Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Open to Public

Department of the Treasury

		The organization may have to use a copy of this return to sa	ilisiy state re	porting requiremen	ts. Inspection								
A I	For th	he 2008 calendar year, or tax year beginning 07/01, 2008, and	ending		06/30,2009								
В		applicable: Please C Name of organization WIKIMEDIA FOUNDATION		D Employer iden	ntification number								
X	Adde			20-0049	703								
	Nam	print or type. Number and street (or P.O. box if mail is not delivered to street address)	Room/suite										
	Initia	al return See 149 NEW MONTGOMERY, 3RD FLOOR		(415) 839-6885									
	Tern	Specific Instruc- Instruc-		(415705.	7 0003								
	Ame	tions. Can EDANGTOCO CA 04105		G Gross receipts	S 0 410 E47								
100	Appl	F Name and address of principal officer		H(a) Is this a group	0/413/34/								
	pend	149 NEW MONTGOMERY, 3RD FLOOR SAN FRANCISCO, CA	04107	affiliates?									
ı	Tax-ex	xempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	94107	H(b) Are all affiliates									
J		122 377 3 7 4 (1110)		The Secretary Secretary	a list. (see instructions)								
		WWW.WIRITEDITIE CONDITION.ORG	V	H(c) Group exemption									
	art I	of organization: X Corporation Trust Association Other ► L Summary	Year of forma	ation: 2003 M S	tate of legal domicile: FL								
11.6													
	1	Briefly describe the organization's mission or most significant activities:											
ce		THE WIKIMEDIA FOUNDATION SUPPORTS WIKIPEDIA AND EIGHT OTHER WIKI-BASED											
Governance		PROJECTS DESIGNED TO ENABLE PEOPLE AROUND THE WORLD TO COLLABORATIVELY											
Ver	_	DEVELOP EDUCATIONAL MATERIALS FOR THE BENEFIT OF AL											
8	2	Check this box if the organization discontinued its operations or disposed of m											
00	3	Number of voting members of the governing body (Part VI, line 1a)			3 8								
Activities	4	Number of independent voting members of the governing body (Part VI, line 1b)			4 8								
	5	Total number of employees (Part V, line 2a)			5 26								
	6	rotal number of volunteers (estimate if necessary)			100,000								
	7 a	Total gross unrelated business revenue from Part VIII, line 12, column (C)		7	a NONE								
	b	Net unrelated business taxable income from Form 990-T, line 34			b NONE								
				Prior Year	Current Year								
<u>e</u>	8	Contribution and grants (Part VIII, line 1h)		6,533,539	7,664,458.								
enr	9	Program service revenue (Part VIII line 2n)		100,203									
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	CTION	33,382									
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		72,246									
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,739,370									
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		NON									
	14	Benefits paid to or for members (Part IX, column (A), line 4)		NON	-								
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	–	1,147,679									
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)											
cbe	b	Total fundraising expenses, Part IX, column (D), line 25) 1,004,060.		NON	NE NONE								
ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		0.050.000									
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	• • • •	2,059,920									
	19	Revenue less expenses. Subtract line 18 from line 12.		3,207,599									
or es		Actional 1000 expenses. Outstact line to from line 12	100	3,531,771									
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		Beginning of Year									
Ass Bal	21	Total liabilities (Part X, line 26)	• • • • -	5,664,606									
E d	22	Net assets or fund balances. Subtract line 21 from line 20.		486,438									
***	rt II	Signature Block		5,178,168	8,231,767.								
га	1111			pl V									
		Under penalties of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based	schedules and ed on all info	d statements, and to	the best of my knowledge								
0	ign	1 / IMM MU KINALI		1 1120	110								
	ere	Signature of officer		Date	110								
•	CIC	Veroniave Kessler, CF00		Date									
		Type or print name and title											
_		Proposale Name and title	Check if	Drange	ar's identifying symbos								
aid		Preparer's signature Valury 7 Ball Date 4/26/10	self-		er's identifying number structions)								
rep	arer's	Firm's name (or yours)	employed	P	P00178114								
lse (Only	Firm's name (or yours if self-employed),		EIN	13-5565207								
1-	Ab - 1-	address, and ZIP + 4 55 SECOND STREET, #1400 SAN FRANCISCO, CA 94105		Phone no.	415-963-5100								
_		RS discuss this return with the preparer shown above? (See instructions)			. X Yes No								
OF	Privac	cy Act and Paperwork Reduction Act Notice see the separate instructions			F 000 (2000)								

Pa	art III Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission:	
	SEE STATEMENT 1	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes" describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expe	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
_	- (O L) (E) (D) (D)	
4 a	a (Code:) (Expenses \$1,872,934. including grants of \$) (Revenue \$)	366,232.
	SUPPORT WIKIMEDIA.ORG (THE 5TH MOST POPULAR WEB PROPERTY IN THE	
	WORLD) AND OTHER WEBSITES WHERE VOLUNTEERS CAN COLLABORATE TO	
	DEVELOP FREE EDUCATIONAL RESOURCES. THE FOUNDATION'S PROJECTS ARE	
	USED BY MORE THAN 350 MILLION PEOPLE A MONTH AND ARE AVAILABLE IN	
	MORE THAN 270 LANGUAGES AND CONTAIN MORE THAN 14 MILLION	
	VOLUNTEER-AUTHORED ARTICLES.THE OVERWHELMING MAJORITY OF THE	
	FOUNDATION'S PROJECT ACTIVITIES ARE CARRIED OUT BY AN	
	INTERNATIONAL NETWORK OF VOLUNTEERS WHOSE ACTIVITY IS NOT	
	REFLECTED IN PART IX OF FUNCTIONAL EXPENSES.	
	O(Code:) (Expenses \$ 753,127. including grants of \$ NONE) (Revenue \$	NONE)
7.0	DEVELOP AND MAINTAIN OPEN SOURCE SOFTWARE USED TO RUN	NONE /
	WIKIMEDIA.ORG AND OTHER WEBSITES OPERATED BY WIKIMEDIA FOUNDATION	
	WITH THE GOAL OF CONTINUING INNOVATION TO FACILITATE THE	
	DEVELOPMENT OF MORE AND HIGHER QUALITY EDUCATIONAL RESOURCES.	
	DEVELOTMENT OF MONE AND MICHEN QUALITY EDUCATIONAL NECOCIOES.	
4c	: (Code:) (Expenses \$ 603,333, including grants of \$ NONE) (Revenue \$	NONE)
	FOSTER THE DEVELOPMENT OF INTERNATIONAL WIKIMEDIA CHAPTER	,
	ORGANIZATIONS, ADVISE AND FACILITATE VOLUNTEER EFFORTS, AND BUILD	
	PARTNERSHIPS WITH LIKE-MINDED ORGANIZATIONS IN ORDER TO RECRUIT	
	NEW VOLUNTEERS, ASSESS AND IMPROVE THE QUALITY OF EXISTING	
	CONTENT, REACH NEW READERS, AND IMPORT NEW EDUCATIONAL CONTENT.	
_		
4d	Other program services. (Describe in Schedule O.)	
	(Expenses \$ 79,152. including grants of \$ 17,709.) (Revenue \$ 15,674.)	
4e	• Total program service expenses ►\$ 3,308,546. (Must equal Part IX, Line 25, column (B).)	
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Form **990** (2008)

