## Form **990**

Department of the Treasury Internal Revenue Service

### Return of Organization Exempt From Income Tax

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

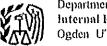
2009

Open to Public Inspection

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

and ending A For the 2009 calendar year, or tax year beginning D Employer identification number Check if applicable: C Name of organization Please use IRS label or Address change MOZILLA FOUNDATION print or Name change 20-0097189 type. Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Specific 650-903-0800 Termin-ated 650 CASTRO ST. SUITE 300 Instruc-Amended return 910,995. G Gross receipts \$ City or town, state or country, and ZIP + 4 Applica-MOUNTAIN VIEW, CA 94041 H(a) Is this a group return pending Yes X No F Name and address of principal officer; MARK SURMAN for affiliates? H(b) Are all affiliates included? Yes No 101 INDIAN ROAD, TORONTO, ON ) ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list, (see instructions) I Tax-exempt status: X 501(c) (3 J Website: ▶ WWW.MOZILLA.ORG/FOUNDATION H(c) Group exemption number ▶ L Year of formation: 2003 M State of legal domicile: CA K Form of organization: X Corporation Trust Association Other > Part I Summary Briefly describe the organization's mission or most significant activities: MOZILLA FOUNDATION IMPROVES AND Activities & Governance PROTECTS THE INTERNET AS A PUBLIC COMMONS. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 5 Number of voting members of the governing body (Part VI, line 1a) 3 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 5 Total number of employees (Part V, line 2a) 25000 6 6 Total number of volunteers (estimate if necessary) 34,254. 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 27,547. b Net unrelated business taxable income from Form 990-T, line 34 ..... **Current Year** Prior Year 97,362. 222,687. 8 Contributions and grants (Part VIII, line 1h) Revenue 89,888. 44,254. Program service revenue (Part VIII, line 2g) 644,054. 1,204,746 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,391,996. 910,995. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ....... 175,393. 505,622. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 494,915. 532,841. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 1,571,110. 1,548,250. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 2,571,647. 2,256,484. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -1,179,651. -1,345,489. 19 Revenue less expenses. Subtract line 18 from line 12 ..... Beginning of Current Year End of Year or Assets ( Balanc FOR PUBLIC INSPECTION 27,623,297. 28,481,435. 20 Total assets (Part X, line 16) 16,252,276. 15,655,978. Total liabilities (Part X, line 26) 12,825,457. 11,371,021. 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. Peclaration of preparer (other than officer) is based on all information of which preparer has any knowledge. MIL 1 Sign Signature of officer Here JIM COOK, CFO Type or print name and title Preparer's identifying number (see instructions) Date Preparer's Original Signed By self-Paid signature employed > Sharon L. Zorbach Preparer's Firm's name (or EIN > DELOITTE TAX LLP Use Only yours if self-employed), 50 FREMONT STREET address, and Phone no. ► 415-783-4000 SAN FRANCISCO, CA 94105 Yes No May the IRS discuss this return with the preparer shown above? (see instructions)



Department of the Treasury Internal Revenue Service Ogden UT 84201

1-877-829-5500

For assistance, call:

Notice Number: CP211A Date: September 6, 2010

Taxpayer Identification Number: 20-0097189 Tax Form: 990

Tax Period: December 31, 2009

031584.769065.0105.003 1 AT 0.357 375 



MOZILLA FOUNDATION % OSAF 650 CASTRO ST STE 300 94041~2072759 MOUNTAIN VIEW

31584

### APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is November 15, 2010.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

VOLUNTEERS SPOKE ABOUT THE CIVIC, SCIENTIFIC AND EDUCATIONAL BENEFITS OF THE INTERNET AT DOZENS OF EVENTS, WORKSHOPS AND SYMPOSIA DURING 2009.

