)		or trust)		assets			No
									_
								-	

Schedule R (Form 990) 2020

Page 3

Yes No

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			1a		
					1b		
С	Gift, grant, or capital contribution from related organization(s)				1c		
					1d		
е	Loans or loan guarantees by related organization(s)				1e		
f	Dividends from related organization(s)				1f		
g	Sale of assets to related organization(s)				1g		
h	Purchase of assets from related organization(s)				1h		
i	Exchange of assets with related organization(s)				1i		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		
ı	Performance of services or membership or fundraising solicitations for related organ	nization(s)			11		
					1m		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)			1n		
0	Sharing of paid employees with related organization(s)				10	\perp	
P Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s) 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. (a) Name of related organization (b) Transaction type (a-s) Method of determining amount type (a-s) (1) (2)							
q	Reimbursement paid by related organization(s) for expenses				1q	\perp	
r	Other transfer of cash or property to related organization(s)				1r		
s	Other transfer of cash or property from related organization(s)				1s		
2	If the answer to any of the above is "Yes," see the instructions for information on \boldsymbol{w}	ho must complete th	is line, including covered re	elationships and transaction thresholds.			
	(a)			(d)			
	Name of related organization		Amount involved	Method of determining amount inv	olved		
		type (a-s)					
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
32163	xchange of assets with related organization(s) ease of facilities, equipment, or other assets to related organization(s) ease of facilities, equipment, or other assets from related organization(s) ease of facilities, equipment, or other assets from related organization(s) erformance of services or membership or fundraising solicitations for related organization(s) erformance of services or membership or fundraising solicitations by related organization(s) haring of facilities, equipment, mailing lists, or other assets with related organization(s) haring of paid employees with related organization(s) eimbursement paid to related organization(s) for expenses eimbursement paid by related organization(s) for expenses ther transfer of cash or property to related organization(s) the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. (a) Name of related organization (b) Transaction Amount involved Method of determining amount involved			90) 2020			

Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprotion allocat	por- ate ions?	General manage partne	(k) al or Percentage ging ownership
			,	100 110					
									900) 9000