	20-0049703			Page •
Part	IV Checklist of Required Schedules			1
			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	X	
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? If "Yes," complete			
	Schedule C, Part II Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	4		Х
5				
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	9		Х
10		10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	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 U.S.?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	X	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5,? <i>If</i> "Yes," complete			
	Schedule J	23	X	
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 questions			
	24b-24d and complete Schedule K. If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
.1	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	(/ ,			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified	0.51		
26	person from a prior year? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		X
26	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	2.0		
	anoquanition person outstanding as of the cha of the organizations tax year? If tes, complete schedule L, Part II	26	İ	X

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Form **990** (2008)

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or

substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		Χ
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		Χ
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Χ
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 contributions? If "Yes," complete Schedule M	30		Χ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Χ
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Χ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Χ
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		Χ
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		Χ
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		Y

Form **990** (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 26			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	X	
b	If "Yes," enter the name of the foreign country: ►SEE STATEMENT 2			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
_	and Financial Accounts.	E 0		3.7
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	30		A
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5 c		
6.0	Prohibited Tax Shelter Transaction?	6a		Х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			21
D	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Χ
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	9a		
a	Did the organization make any taxable distributions under section 4966?	9b		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			
0	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
b ∣1	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
~	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

Form 990 (2008)

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions. 1a Enter the number of voting members of the governing body b Enter the number of voting members that are independent 1b Enter the number of voting members that are independent 1c Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? 2		tion A. Governing Body and Management			
a Enter the number of voting members of the governing body be Enter the number of voting members that are independent 1				Yes	No
table the number of voting members of the governing body De Enter the number of voting members of that are independent De Enter the number of voting members had are independent De Enter the number of voting members had are independent any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? 3 Did the organization become aware during the year of a material diversion of the organizations assets? 4 ∑ 5 Did the organization have members a stockholders? 5 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 5 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 5 Did the organization have members, stockholders, or other persons? 6 Did the organization have members and the meetings held or written actions undertaken during the year by the following: a The governing body? 5 Each committee with authority to act on behalf of the governing body? 6 Desce the organization have vertice policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10 Was a copy of the Form 990 provided to the organization to set to reganization have witten policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10 Was a copy of the Form 990 provided to the organization is governing body before it was filled? All organizations with the organization is malling address? If "Yes," provide the names and addresses in Schedule O 10 Was a copy of the Form 990 provided to the organization by before it was filled? All organ					
b Enter the number of voting members that are independent any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization have members store the properties of the organization have members or stockholders? 5 Did the organization have members or stockholders? 6 Does the organization have members or stockholders? 7 Does the organization have members stockholders? 8 Did the organization have members stockholders? 9 Does the organization have members stockholders or other persons who may elect one or more members of the governing body? 9 Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 9 Does the organization have members stockholders, or other persons? 10 The governing body? 11 Did the organization have local chapters, branches, or affiliates? 12 Did the organization have local chapters, branches, or affiliates? 13 Did the organization have local chapters, branches, or affiliates? 14 Did the organization have local chapters, branches, or affiliates? 15 Did the organization have local chapters, branches, or affiliates? 16 Did the organization have local chapters, branches, or affiliates? 17 Did Was a copy of the Form 990 provided to the organization's governing body before It was filed'? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990. 17 Did the organization in a mailing address? If 'Yes," provide the names and addresses in Schedule O. 18 Did the organization have a written conflict of interest policy? If 'No," go to line 13 19 Did the organization have a written whistleblower policy? 10 Did the organization have a written whistleblower poli					
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? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization become aware during the year of a material diversion of the organizations with the policy of the organization become aware during the year of a material diversion of the organizations assets? 5 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 5 Does the organization so of the governing body subject to approval by members, stockholders, or other persons? 7 Description of the governing body? 8 Did the organizations contemporaneously document the meetings held or written actions undertaken during the year by the following: 9 Ten governing body? 8 Did the organization have local chapters, branches, or affiliates? 9 Did the organization have blood chapters, branches, or affiliates? 9 Description of the governing body? 8 Description of the governing body or the form 990 provided to the organization such chapters, affiliates, and branches to ensure their operations are consistent with those of the organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 Was a copy of the Form 990 provided to the organization is governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 X 11 Stere any officer, director or trustee, or key employee isted in Part VII. Section A who cannot be reached at the organization's maining address? If "Yes," provide the names and addressess in Schedule O. 10 Description in Divine Vision of the organization's provide	_				
any other officer, director, frustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X 4 Did the organization have any significant changes to its organizational documents since the price Form 990 was filed? 4 Did the organization have members or stockholders? 5 Did the organization have members or stockholders? 6 Does the organization by members or stockholders? 7 Does the organization by members or stockholders? 8 Did the organization have members or stockholders or other persons who may elect one or more members of the governing body? 9 Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 8 Did the organizations contemporaneously document the meetings held or written actions undertaken during the year by the following: 9 The governing body? 9 Does the organization have local chapters, branches, or affiliates? 10 Was a copy of the Form 990 provided to the governing body? 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed'? All organizations must describe in Schedule O the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process, if any, the organization was provided to the process or schedule O, the organization have a written conflict of interest policy? If "No." go to line 13 1 Is		Enter the number of voting members that are independent 1b 8			
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employee sto at management company or other person? 3 3	2				
supervision of officers, directors or trustees, or key employees to a management company or other person? 3	_	any other officer, director, trustee, or key employee?	2		X
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4 7 - 8 4 9 - 6 8 8 7	13 14 15 a b 16a b Sect 17 18	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶_SEE_STATEMENT_3 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3): available for public inspection. Indicate how you make these available. Check all that apply. ☑ Own website ☐ Another's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interpolicy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the policy.	12c 13 14 15a 15b	X	X

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

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

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

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average	Posit	(C) Position (check all that apply)			oly)	(D) Reportable	(E) Reportable	(F) Estimated	
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MICHAEL SNOW										
CHAIR	10.	X	2	X				NONE	NONE	NONE
JAN BART DE VREEDE										
VICE CHAIR	10.	Х	2	X				NONE	NONE	NONE
DOMAS MITUZAS										
EXECUTIVE SECRETARY	10.	X	2	X				NONE	NONE	NONE
STU WEST										
TREASURER	10.	X	2	X				NONE	NONE	NONE
FLORENCE DEVOUARD	1.0	3.7						NONE	NONE	NONE
CHAIR (THROUGH 7/2008)	10.	X	2	X				NONE	NONE	NONE
FRIEDA BRIOSCHI TRUSTEE (THROUGH 9/2008)	10.	Х						NONE	NONE	NONE
TING CHEN										
TRUSTEE	10.	X						NONE	NONE	NONE
ARNE KLEMPERT										
TRUSTEE	10.	Х						NONE	NONE	NONE
JIMMY WALES										
TRUSTEE	10.	Х						NONE	NONE	NONE
KAT WALSH										
TRUSTEE	10.	X						NONE	NONE	NONE
SUE GARDNER EXECUTIVE DIRECTOR	40.			x				168,700.	NONE	6,350.
	40.		4	^				100,700.	NONE	0,330.
VERONIQUE KESSLER CFOO	40.		2	X				105,527.	NONE	16,332.
MIKE GODWIN										
GENERAL COUNSEL	40.					Х		120,450.	NONE	7,689.
	_									