4d	Other program	services. (	Describe	in Schedule	Ο.
		~ ~ ~			

209,317. including grants of \$

) (Revenue \$

1,006,449. Total program service expenses > \$

Form 990 (2009)

Par	t 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	A
6	Did the organization maintain any donor advised funds or any similar funds or 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			1
	Schedule D, Part III	8		X
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	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X			
• •	as applicable	11	X	
	The second secon			
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		İ	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	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.	Ì		
•	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.			
•	A Company of the Comp		1	
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		1	
	Schedule D, Parts XI, XII, and XIII.	12		Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	]		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A 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,			
	and program service activities outside the United States? 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 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		X
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	$oldsymbol{ol}}}}}}}}}}}}}}}}}$	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Forn	990	(2009)

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	t IV Checklist of Required Schedules (continued)	<del>,</del>		
1			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on 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 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
250	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
25a	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
~	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			ŀ
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			٠,,
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
	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		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
٠.	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X	
26	If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
36	If "Yes," complete Schedule R, Part V, line 2	36	_	Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	07		x
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	┨╾	1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	X	
	Note. All Form 990 filers are required to complete Schedule O.		1	(2009

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Par	t 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	1a	5			
	Enter the number of Forms W-2G included in line 1a. Enter ·0· if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable				4,5	:
	(gambling) winnings to prize winners?	 I	***************************************	1c	Х	<del></del>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		4			
		2a	4		v	Í
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see in			_	v	
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered			3a	X	
	• • • • • • • • • • • • • • • • • • • •			3b	Δ	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority ov	er, a			х
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?		4a		
b	If "Yes," enter the name of the foreign country: ▶					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign B	ank and				
	Financial Accounts.					х
	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.			OD	<b> </b> -	
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regar			E0.		ĺ
_	Tax Shelter Transaction?		tion policit	5c	-	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			6a		х
	any contributions that were not tax deductible?			Ua		<u> </u>
a	If "Yes," did the organization include with every solicitation an express statement that such contributi			6b		
<b>-</b>	were not tax deductible?			OD		<del>                                     </del>
7	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for \$150 made partly and \$150 made partly for \$150 made partly and \$150 made partly and \$150 made partly for \$150 made partly and \$150	roode and	confices			
а				7a		Х
h	provided to the payor?  If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	<del>                                     </del>	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					<del> </del>
C	to file Form 8282?	is required		7c	ļ	х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	**************	"		$\vdash$
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p			1		
•		0,00,101		7e		Х
f	benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.	act?		7f		X
' '	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
ย h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting org					
_	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exce					
	at any time during the year?		37/3	8		
9	Sponsoring organizations maintaining donor advised funds.				<b>"</b>	
а	Did the organization make any taxable distributions under section 4966?		N/A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations, Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12N/A	10a		_		Ì
b		10b				
11	Section 501(c)(12) organizations. Enter:					
а	N/A	11a		_		
b						
	amounts due or received from them.)	11b		_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			1	<u> </u>
				Forr	n 990	(2009)

932005 02-04-10

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 in Schedule O. See instructions.

Sect	ion A. Governing Body and Management				;, 1					
		١.	1	EI	Yes	No				
	Enter the number of voting members of the governing body	1a		쉐 ㅣ						
b	Enter the number of voting members that are independent	1b	L	4	İ					
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					Х				
	officer, director, trustee, or key employee?			·   2						
3	Did the organization delegate control over management duties customarily performed by or under th	e dire	ct supervision		ı	Х				
	of officers, directors or trustees, or key employees to a management company or other person?			. 3		$\frac{\Lambda}{X}$				
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 99	0 was filed?	. 4		X				
	Did the organization become aware during the year of a material diversion of the organization's asset					<u>X</u>				
6	Does the organization have members or stockholders?			. 6						
7a	Does the organization have members, stockholders, or other persons who may elect one or more me			7a		х				
	governing body?  b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?									
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	durin	the vear	. 7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken	dunn	g tito your							
	by the following:			8a	х					
	The governing body?				X					
b	Each committee with authority to act on behalf of the governing body?	،،،،،،،	at tha	35						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be really the section A. who cannot be really and addresses in Separatule O.	cneu	at trie	9		X				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	Parani	o Codo I	9						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	event	ie Code.)		Yes	No				
				10a	163	X				
10a	Does the organization have local chapters, branches, or affiliates?		tora affiliator	. IVa		<del></del>				
b	If "Yes," does the organization have written policies and procedures governing the activities of such and branches to ensure their operations are consistent with those of the organization?	cnap	ters, annates,	10b						
	Has the organization provided a copy of this Form 990 to all members of its governing body before	filina t	he form?	11	Х					
11	Has the organization provided a copy of this Form 990 to all members of its governing body bollow	9		"   '						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			12a	Х					
12a	a Does the organization have a written conflict of interest policy? If "No," go to line 13									
	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?									
c	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done									
13	Does the organization have a written whistleblower policy?					X				
14	Does the organization have a written document retention and destruction policy?					Х				
15	Did the process for determining compensation of the following persons include a review and appro-	al by	independent							
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?	•							
	The organization's CEO, Executive Director, or top management official			15a	X					
	Other officers or key employees of the organization			15b	X					
U	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)									
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement	with a							
iva	taxable entity during the year?			16a	1	X				
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to ev	aluate	its participation							
D	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the or	ganiza	ation's							
	exempt status with respect to such arrangements?			16b						
Sac	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ►CA									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	·T (50	1(c)(3)s only) avail	able for						
10	public inspection. Indicate how you make these available. Check all that apply.	•	• • • • • • • • • • • • • • • • • • • •							
	X Own website Another's website X Upon request									
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	confl	ct of interest polic	y, and fin	ancial					
	statements available to the public.									
20	State the name, physical address, and telephone number of the person who possesses the books JAMES COOK - (650)903-0800	and r	ecords of the orga	nization:	<u> </u>					
	650 CASTRO ST. SUITE 300, MOUNTAIN VIEW, CA 9404	1			- 000	10000				
				For	n 990	(2009)				