JSA

Part VII Section A. Officers, Directors, Tro	ustees, Ke	y Em	plo	yee	es,	and I	ligl	hest Compensat		(continued)
(A)	(B)	ĺ	(C)					(D)	(E)	(F)
Name and title	Average hours per			chec		that app	() Former	Reportable compensation	Reportable compensation	Estimated amount of
	week	Individual trustee or director	Institutional trustee	icer	Key employee	Highest compensated employee	mer	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	other compensation from the organization and related organizations
	-									
	_									
	_									
	-									
	_									
	_									
1b Total							>	394,677.	NON	
2 Total number of individuals (including thos organization ► 3	e in 1a) v 	vho r	ecei	ived	l m	ore th	nan	\$100,000 in re	portable compe	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched.										Yes No
4 For any individual listed on line 1a, is the the organization and related organizations	e sum of greater th	repor an \$	tabl 150	e c	om 0?	pensa If "Y	ation 'es,"	n and other com complete Sched	pensation from	
individual	e or accr	ue co	omp	ens	atio	n fro	m	any unrelated o		4 X
services rendered to the organization? <i>If "Yes,"</i> Section B. Independent Contractors	complete S	scnea	uie .	J foi	r su	cn pei	rson	·		5 X
Complete this table for your five highest compensation from the organization.	compensat	ted in	dep	enc	dent	cont	tract	tors that received	d more than \$	100,000 of
(A) Name and business add	ress							(B) Description of ser	rvices	(C) Compensation
SEE STATEMENT 4								·		
2 Total number of independent contractors (incompensation from the organization ▶	including th	nose	in ´	1) v	vho	rece	ivec	d more than \$10	0,000 in	

Form 990 (2008) Page **9**

ar	t VIII	Statement of Reven	ue			20-0049703		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 51
ts	1 a	Federated campaigns	1a					
onu	b	Membership dues	1b					
an	С	Fundraising events						
ilar	d	Related organizations	1.1					
Sir	е	Government grants (contribu		——— I				
and other similar amounts	f	All other contributions, gifts, gran		7 664 450				
d o	-	and similar amounts not included Noncash contributions included		7,664,458. 386,095.				
- 1	g h	Total. Add lines 1a-1f			7,664,458.			
e .				Business Code	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
še	2a	DATA PROVIDER SERVICES		518210	366,232.	366,232.		
ž	b	WIKIMANIA CONFERENCE		611600	56,674.	56 , 674.		
ا جَ	С							
Se	d							
Lan	е							
Program Service Revenue	f	All other program service rev						
╸┤	g_	Total. Add lines 2a-2f			422,906.			
	3	Investment income (including			31,034.			31,03
	4	other similar amounts) Income from investment of			NONE			31,03
	4 5	Royalties	•		1,500.			1,50
	J	Noyaliles	(i) Real	(ii) Personal	1,000.			1,00
	6a	Gross Rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss) .			NONE			
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	269,232					
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)			-13,080.			12.00
	d	Net gain or (loss)			-13,080.			-13,08
	8a	Gross income from f events (not including \$	Ü					
Other Revenue		of contributions reported on						
Re		See Part IV, line 18.						
je	b	Less: direct expenses						
₹	С	Net income or (loss) from fu	ndraising events	· <u>····</u>	NONE			
	9 a							
	I-	See Part IV, line 19. Less: direct expenses						
	b c	Net income or (loss) from ga			NONE			
	10a	Gross sales of invent returns and allowances	ory, less					
	b	Less: cost of goods sold						
	С	Net income or (loss) from sa Miscellaneous Rever	les of inventory.		NONE		NONE	
Ì	11a	FOREIGN EXCHANGE LOSS		900099	-7,962.			-7,96
	b	MISCELLANEOUS INCOME		900099	38,379.			38,37
	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d			30,417.			
	12	Total Revenue. Add lines 1h	n, 2g, 3, 4, 5, 6d,	7d, 8c,				
		9c, 10c, and 11e		<u> ▶</u>	8,137,235.	422,906.	NONE	49,87

Form **990** (2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3) ar All other organizations must comple	าd 501(c)(4) organizat te column (A) but are			and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		·	Ŭ i	•
	organizations in the U.S. See Part IV, line 21	NONE			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	NONE			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	17,709.	17 , 709.		
4	Benefits paid to or for members	NONE			
5	Compensation of current officers, directors,				
	trustees, and key employees	358,549.	89,039.	182,687.	86,823.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	NONE			
7	Other salaries and wages	1,423,524.	777,754.	235,432.	410,338.
8	Pension plan contributions (include section 401				
_	(k) and section 403(b) employer contributions).	NONE	00.005	05.405	44.04=
9	Other employee benefits	153,741.	83,997.	25,427.	44,317.
10	Payroll taxes	137,499.	67,534.	31,505.	38,460.
11	Fees for services (non-employees):	NONE			
	Management	NONE	122 252	26 471	17 (47
	Legal	176,471.	132,353.	26,471.	<u>17,647</u> .
	Accounting	45,839. NONE	22,461.	10,543.	12,835.
	Professional fundraising services. See Part IV, line 17	NONE			
	Investment management fees	NONE			
	Other	678 , 553.	474,257.	37,043.	167,253.
12	Advertising and promotion	NONE	4/4,23/.	37,043.	107,233.
13	Office expenses	354,909.	173,905.	81,629.	99,375.
14	Information technology	822,405.	822,405.	01,023.	<u> </u>
15	Royalties	NONE	022/100.		
16	Occupancy	170,704.	83,645.	39,262.	47,797.
17	Travel	223,193.	98,254.	69,229.	55,710.
18	Payments of travel or entertainment expenses	220, 230.	30,201.	03,223.	007/201
. •	for any federal, state, or local public officials	NONE			
19	Conferences, conventions, and meetings	32,200.	32,200.		
20	Interest	NONE	, , , , , , , , , , , , , , , , , , , ,		
21	Payments to affiliates	NONE			
22	Depreciation, depletion, and amortization	470,095.	423,085.	23,505.	23,505.
23	Insurance	8,296.		8,296.	<u> </u>
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	VOLUNTEER_DEVELOPMENT	9,948.	9,948.		
b					
С					
d					
е					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	5,083,635.	3,308,546.	771,029.	1,004,060.
26	Joint Costs. Check here ▶ ☐ If following				
	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising calinitation.				
JSA	solicitation				

JSA 8E1052 1.000

Pa	rt X	Balance Sheet									
			(A) Beginning of year		ı	(E End c	3) of year	r			
	1	Cash - non-interest-bearing	189,182.	1				NON			
	2	Savings and temporary cash investments	2,809,453.	2		6,2	243,	471			
	3	Pledges and grants receivable, net	1,994,279.	3		1,3	300,	000			
	4	Accounts receivable, net	27 , 259.	4			72,	589			
	5	Receivables from current and former officers, directors, trustees, key									
		employees, or other related parties. Complete Part II of Schedule L		5							
	6	Receivables from other disqualified persons (as defined under section									
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II									
		of Schedule L		6							
ts	7	Notes and loans receivable, net		7							
Assets	8	Inventories for sales or use		8							
⋖	9	Prepaid expenses and deferred charges STMT- 6	85 , 424.	9			186,	489			
	l	Land, buildings, and equipment: cost basis 10a 1,921,899.									
	b	Less: accumulated depreciation. Complete									
		Part VI of Schedule D	521,107.	10c			799 ,	<u>586</u>			
	11	Investments - publicly traded securities	37 , 902.	11				NON			
	12	Investments - other securities. See Part IV, line 11		12							
	13	Investments - program-related. See Part IV, line 11		13							
	14	Intangible assets		14							
	15	Other assets. See Part IV, line 11		15							
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,664,606.	16			502 ,				
	17	Accounts payable and accrued expenses	305,147.			2	264,	<u> 368</u>			
	18	Grants payable		18							
	19	Deferred revenue	181,291.				106,	000			
	20	Tax-exempt bond liabilities		20							
es	21	Escrow account liability. Complete Part IV of Schedule D		21							
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,									
jab		highest compensated employees, and disqualified persons. Complete Part II									
_		of Schedule L		22							
	23	Secured mortgages and notes payable to unrelated third parties		23							
	24	Unsecured notes and loans payable		24							
	25	Other liabilities. Complete Part X of Schedule D		25							
	26	Total liabilities. Add lines 17 through 25	486,438.	26			370,	368			
ces		Organizations that follow SFAS 117, check here ▶ □ ☒ and complete lines 27 through 29, and lines 33 and 34.									
<u>a</u> n	27	Unrestricted net assets	3,123,539.	27		6,1	L64,	309			
Balanc	28	Temporarily restricted net assets	2,054,629.			2,0)67 ,	458			
pu	29	Permanently restricted net assets		29							
or Fund		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.									
	30	Capital stock or trust principal, or current funds		30							
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31							
پ	32	Retained earnings, endowment, accumulated income, or other funds		32							
Net	33	Total net assets or fund balances	5,178,168.	33		8,2	231,	767			
	34	Total liabilities and net assets/fund balances	5,664,606.	34		8,6	502,	135			
Pa	rt XI	Financial Statements and Reporting									
1	Acco	ounting method used to prepare the Form 990: Cash X Accrual Other	er				Yes	No			
2a		e the organization's financial statements compiled or reviewed by an independent accoun	tant?		[2a		Х			
b		e the organization's financial statements audited by an independent accountant?			[2b	Х				
С											
	audit, review, or compilation of its financial statements and selection of an independent accountant?										
3а	As a	result of a federal award, was the organization required to undergo an audit or audits as	set forth in		ſ						
	the S	Single Audit Act and OMB Circular A-133?			[3a		Х			
b	If "Ye	es," did the organization undergo the required audit or audits?		<u> </u>		3b					

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2008

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

OMB No. 1545-0047

WIF	IME	DIA FOUN								20-00	49703					
Pa	rt I	Reason fo	or Public Chari	ty Status (All organ	izations m	ust comp	lete this	part.) (se	e instru	ctions)						
The	orga	nization is no	ot a private found	dation because it is: (Pl	lease check	conly one c	organizati	on.)								
1		A church, c	onvention of chu	rches, or association of	of churches	s described	in sectio	n 170(b)((1)(A)(i).							
2	Ш	A school de	escribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sched	ule E.)										
3	Ш	A hospital of	or a cooperative	hospital service organ	ization desc	cribed in se	ction 170	(b)(1)(A)	(iii). (Atta	ıch Schedu	ule H.)					
4		A medical	research organiz	zation operated in co	njunction v	with a hos	pital des	cribed in	section	170(b)(1)	(A)(iii).	∃nter th	he			
			ame, city, and sta													
5		An organiza	ation operated fo	or the benefit of a col	lege or un	iversity ow	ned or o	perated I	by a gove	ernmental	unit des	cribed	in			
		section 170	0(b)(1)(A)(iv). (Co	omplete Part II.)												
6	Щ	A federal, s	tate, or local gov	ernment or governme	ental unit de	escribed in s	section 1	70(b)(1)(A)(v).							
7	X	An organiza	ation that norma	lly receives a substan	tial part of	its support	t from a governmental unit or from the general public									
				(1)(A)(vi). (Complete F	-											
8	Щ		=	d in section 170(b)(1) (-	-									
9		_		Ily receives: (1) more							-	_				
		-	om activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its													
			_		and unrelated business taxable income (less section 511 tax) from business											
		-	-	after June 30, 1975.					-							
10	Щ	An organization organized and operated exclusively to test for public safety. See section 509(a)(4) . (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the														
11		-	_	•	-						-					
purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See s 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.												section	on			
		а Тур	_	Type II		e III - Fund	-	_			pe III - O					
е		=	_	rtify that the organiz				-				-				
		-		ion managers and oth	er than on	e or more	publicly s	supported	a organiza	ations des	scribea i	n sectio	on			
		` ,` ,	r section 509(a)(,	4: 6	4h - 1DO 4h	_4 :4 :	T 1	T 11	. T III						
f		-		I a written determina	tion from	the IRS tha	at it is a	Type I,	rype ii o	r Type III	support	ing	7			
		organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the														
g		following pe		the organization acce	epted any g	iit or contri	ibulion irc	om any o	trie							
				or indirectly controls	e aither ale	one or tog	other wit	h nereor	e deccrib	ned in (ii)		Yes No	_			
			-	erning body of the sup		_	Ctrici Wit	ii persor	is acsonic	oca III (II)	11g(i)	X				
			_	erson described in (i) a	_	inization:					11g(ii)					
				of a person described		above?					11g(iii)	X	_			
h			_	ation about the organi			on suppo	rts			3()		_			
		of supported	(ii) EIN	(iii) Type of organization		organization		ou notify	(vi) l	s the	(vii) Am	ount of	_			
(.,		anization	(11) 2.111	(described on lines 1-9	in col. (i) lis	sted in your	the organ	nization in	organizat	tion in col.		port				
				above or IRC section (see instructions))	governing	document?	COI. (I)	of your port?	(i) organi U:	zed in the S.?						
				(**************************************	Yes	No	Yes	No	Yes	No						
													_			
													_			
													_			
													_			
													_			
							<u></u>									
													_			
Tota	ıl												_			
For F	rivac	y Act and Paper	work Reduction Act	Notice, see the Instructions	s for Form 990	0.			Sche	dule A (Forr	n 990 or 9	90-EZ) 20	008			

Page **2**

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.)

Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	352,571.	1,357,614.	2,280,787.	6,533,539.	7,664,458.	18,188,969.
2	Tax revenues levied for the organization'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 1-3	352,571.	1,357,614.	2,280,787.	6,533,539.	7,664,458.	18,188,969.
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						2 002 004
6	shown on line 11, column (f) Public support. Subtract line 5 from line 4.						3,903,004.
	tion B. Total Support						14,285,965.
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	352,571.	1,357,614.	2,280,787.	6,533,539.	7,664,458.	18,188,969.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,901.	8,224.	27,581.	33,382.	32,534.	104,622.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		2,517.	6,541.	72,246.	30,417.	111,721.
11	Total support. Add lines 7 through 10						18,405,312.
12	Gross receipts from related activities, etc. (S	See instructions.)				12	660,233.
13	First five years. If the Form 990 is for the organization, check this box and stop here						
	tion C. Computation of Public Sup						77.60.0/
14	Public support percentage for 2008 (lin		•				77.62 %
15	Public support percentage from 2007					-	92.57 %
1 6 a	33 1/3% support test - 2008. If the or	-					
h	and stop here. The organization qualif						
D	33 1/3% support test - 2007. If the orbox and stop here. The organization q						
172	10%-facts-and-circumstances test - 2			-			
1 / a	is 10% or more, and if the organization						
	in Part IV how the organization meets						
	organization			•	•		
h	10%-facts-and-circumstances test - 2						
J	15 is 10% or more, and if the organiza	•					
	Explain in Part IV how the organization					-	clv
4.0	supported organization						
18	Private foundation. If the organization instructions						

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support						
С	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
	benefit and either paid 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 1-5						
7 a	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 1% of						
	the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support		1	T	T	I	
C	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
1 U a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is regularly						
12	Carried on						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						-
14	First five years. If the Form 990 is for	the organization	n's first second	third fourth or	fifth tax vear a	s a section 501	(c)(3)
	organization, check this box and stop here	-			-		
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2008 (line 8			mn (f))		15	%
16	Public support percentage from 2007 Sche					16	%
Sec	tion D. Computation of Investmen	nt Income Per	centage				
17	Investment income percentage for 2008 (lin	ne 10c, column (f) divided by line	13, column (f))		17	%
18	Investment income percentage from 2007	Schedule A, Part	IV-A, line 27h			18	%
19a	33 1/3% support tests - 2008. If the org	janization did no	t check the box			nan 33 1/3 %, an	d line
	17 is not more than 33 1/3 %, check this bo	x and stop here .	The organization	qualifies as a publ	icly supported org	ganization	▶ □
b	33 1/3% support tests - 2007. If the orga						
	line 18 is not more than 33 1/3 %, check this	s box and stop h	ere. The organiza	tion qualifies as a	publicly supported	d organization	▶ □
20	Private foundation. If the organization did	not check a box o	on line 14, 19a, o	r 19b, check this b	box and see instru	ctions	▶ □

Part IV Supplementa Part II, line 17	al Information. Cor 7a or 17b; or Part III	nplete this par , line 12. Provid	t to provide the any other ac	the explanation	n required by nation. (see ins	Part II, line 10; structions)
SCHEDULE A, PART II - OTE	HER_INCOME					
DESCRIPTION	2004	2005	2006	2007	2008	TOTAL
OTHER INCOME		2 , 517	6,541	72,246.	30,417.	111,721.
_TOTALS		2 <u>,</u> 517	6,541		30,417.	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Employer identification number Name of the organization WIKIMEDIA FOUNDATION 20-0049703 Organization type (check one): Filers of: Section: **501(c)(**3 Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.) **General Rule** For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 331/3 % support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _ Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization WIKIMEDIA FOUNDATION

Employer identification number 20-0049703

			1
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_1		\$\$.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$ \$ 300,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization WIKIMEDIA FOUNDATION

Employer identification number

20-0049703

Part II	Noncash	Property	(see instructions)
---------	---------	-----------------	--------------------

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_	9576 SH OF LEVEL 3; 3604 SH OF NUVASIVE 22,610 SHARES OF PLU POWER 1,948 SHARES OF UNITED ONLINE 1,888 SHARES OF VERISIGN		10/31/2008
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization **Employer identification number** 20-0049703 WIKIMEDIA FOUNDATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2a 2b b Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 8/17/06 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year > Number of states where property subject to conservation easement is located ▶ _ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

Schedule D (Form 990) 2008

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

Schedule D (Form 990) 2008 20-0049703 Page **2**

Par	t III	Organizations Maintaining Colle	ections of Art, Histo	rical	Treasures	s, or	Other Similar Ass	sets (c	ontinue	ed)	
3	_	he organization's accession and othe	r records, check any	of the	following the	hat a	re a significant use	of its co	ollection		
	items (check all that apply):		_							
a		Public exhibition	d	_		chan	ge programs				
b		Scholarly research	e		Other						
C	<u></u>	Preservation for future generations									
4		e a description of the organization's co	ollections and explain	how	they further	the d	organization's exem	pt purp	ose in		
_	Part XI				lata da ata a Lida						
5	_	the year, did the organization solicit							¬ .,		٦
D		to be sold to raise funds rather than t	<u>'</u>						Yes		No
Par	t IV	Trust, Escrow and Custodial Arr Part IV, line 9, or reported an am				ion a	inswered res to	FOIIII	990,		
		· · · · · · · · · · · · · · · · · · ·									
1 a	Is the o	organization an agent, trustee, custod	ian or other intermed	iary fo	or contribution	ons o	r other assets not				
	include	d on Form 990, Part X?						[Yes		No
b	If "Yes	" explain the arrangement in Part XIV	and complete the fol	lowing	g table:						
							Amo	ount			
С		ing balance				1 c					
d		ns during the year				1d					
е		utions during the year				1 e					
f	_	balance			· · ·						
		organization include an amount on F		21?				L	Yes		No
		" explain the arrangement in Part XIV			m						
Par	t V	Endowment Funds. Complete if			T .						
4 -	D = =:===		ent Year (b) Prior ye	ear	(c) Two year	ars bad	ck (d) Three years	back	(e) Four	r years	back
1a	_	ing of year balance									
b		outions									
C C		nent earnings or losses or scholarships									
u		expenditures for facilities									
е		ograms									
f		strative expenses						-			
g		year balance									
2		e the estimated percentage of the year	ar and halance hald as								
a		designated or quasi-endowment	% with the salarice field as	٠.							
b		nent endowment > %									
C		endowment > %									
		ere endowment funds not in the poss	ession of the organiza	ation	that are held	d and	l administered for the	e			
		ration by:	occion of the organiza	20011	inat are mon	u u 110			۲	Yes	No
	_	elated organizations							3a(i)		
	• •	ted organizations							3a(ii)		
b	` '	' to 3a(ii), are the related organization							3 b		
4		be in Part XIV the intended uses of the	·								
Par	t VI	Investments - Land, Buildings, a				rt X,	line 10.				
		Description of investment	(a) Cost or other basis (investment)	(k	o) Cost or other basis (other)		(c) Depreciation	(d) Book va	lue	
1a	Land .				NC	ONE				N	IONE
b	Buildin	gs				ONE	NONE				ONE
С	Leasel	nold improvements				ONE	NONE				IONE
d		nent			1,921,89		1,122,313.		7 9		86.
е	Other					ONE	NONE				ONE
Tota		nes 1a-1e. (Column (d) should equal i	Form 990, Part X, colu	ımn (ı					7 9		86.
		. , , , , , , , , , , , , , , , , , , ,			. ,	•					