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

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

Check this box if the organization did not co (A)	(B)	(C) Position						(D)	(E)	(F) Estimated
Name and Title	Average hours	(c)		Posi all t			ν [	Reportable compensation	Reportable compensation	amount of
	per week	Individual trustee or director	Institutional trustee			compensated ee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MITCHELL BAKER DIRECTOR	1.00	Х						0.	423,125.	70,907.
BRIAN BEHLENDORF DIRECTOR	1.00	Х						0.	0.	0.
MITCHELL KAPOR* DIRECTOR (SEE FOOTNOTE)	1.00							0.	0.	0.
JOI ITO DIRECTOR	1.00							0.	0.	0.
BOB LISBONNE DIRECTOR	1.00		一					0.	0.	0.
BRENDAN EICH DIRECTOR	1.00		Τ					0.	430,125.	63,907
JAMES COOK TREASURER	20.00			х				0.	273,438.	51,710.
MARK SURMAN EXECUTIVE DIRECTOR	40.00			х				158,510.	0.	3,122
FRANK HECKER GRANTS/PROGRAMS DIRECTOR	40.00				х			159,238.	0.	15,041
		-								
		_				_				
		_					_			
										Form <b>990</b> (2009

932007 02-04-10

Part VII Section A. Officers, Directors, Tru	istees, Key Er	nple	yee	s, a	nd l	High	est	Compensated Employ				
(A)	(B)			(C				(D)	(E)		(F)	
Name and title	Average	١		Pos				Reportable	Reportable		Estima	
	hours	(cl	neck	all	that	app	Iy)	compensation from	compensation from related		amoun othe	
	per week	ector			İ			the	organizations	CC	mpens	
	Week	ndividual trustee or director	بو			Highest compensated employee		organization	(W-2/1099-MISC		from t	
		stee	nstitutional trustee		, ,	Suadi		(W-2/1099-MISC)	·		rganiza	
		ᄪ	ional		yoldı	Pe al					and rela	
		g ye	nstitu	Officer	Key employee	inghe Begin	Former			01	rganiza	tions
		_	_	Ľ	<u> </u>							
					Ì							
		<u> </u>	<u> </u>	_	<u> </u>	┢	_					
•												
		┢	-	_		╫	$\vdash$			_		
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		+-	$\vdash$	<del>                                     </del>	$\vdash$	+	$\vdash$					
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	-	十	+	-	$\dagger$	+-	T					
			İ		1							
		T		1	1	1	t					
		$\top$	1	1	1	$\top$	✝					
					İ							
			1									
							1_					
1b Total						. >			1,126,68		204,	687.
2 Total number of individuals (including but	not limited to t	hose	e list	ed a	ode	ve) w	ho r	received more than \$10	0,000 in reportable	,		0
compensation from the organization								· · · · · · · · · · · · · · · · · · ·			1,4	$\frac{2}{1}$
											Ye	s No
3 Did the organization list any former office												<b>.</b>
line 1a? If "Yes," complete Schedule J for										<del>  [</del>	3	<u> </u>
4 For any individual listed on line 1a, is the									n the organization		4   X	.
and related organizations greater than \$1										····  '	4   X	<u></u>
5 Did any person listed on line 1a receive or											5	х
the organization? If "Yes," complete Sche	dule J for such	) per	son	, . ,				***************************************		<u>                                  </u>	3	
Section B. Independent Contractors								11 . 1	- 6100 000 of oom	nonnoti	on from	
Complete this table for your five highest of	ompensated ii	nder	eno	lent	cor	itrac	tors	that received more than	11 \$ 100,000 01 0011	hensau	OFFICE	4
the organization.								(B)			(C)	
(A) Name and busines	s address							Description of	services	Con	npensa	tion
CAPLIN AND DRYSDALE, ON		: 0	TR	CT	F.	N	w					
SUITE 1100, WASHINGTON,						, -	•	ATTORNEYS		•	168,	445.
DELOITTE TAX LLP	DIDITION		<u> </u>	<u>`</u>								
50 FREMONT STREET, SAN I	RANCISC	. O.	С	:A	94	110	5	ACCOUNTING 3	AND TAX		115,	897.
JO TREMONT DIRECT, DIR.	1111010	,,,										
				_								
2 Total number of independent contractors	(including but	not	limi	ted 1	to th	nose	liste	ed above) who received	more than			
\$100,000 in compensation from the orga						2						
	<del></del>									Fr	orm 99	0 (2009)