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 20 0040702

Part VII	Investments - Other Securities. See	Form 990 Part X I	<u>20-0049703</u> ine 12	rage J
		(b) Book value	(c) Method of valua	tion.
'	(a) Description of security or category (including name of security)	(b) Book value	Cost or end-of-year mar	ket value
Financial deri	vatives and other financial products			
	equity interests			
		_		
		-		
		-		
		-		
		-		
		-		
		-		
Total. (Column	(b) should equal Form 990, Part X, col. (B) line 12.)	>		
Part VIII	Investments - Program Related. See		ine 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valua	tion:
	(a) Description of investment type	(5) 2001. 10.00	Cost or end-of-year mar	ket value
		/ line 45		
Part IX	Other Assets. See Form 990, Part >			(1) D I I
		(a) Description		(b) Book value
Total. (Column	(b) should equal Form 990, Part X, col. (B) line 15.)		<u></u>	
Part X	Other Liabilities. See Form 990, Par	t X, line 25.		
	(a) Description of liability	(b) Amount		
Federal incom	ne taxes			
			_	
Total. (Column	(b) should equal Form 990, Part X, col. (B) line 25.)	>		
	·			

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Schedule D (Form 990) 2008 20-0049703 Page 4

	20-0049703		Page 4
Part			
1		1	8,137,235.
2	· · · · · · · · · · · · · · · · · · ·	2	5,083,635.
3		3	3,053,600.
4		4	
5		5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8		8	
9		9	
10		10	3,053,600.
Part		urn	
1	Total revenue, gains, and other support per audited financial statements		8,670,836.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		, ,
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities 2b 578,279	9	
C	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV) 2d -44,678	_	
e	Add lines 2a through 2d		533,601.
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	٠ 📑	0,137,233.
a			
b	ALLE		
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		8,137,235.
	Reconciliation of Expenses per Audited Financial Statements With Expenses per R		
1	Total expenses and losses per audited financial statements	. 1	5,617,236.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a 578,279	<u>).</u>	
b	Prior year adjustments 2b		
С	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV) 2d -44,678	3.	
е	Add lines 2a through 2d	_ 2e	533,601.
3	Subtract line 2e from line 1	. 3	5,083,635.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV) 4b		
С	Add lines 4a and 4b	4 c	:
5	Total expenses. Add lines 3 and 4c . (This should equal Form 990, Part I, line 18.)	5	5,083,635.
Part	XIV Supplemental Information		
and 2	blete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	rt IV, liı	nes 1b
	XII LINE 2D AND PART XIII LINE 2D: RECLASS WIKIMANIA CONFERENCE		

Schedule D (F	orm 990) 2008	20-0049703 Pa	age 5
Part XIV	Supplemental Information (continued)		
. a. c A.			

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

United States.

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

Employer identification number

WIKIMEDIA FOUNDATION

Part I

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

	100 101 0111 000,1 4111, 1110 110.	
1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or	
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	☐ No
2	For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the	

(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 in region
EUROPE	NONE	NONE	FUNDRAISING	NA	NONE
EAST ASIA AND THE PACIFIC	NONE	NONE	FUNDRAISING	NA	NONE
MIDDLE EAST AND NORTH AFRICA	NONE	NONE	FUNDRAISING	NA	NONE
EUROPE	NONE	2	PROGRAM SERVICES	SUPPORT WIKIPEDIA	167,000.
EUROPE	NONE	NONE	PROGRAM SERVICES	OPEN SOURCE	103,430.
EUROPE	NONE	1	PROGRAM SERVICES	FOSTER VOLUNTEERS	58,588.
EUROPE	NONE	1	PROGRAM SERVICES	WIKIMANIA	14,574.
EAST ASIA AND THE PACIFIC	NONE	1	PROGRAM SERVICES	SUPPORT WIKIPEDIA	34,396.
EAST ASIA AND THE PACIFIC	NONE	1	PROGRAM SERVICES	OPEN SOURCE	30,477.
MIDDLE EAST AND NORTH AFRICA	NONE	NONE	PROGRAM SERVICES	WIKIMANIA	32,200.
EUROPE	NONE	NONE	GRANTMAKING	WIKIMANIA	4,813.
EAST ASIA AND THE PACIFIC	NONE	NONE	GRANTMAKING	WIKIMANIA	3,065.
SOUTH ASIA	NONE	NONE	GRANTMAKING	WIKIMANIA	800.
SOUTH AMERICA	NONE	NONE	GRANTMAKING	WIKIMANIA	2,185.
RUSSIA/INDEPENDENT STATES	NONE	NONE	GRANTMAKING	WIKIMANIA	520.
MIDDLE EAST AND NORTH AFRICA	NONE	NONE	GRANTMAKING	WIKIMANIA	595.
EAST ASIA AND THE PACIFIC	NONE	NONE	GRANTMAKING	WIKIMANIA	5,232.
Totals ▶	NONE	6			457 , 875.

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

Schedule F (Form 990) 2008

	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method o valuation (book, FMV, appraisal, other)
			EAST ASIA/PACIFIC	CONFERENCE	5,232.	WIRE	NONE	N/A	N/A
Enter	total number of organization	ns that are recognized a	s charities by the forei	an country or for y	which the grantee	or counsel has		•	
provid	ded a section 501(c)(3) equi	valency letter							1
Enter	total number of other organ	izations or entities							NONE

Schedule F (Form 990) 2008

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIP	EUROPE/ICELAND/GREENLAND	8	4,813.	WIRE	NONE	N/A	N/A
SCHOLARSHIP	EAST ASIA/PACIFIC	4	3,065.	WIRE	NONE	N/A	N/A
SCHOLARSHIP	SOUTH ASIA	1	800.	CASH	NONE	N/A	N/A
SCHOLARSHIP	SOUTH AMERICA	2	2,185.	WIRE	NONE	N/A	N/A
SCHOLARSHIP	RUSSIA	1	520.	CASH	NONE	N/A	N/A
SCHOLARSHIP	MIDDLE EAST/NORTH AFRICA	2	595.	CASH	NONE	N/A	N/A
SCHOLARSHIP	EAST ASIA/PACIFIC	1	5,232.	WIRE	NONE	N/A	N/A

<u>Schedule F</u> (Form 990) 2008 20-0049703 Page **4**

Part IV	Supplemental Information Complete this part to provide the information required in Part I, line 2, and any other additional information.
_ PROCEDU	JRE FOR MONITORING USE OF GRANT FUNDS OUTSIDE U.S.
POTENTI	AL GRANTEES PARTICIPATE IN A GRANTS APPLICATION PROCESS BY
	NG A PROPOSAL. THE PROPOSAL CONTAINS A DESCRIPTION OF THE
	J-RELATED WORK THEY ARE PROPOSING, A BUDGET, A TIMELINE AND HOW
_THIS_WI	LL IMPACT THE MISSION GOALS. ONCE AN APPLICANT IS AWARDED A
GRANT,	THEY RECEIVE AN EMAIL STIPULATING THAT BY ACCEPTING FUNDS, THEY
_AGREE_I	TO THE REPORTING REQUIREMENTS WHICH INCLUDE MAINTAINING
_RECEIPT	S/DOCUMENTATION OF EXPENSES, AGREEING TO RETURN UNUSED FUNDS
AND/OR	SUBMIT A REQUEST FOR RE-ALLOCATION OF FUNDS, AND SUBMISSION OF A
_FINAL_F	REPORT WHICH INCLUDES AN ESTIMATE OF THE IMPACT OF THE FUNDED
_ACTIVIT	TIES ON MISSION GOALS AND A SUMMARY OF BEST PRACTICES AND LESSONS
_LEARNEI	. THESE REPORTS ARE SUBMITTED TO AND REVIEWED BY THE DEPUTY
DIRECTO	DR.