Par	t VIII	Statement of Reven	ue					
-					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a			i .		
E a		Membership dues						
am.	C	Fundraising events	1c					
a, ai		Related organizations						
Si'ii		Government grants (contribution	· }					
e Fi	f	All other contributions, gifts, grants	1 1	000 600				
윤뒴		similar amounts not included abov		222,687.				
Contributions, gifts, grants and other similar amounts	_	Noncash contributions included in lines			222 607			
0 %	h	Total. Add lines 1a-1f	***************	1	222,687.			
	_	MOZILLA STORE R	D17071110	Business Code 454110	34,254.		34,254.	
<u>Ş</u>		LICENSING ROYAL		900099	10,000.	10,000.	34,234.	
Program Service Revenue	b			300033	10,000.	10,000.		
E S	c d		<del> </del>					
Reg	e		<del></del>					
유	-	All other program service rever	nue					щ
		Total, Add lines 2a-2f			44,254.			
$\dashv$	3	Investment income (including			-			
		other similar amounts)			644,054.			644,054.
	4	Income from investment of tax						
	5	Royalties		<b>)</b>				
			(i) Real	(ii) Personal				
	6 a	Gross Rents					:	
	b	Less: rental expenses						
f		Rental income or (loss)						
	d	Net rental income or (loss)		<u></u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
1	b	Less: cost or other basis						
		and sales expenses						
	C	Gain or (loss)	L		1			
e le	8 a	Net gain or (loss)	g events (not	·····				
Other Revenue		including \$	of					
ا <u>چ</u>		contributions reported on line						
ĕ		Part IV, line 18			-			
8		Less: direct expenses			4		1	
		Net income or (loss) from fund	-	<b>&gt;</b>				
	9 а	Gross income from gaming ac		.]				
	h	Part IV, line 19			1			
		Less: direct expenses  Net income or (loss) from game			-			
		Gross sales of inventory, less	_					-
	10 a	and allowances		1				
	b	Less: cost of goods sold			1			
		Net income or (loss) from sale			=			
1		Miscellaneous Revenu		Business Code				
	11 a				1			
	b	· · · · · · · · · · · · · · · · · · ·						
	c			1				
	d							
	е	Total, Add lines 11a-11d		<b>&gt;</b>				
haar.	12	Total revenue. See instructions.			910,995	10,000.	34,254.	
93200	1-10							Form 990 (2009)

#### Part IX | Statement of Functional Expenses

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

l od	All other organizations must complete the include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	general expenses	expenses
1	Grants and other assistance to governments and				<u></u>
	organizations in the U.S. See Part IV, line 21	35,000.	35,000.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	12,000.	12,000.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	128,393.	128,393.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		140 000	45.000	
7	Other salaries and wages	458,080.	412,272.	45,808.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)		30 000	3 (6)	
9	Other employee benefits	36,622.	32,960.	3,662.	
10	Payroll taxes	38,139.	34,325.	3,814.	
11	Fees for services (non-employees):				
а	Management	110 750		110 756	
b	Legal	119,756.		119,756.	
C	Accounting	125,933.		125,933.	
d					
е	- · · · · · · · · · · · · · · · · · · ·	120 050		130,850.	
f	Investment management fees	130,850.	105 206	85,108.	-
g		270,314.	185,206. 101,731.	11,303.	
12	Advertising and promotion	113,034.	101,/31.	11,303.	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	EO 140	45,126.	5,014.	
17	Travel	50,140.	45,146.	3,014.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	2 160	2,221.	247.	
22	Depreciation, depletion, and amortization	2,468. 5,341.	4,441.	5,341.	
23	Insurance	5,341.		J, J41 •	
24	Other expenses, Itemize expenses not covered above. (Expenses grouped together and labeled	ļ			
	miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)	691,259.	0.	691,259.	
a	MEMBER CITE DITEC	10,620.	V .	10,620.	
b	MEAT C AND ENDEDDATEMENTS	7,994.	7,195.	799.	
C	MY COURT T X MIDOUG	5,298.	4,768.	530.	
d	DANIE ANTO DANGOR BURGO	4,693.	<del>4,700</del>	4,693.	
е.		10,550.	5,252.	5,298.	
f		2,256,484.	1,006,449.		0.
25	Total functional expenses. Add lines 1 through 24f  Joint costs. Check here ▶ if following	4,430,404.	1,000,440.	1,200,0001	
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 solicitation				
	10 02-04-10		····	1 <u></u>	Form <b>990</b> (2009)

ar		Balance Sheet					
					(A) Beginning of year		(B) End of year
T	1	Cash - non-interest-bearing			42 005 055	_1	0 (7( 02)
-	2	Savings and temporary cash investments			13,295,255.	2	9,676,832.
	3	Pledges and grants receivable, net			00 145	3	0 506
		Accounts receivable, net			23,447.	4	8,526.
١	5	Receivables from current and former officers, di	rectors,	rustees, key		İ	
		employees, and highest compensated employee	es. Com	olete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)) and persons described in section 495	58(c)(3)(E	). Complete			
		Part II of Schedule L				6	
}	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			1 050	8	1,250.
۱ ۱	9	Prepaid expenses and deferred charges	···········		1,958.	9	1,230
	10a	Land, buildings, and equipment: cost or other	1 1	20 202			
		basis. Complete Part VI of Schedule D	10a	38,382.	4,684.		6 321
	b	Less: accumulated depreciation	10b	34,001.	14,156,081.		6,321.
	11	Investments - publicly traded securities			14,130,001.	11	10,930,300
	12	Investments - other securities. See Part IV, line		1,000,010.	12	1,000,000	
	13	Investments - program-related. See Part IV, line	1,000,010.	13	1,000,000		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		28,481,435.	15 16	27,623,297	
_	16	Total assets. Add lines 1 through 15 (must equ		1	185,645.	17	149,443
	17	Accounts payable and accrued expenses	100,040+	18	110/110		
	18	Grants payable			5,833.	19	5,833
	19	Deferred revenue		1	3,033.	20	0,000
	20	Tax-exempt bond liabilities				21	
Š	21	Escrow or custodial account liability. Complete					
Š	22	Payables to current and former officers, director highest compensated employees, and disquality					
Liabiliues				i		22	
	00	of Schedule L Secured mortgages and notes payable to unre				23	
	23	Unsecured notes and loans payable to unrelate				24	
	24 25	Other liabilities. Complete Part X of Schedule D			15,464,500		16,097,000
	26	Total liabilities. Add lines 17 through 25		1	15,655,978.		16,252,276
	20	Organizations that follow SFAS 117, check h					
(A)		lines 27 through 29, and lines 33 and 34.					
Š	27	Unrestricted net assets			12,825,457	27	11,371,021
<u> </u>	28	Temporarily restricted net assets				28	
Ö	29					29	
Ē		Organizations that do not follow SFAS 117,					
Net Assets or Fund Balances		complete lines 30 through 34.					
ŝ	30	Capital stock or trust principal, or current fund	3			30	
SSe	31	Paid-in or capital surplus, or land, building, or e				31	
ž A	32	Retained earnings, endowment, accumulated i				32	
ž	33	Total net assets or fund balances		i	12,825,457		11,371,021
	34	Total liabilities and net assets/fund balances			28,481,435	• 34	27,623,297 Form 990 (2009