SCHEDULE J (Form 990)

Compensation Information

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

WIKIMEDIA FOUNDATION

Employer identification number

20-0049703

GIL	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X 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 (e.g., maid, chauffeur, chef)			
b	If line 1a is 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	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
	111111			
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply.			
	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			
	<u> </u>			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:			
	Receive a severance payment or change of control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			- 21
	The second and the second and promote and approach amounts for each term are are an			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	3.0		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		X
-	If "Yes" to line 6a or 6b, describe in Part III.			21
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
•	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			1
•	subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
	······································			

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

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown	of W-2 and/or 1099-MISC	compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	(i)	150 , 000.	NONE	18,700.	NONE	6 , 350.	<u> 175,050.</u>	NONE
SUE GARDNER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
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	(i)							
	(ii)							

Part III Supplemental Information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this par for any additional information.
HOUSING ALLOWANCE FOR EXECUTIVE DIRECTOR
THE ODGINITATION DATE DEPTH ON DEVIALE OF THE EVECUTIVE DEPENDED INTO
THE ORGANIZATION PAID RENT ON BEHALF OF THE EXECUTIVE DIRECTOR UNTIL
JANUARY 2009. THIS WAS INCLUDED IN HER TAXABLE COMPENSATION.

SCHEDULE M (Form 990)

Non-Cash Contributions

OMB No. 1545-0047

2008

Open To Public
Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Employer identification number

WIKIMEDIA FOUNDATION 20-0049703 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions Method of determining Revenues reported on applicable Form 990, Part VIII, line 1g revenues 1 Art-Historical treasures 3 Art-Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 8 Intellectual property Securities-Publicly traded 1 9 Χ 257,495. FMV 10 Securities-Closely held stock Securities-Partnership, LLC, 11 or trust interests Securities-Miscellaneous 12 Qualified conservation contribution (historic Qualified conservation contribution (other) 15 Real estate-Residential Real estate-Commercial 16 Real estate-Other 17 Collectibles 18 Food inventory..... 19 Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 Scientific specimens 23 24 Archeological artifacts Other ►(SERVERS ____) 128,600. 25 1 Other ►(_ _ _ _) 26 Other ►(_____) 27 28 Other ►(_____) 29 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement

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

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

Schedule M (Form 990) 2008

Schedule M (I	Form 990) 2008	20-0049703 Page 2
Part II	Supplemental Information. 32b, and 33. Also complete	Complete this part to provide the information required by Part I, lines 30b, this part for any additional information.

Name of the organization	Employer identification number
WIKIMEDIA FOUNDATION	20-0049703
FORM 990 PART III LINE 4D	
SUPPORT THE PLANNING AND IMPLEMENTATION OF AN ANNUAL CONFERENCE,	
WIKIMANIA, TO BRING TOGETHER VOLUNTEER CONTRIBUTORS TO THE EDUCAT	IONAL
PROJECTS OPERATED BY THE WIKIMEDIA FOUNDATION.	
FORM 990 PART VI, LINE 10	
REVIEW OF FORM 990:	
THE FIRST DRAFT OF THE 990 WAS DEVELOPED BY AN EXTERNAL ACCOUNTIN	G_FIRM
UNDER THE DIRECTION OF THE CHIEF FINANCIAL AND OPERATING OFFICER.	IT WAS
REVIEWED FOR ACCURACY AND COMPLETENESS BY THE CFOO, AND THEN BY T	HE
EXECUTIVE DIRECTOR. THEN, A MEETING OF THE AUDIT COMMITTEE WAS HE	LD AT
WHICH THE CFOO WALKED THROUGH THE DRAFT IN DETAIL FOR THE AUDIT	
COMMITTEE'S APPROVAL. ONCE THE AUDIT COMMITTEE APPROVED A FINAL V	ERSION,
THE TREASURER PROVIDED IT TO THE BOARD MEMBERS PRIOR TO IT BEING	FILED
WITH THE IRS	

Name of the organization	Employer identification number
WIKIMEDIA FOUNDATION	20-0049703
FORM 990 PART VI, LINE 12	
CONFLICT OF INTEREST:	
THE ORGANIZATION'S BOARD MEMBERS COMPLETE ANNUALLY A CONFLICT OF	INTEREST
STATEMENT THE PURPOSE OF WHICH IS TO IDENTIFY ANY PERSONAL, FAMIL	Y_AND/OR
BUSINESS RELATIONSHIPS AND/OR TRANSACTIONS THAT MAY POSE A POTENT	IAL
CONFLICT. THESE FORMS ARE SUBMITTED TO THE GENERAL COUNSEL AND AR	E
REVIEWED BY THE BOARD. ADDITIONALLY, THE BOARD MEMBERS ALSO COMP	LETE
ANNUALLY A PLEDGE OF PERSONAL COMMITMENT THAT AFFIRMS THAT THE IN	DIVIDUAL
IS IN COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY AND THAT TH	E
INDIVIDUAL WILL PROMPTLY NOTIFY THE EXECUTIVE DIRECTOR AND THE BO	ARD
CHAIR WHEN A CONFLICT OR POTENTIAL CONFLICT ARISES. FURTHERMORE,	IN THE
CASE OF A CONFLICT, THE INDIVIDUAL AGREES TO REFRAIN FROM USING H	IS_OR
HER PERSONAL INFLUENCE TO ENCOURAGE THE FOUNDATION TO ENTER THE	
TRANSACTION AND MUST PHYSICALLY EXCUSE HIMSELF OR HERSELF FROM AN	<u>Y</u>
FURTHER DISCUSSIONS OTHER THAN TO ANSWER QUESTIONS ABOUT THE TRAN	SACTION.
IN THE CASE OF POTENTIAL CONFLICT, THE REMAINING BOARD MEMBERS	REVIEW
THE POTENTIAL TRANSACTION TO DETERMINE WHETHER SAID TRANSACTION I	S_FAIR
AND REASONABLE TO THE FOUNDATION AND LEGAL COUNSEL IS CONSULTED A	.S
NECESSARY TO ENSURE THAT SUCH A TRANSACTION WOULD NOT CONSTITUTE	SELF
DEALING.	