	990 (2009) 1102111111 1 0 0113111 1 0 1.			
Pai	t XI Financial Statements and Reporting			
L			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 O.	2a		х
2a		2b	Х	
b		20		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
d	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:  Separate basis  X Consolidated basis  Both consolidated and separate basis  Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	3a		l x
	Act and OMB Circular A-1337	38	<del> </del>	<del></del>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	<u> </u>	
-	o, desire, employed	Form	990	เวกกดา

#### **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. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 20-0097189 MOZILLA FOUNDATION Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 9 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). 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 that describes the type of supporting organization and complete lines 11e through 11h. d \_\_\_ Type III · Other b Type II c \_\_\_\_ Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes 11g(i) the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (vi) is the organization in col. (iii) Type of (iv) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization organization in col. in col. (i) listed in your support (i) organized in the organization (described on lines 1-9 governing document? (i) of your support? U.S.? above or IRC section (see instructions)) No Yes No Yes No Yes Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Form 990 or 990-EZ.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2009 MOZILLA FOUNDATION 20-00971

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

500	tion A. Public Support	7 (110 BOX OIT III IO O	.,				
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
		(a) 2005	(b) 2000	(0) 2001	(4) 2000	(0) 2300	
	Gifts, grants, contributions, and						
	membership fees received. (Do not	493,867.	92,602.	54,200.	97,362.	222,687.	960,718.
	include any "unusual grants.")	473,0071	J270021				
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to			ĺ			
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	493,867.	92,602.	54,200.	97,362.	222,687.	960,718.
	Total. Add lines 1 through 3	473,007.	JZ,00Z.	31/2001	3.73021	BEEFFE	
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly		Ì				
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		All the second				47,918.
_	column (f)						912,800.
	Public support, Subtract line 5 from line 4.	<u> </u>			<u></u>		
		(-) 000F	#-7 000G	(c) 2007	(d) 2008	(e) 2009	(f) Total
	endar year (or fiscal year beginning in)	(a) 2005 493,867.	(b) 2006 92,602.	54,200.	97,362.	222,687.	(f) Total 960,718.
	Amounts from line 4	493,007	72,002.	34/2000	3773021	202/00/	, , , , , , , , , , , , , , , , , , , ,
8	Gross income from interest,	1					
	dividends, payments received on			·			
	securities loans, rents, royalties	539,019.	1364547.	1241139.	1204746.	644,054.	4993505.
_	and income from similar sources	339,019.	1304347.	T241137.	24017107	011,001	
9	Net income from unrelated business						
	activities, whether or not the	33,039.	94,590.	76,127.	65,086.	27.547.	296,389.
	business is regularly carried on	33,039.	J4, JJ0.	10,121.	- 03/0001	B. 70 - 7.	
10	Other income. Do not include gain						
	or loss from the sale of capital	51,448.					51,448.
	assets (Explain in Part IV.)	31,440.					6302060.
11	-		<u> </u>			12 33	,473,997.
12	Gross receipts from related activities	, etc. (see instructi	ons) this	ed fourth or fifth to			
13	First five years. If the Form 990 is for						
Se	organization, check this box and stoction C. Computation of Pub	p nere lic Support Pe	rcentage			*******************************	
	Public support percentage for 2009			column (fl)		14	14.48 %
						15	22.40 %
15	Public support percentage from 200 a 33 1/3% support test - 2009. If the c	o Scriedule A, Fall	st chock the hove	n line 13 and line			
101	stop here. The organization qualifies						
	33 1/3% support test - 2008. If the						
,	and stop here. The organization qua						
47	and stop nere. The organization qua a 10% -facts-and-circumstances te						
171	and if the organization meets the "fa	st - 2009.II the org	panization did not t	this how and ston I	nere Explain in Pa	art IV how the oras	nization
	and if the organization meets the "fa meets the "facts-and-circumstances						
	meets the "racts-and-circumstances te:  10% -facts-and-circumstances te:	test. The organiz	auon quames as a	chack a hav on line	a 13 16a 16h or	17a. and line 15 is	
1	more, and if the organization meets	st - zooo.ii the org	janization did not t	shock this hay and	stop here Explai	in in Part IV how th	16
	more, and it the organization meets organization meets the "facts-and-ci	me racis-anu-cifc	The proprietion	analifies as a nubl	icly supported or	nanization	<b>&gt;</b>
40	Private foundation. If the organization	ion did not obselve	, me organization	3a 16h 17a or 17	h check this hav	and see instruction	ns •
18	rivate joundation. If the organizati	OH GRO HOL CHECK S	L DOX ON MILE TO, IL	Ja, 100, 174, 01 17	Sch	edule A (Form 99	0 or 990-EZ) 2009
					300	•	-