Name of the organization	Employer identification number
WIKIMEDIA FOUNDATION	20-0049703
FORM 990 PART VI LINE 15A AND 15B	
FORM 990 PART VI LINE 15A	
THE WIKIMEDIA FOUNDATION BOARD OF TRUSTEES IS RESPONSIBLE FOR	
DETERMINING THE COMPENSATION OF THE EXECUTIVE DIRECTOR, AND HAS	
DELEGATED THAT RESPONSIBILITY TO THE ED EVALUATION COMMITTEE AND	BOARD
TREASURER WHICH IS COMPRISED OF INDEPENDENT BOARD MEMBERS. IN SET	TING THE
ED'S COMPENSATION, THE EVALUATION COMMITTEE HAS SECURED AND REVIEW	ED
COMPARABILITY DATA ABOUT NON-PROFIT CEO COMPENSATION FOR ORGANIZA	TIONS OF
SIMILAR SIZE AND SCOPE TO THE WIKIMEDIA FOUNDATION, INCLUDING SAL	ARY,
BONUS SCHEMES AND NON-MONETARY BENEFITS AND PERQUISITES. THE INFO	RMATION
CAME FROM A VARIETY OF SOURCES INCLUDING GUIDESTAR, BOARDSOURCE,	THE
CENTER FOR NON-PROFIT MANAGEMENT, AND THE NON-PROFIT TIMES.	
ADDITIONALLY, RECRUITERS AT RUSSELL REYNOLDS, KORN/FERRY, AND SPEN	CER
STUART WERE CONSULTED WITH TO REVIEW POTENTIAL COMPENSATION PACKA	GES AND
TO PROVIDE FEEDBACK.	
THE COMMITTEE ALSO CONSULTED WITH INDEPENDENT EXPERTS IN THE FIEL	D. THE
EVALUATION COMMITTEE ALSO ANNUALLY SETS PERFORMANCE GOALS WITH TH	E
EXECUTIVE DIRECTOR, AND WORKS WITH HER TO EVALUATE PERFORMANCE AG	AINST
THOSE GOALS. BOTH COMPENSATION AND PERFORMANCE ASSESSMENT INFORMA	TION IS
SHARED WITH THE FULL BOARD FOR ITS REVIEW AND APPROVAL. AT VARIOU	S
POINTS IN THE PROCESS, DISCUSSIONS AND DELIBERATIONS ARE REVIEWED	VIA
EMAIL. ONCE DELIBERATIONS ARE COMPLETE, THE FINAL DETERMINATION	IS
SUMMARIZED BY THE BOARD TREASURER IN WRITING.	
	_

Name of the organization	Employer identification number			
WIKIMEDIA FOUNDATION	20-0049703			
FORM 990 PART VI LINE 15B				
_ FORM_ 950_14K1_ V1_ BINE_ 15B				
THE WIKIMEDIA FOUNDATION EXECUTIVE DIRECTOR IS RESPONSIBLE FOR				
DETERMINING THE COMPENSATION OF ALL WIKIMEDIA FOUNDATION OFFICERS AND				
KEY EMPLOYEES (WITH THE EXCEPTION OF HERSELF). IN SETTING COMPENSATION				
FOR WIKIMEDIA FOUNDATION OFFICERS AND KEY EMPLOYEES, THE EXECUTIVE				
DIRECTOR HAS SECURED AND REVIEWED COMPARABILITY DATA ABOUT COMPENSATION				
AT ORGANIZATIONS OF SIMILAR SIZE AND SCOPE TO THE WIKIMEDIA FOUNDATION,				
INCLUDING SALARY, BONUS SCHEMES AND NON-MONETARY BENEFITS AND				
PERQUISITES. THE INFORMATION CAME FROM A VARIETY OF SOURCES INCLUDING				
GUIDESTAR, BOARDSOURCE, THE CENTER FOR NON-PROFIT MANAGEMENT, THE				
NON-PROFIT TIMES, THE SAN FRANCISCO BUSINESS TIMES, COMPASSPOINT				
NONPROFIT SERVICES AND THE MEYER FOUNDATION. ADDITIONALLY, THE EX	ECUTIVE			
DIRECTOR AND HER STAFF HAVE CONSULTED WITH INDEPENDENT EXPERTS IN	THE			
FIELD, INCLUDING THOSE WITH SPECIFIC SUBJECT-MATTER EXPERTISE IN	AREAS OF			
NON-MONETARY COMPENSATION SUCH AS HEALTH AND DENTAL COVERAGE AND				
RETIREMENT SAVING PLANS. THE EXECUTIVE DIRECTOR ALSO ANNUALLY SET	'S			
PERFORMANCE GOALS WITH OFFICERS AND KEY EMPLOYEES, AND WORKS WITH	THEM			
TO EVALUATE PERFORMANCE BASED ON THOSE GOALS. BOTH COMPENSATION A	.ND			
PERFORMANCE ASSESSMENT INFORMATION IS SHARED AT A HIGH LEVEL WITH	THE			
BOARD OF TRUSTEES, BUT THE BOARD DOES NOT REVIEW THIS INFORMATION	_IN			
DETAIL, NOR DOES IT APPROVE SPECIFICS.				

Name of the organization	Employer identification number
WIKIMEDIA FOUNDATION	20-0049703
FORM 990 PART VI, LINE 19	
THE ORGANIZATION'S WEBSITE INCLUDES LINKS TO ITS GOVERNING DOCUME	ENTS, ITS
CONFLICT OF INTEREST POLICY AND ITS AUDITED FINANCIAL STATEMENTS.	
HTTP://WIKIMEDIAFOUNDATION.ORG/WIKI/BYLAWS	
HTTP://WIKIMEDIAFOUNDATION.ORG/WIKI/CONFLICT_OF_INTEREST_POLICY	
HTTP://WIKIMEDIAFOUNDATION.ORG/WIKI/FINANCIAL_REPORTS	
-	

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

THE MISSION OF THE WIKIMEDIA FOUNDATION IS TO EMPOWER AND ENGAGE PEOPLE AROUND THE WORLD TO COLLECT AND DEVELOP EDUCATIONAL CONTENT UNDER A FREE LICENSE OR IN THE PUBLIC DOMAIN AND TO DISSEMINATE IT EFFECTIVELY AND GLOBALLY.

IN COLLABORATION WITH A NETWORK OF CHAPTERS, THE FOUNDATION PROVIDES THE ESSENTIAL INFRASTRUCTURE AND AN ORGANIZATIONAL FRAMEWORK FOR THE SUPPORT AND DEVELOPMENT OF MULTILINGUAL WIKI PROJECTS AND OTHER ENDEAVORS WHICH SERVE THIS MISSION. THE FOUNDATION WILL MAKE AND KEEP USEFUL INFORMATION FROM ITS PROJECTS AVAILABLE ON THE INTERNET FREE OF CHARGE, IN PERPETUITY.

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

BELGIUM UNITED KINGDOM

FORM 990, PART VI, LINE 17 - STATES

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

20-0049703 WIKIMEDIA FOUNDATION

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

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

SQUIRE SANDERS AND DEMPSEY LLP LEGAL SERVICES 131,564.

8000 TOWERS CRESCENT DRIVE, 14 FLOOR TYSONS CORNER, VA 22182

TOTAL COMPENSATION 131,564.

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FORM 990, PART VIII - INVESTMENT INCOME

	(A)	(B)	(C)	(D)
	TOTAL	RELATED OR	UNRELATED	EXCLUDED
DESCRIPTION	REVENUE	EXEMPT REVENUE	BUSINESS REV.	REVENUE
INTEREST INCOME	31,034.			31,034.
TOTALS	31,034.			31,034.
	=========	=========	=========	=========

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

DESCRIPTION ENDING BOOK VALUE

PREPAID EXPENSES 186,489.

TOTALS 186,489.

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