Page

	III   Support Schedule for O	rganizations	Described in a	Section 509(a	/( </th <th>t you checked the bo</th> <th>x on line 9 of Part 1.)</th>	t you checked the bo	x on line 9 of Part 1.)
	on A. Public Support				1		10 T- : :
	dar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ifts, grants, contributions, and						
	embership fees received. (Do not						
in	clude any "unusual grants.")						
m fo ar or	ross receipts from admissions, erchandise sold or services per- ormed, or facilities furnished in my activity that is related to the rganization's tax-exempt purpose						
	ross receipts from activities that						
	re not an unrelated trade or bus- less under section 513						
iz	ax revenues levied for the organ- ation's benefit and either paid to r expended on its behalf						
fu	he value of services or facilities urnished by a governmental unit to ne organization without charge						
	otal. Add lines 1 through 5						
7a A	mounts included on lines 1, 2, and						
3	received from disqualified persons						
fro	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
	dd lines 7a and 7b						
	ublic support (Subtractine 7c from line 6.)						
Sect	ion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 A	mounts from line 6						
10a G d s	Gross income from interest, lividends, payments received on ecurities loans, rents, royalties and income from similar sources						
(!	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
4 ff s v	Add lines 10a and 10b						
12 (	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 1	Total support (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is fo						<b>.</b> .
	check this box and stop here						▶∟
	tion C. Computation of Pub						
	Public support percentage for 2009					15	%
	Public support percentage from 200				4	16	%
	tion D. Computation of Inve						
17	nvestment income percentage for 2	009 (line 10c, colu	ımn (f) divided by	ine 13, column (f))		17	%
18 1	nvestment income percentage from	2008 Schedule A	, Part III, line 17	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		18	%
19a 3	33 1/3% support tests - 2009. If the	e organization did	not check the box	on line 14, and li	ne 15 is more than	33 1/3%, and line	17 is not
ł	more than 33 1/3%, check this box	andstop here. The	e organization qua	lifies as a publicly	supported organiz	ation	▶□
b (	33 1/3% support tests - 2008. If the	ə organization did	not check a box o	on line 14 or line 1	9a, and line 16 is m	ore than 33 1/3%	, and
	ine 18 is not more than 33 1/3%, ch						
20	Private foundation. If the organizati	on did not check a	a box on line 14, 1	9a, or 19b, check	this box and see in	nstructions	<b>&gt;</b> L
					Sc	hedule A (Form 9	90 or 990-EZ) 2009

SCHEDULE A (FOILL 350 OF 350 EZ) 2003 #10 PLEP PLEF # 001/10111 # 001	
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II,	line 17a or 17b;
and Part III, line 12. Provide any other additional information. See instructions.	

MOZILLA FOUNDATION ("THE FOUNDATION") QUALIFIES AS A PUBLICLY SUPPORTED CHARITY DESCRIBED IN SECTION 509(A)(1) OF THE INTERNAL REVENUE CODE UNDER THE FACTS-AND-CIRCUMSTANCES TEST OF REG. SEC. 1.170A-9T(F).

SUBSTANTIAL PUBLIC SUPPORT AND SOURCES OF SUPPORT

THE FOUNDATION'S SUPPORT FROM THE GENERAL PUBLIC FOR THE PRIOR FIVE

TAXABLE YEARS, 2005 THROUGH 2009, IS 14.48%, IN EXCESS OF THE 10% PUBLIC

SUPPORT REQUIRED BY THE REGULATIONS. THIS SUPPORT HAS BEEN RECEIVED FROM

NUMEROUS INDIVIDUALS AND ORGANIZATIONS RATHER THAN FROM MEMBERS OF A

SINGLE FAMILY OR ENTITY.

#### ATTRACTION OF PUBLIC SUPPORT

THE FOUNDATION HAS ACTIVELY SOUGHT PUBLIC SUPPORT FROM THE VERY OUTSET, AND IT HAS CONTINUOUSLY AND SUCCESSFULLY ATTRACTED SUCH SUPPORT OVER ITS GIVEN THE FOUNDATION'S MISSION, IT HAS NATURALLY FOCUSED ITS LIFETIME. FUNDRAISING EFFORTS ONLINE. LIKE MANY NEW ORGANIZATIONS, THE FOUNDATION HAS ADJUSTED THE FOCUS OF ITS FUNDRAISING EFFORTS OVER TIME TO MAKE THEM MORE SUCCESSFUL AND IN KEEPING WITH THE FOUNDATION'S CHANGING PROGRAMS. FOR INSTANCE, IN THE EARLY YEARS, THE FOCUS OF PUBLIC SUPPORT SOLICITATIONS WAS ON DEVELOPING AND PROMOTING ALL OF MOZILLA'S PROJECTS, INCLUDING FIREFOX. DURING THIS TIME THE FOUNDATION ALSO PLACED A GREATER FOCUS ON SEEKING SUPPORT FROM LARGE DONORS IN THE TECHNOLOGY FIELD WHO COULD PROVIDE THE LARGE GRANTS NECESSARY TO HELP IT PLACE THE NEW ORGANIZATION ON A FIRM FINANCIAL FOOTING, AS WELL AS CRITICAL TECHNICAL EXPERTISE AND ASSISTANCE IN ADVANCING THE MOZILLA PROJECT. MORE RECENTLY, AS THE FOUNDATION BECAME LESS DEPENDENT ON THIS KIND OF CORPORATE SUPPORT, Schedule A (Form 990 or 990-EZ) 2009 932024 02-08-10

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

IT HAS RETURNED THE FOCUS OF ITS SOLICITATION EFFORTS TO MEMBERS OF THE

PUBLIC INTERESTED IN MAINTAINING THE INTERNET AS A PUBLIC RESOURCE OR IN

SUPPORTING THE FOUNDATION'S EFFORTS TO PROVIDE SPECIFIC RESOURCES TO THE

PUBLIC. FOR INSTANCE, THE FOUNDATION HAS WORKED TO EXPAND ITS

SOLICITATION EFFORTS BY PROVIDING DONORS THE ABILITY TO TARGET THEIR

DONATIONS FOR SPECIFIC FOUNDATION PROJECTS, OR FOR FOUNDATION EFFORTS TO

PROMOTE WEB ACCESSIBILITY FOR PEOPLE WITH DISABILITIES.

THE FOUNDATION EASILY MEETS THE CRITERION OF TREASURY REGULATION

1.170A-9T(F) THAT IT BE "SO ORGANIZED AND OPERATED TO ATTRACT NEW AND

ADDITIONAL PUBLIC OR GOVERNMENTAL SUPPORT ON A CONTINUOUS BASIS." MANY

THOUSANDS OF INDIVIDUALS AND ORGANIZATIONS HAVE DONATED MONEY TO MOZILLA

OVER THE YEARS, RAISING NEARLY \$4 MILLION IN THE 2003-09 PERIOD. THOUSANDS

MORE PEOPLE HAVE DONATED THEIR TIME BY VOLUNTEERING TO HELP WITH MOZILLA

PROJECTS.

OVER THE LAST FEW YEARS, THE FOUNDATION HAS BEEN ACTIVELY HIRING STAFF AND DEVELOPING PROGRAMS AIMED AT INCREASING THE NUMBER AND DIVERSITY OF WAYS THAT THE PUBLIC CAN SUPPORT MOZILLA.

IN 2008, THE THE FOUNDATION HAS HIRED A NEW EXECUTIVE DIRECTOR, MARK SURMAN, WITH EXTENSIVE NON-PROFIT MANAGEMENT AND FUNDRAISING EXPERIENCE.

IN 2009, THE FOUNDATION HIRED CHELSEA NOVAK, AN EXPERIENCED ONLINE FUNDRAISING SPECIALIST FROM THE HOSPITAL SECTOR.

IN LATE 2009, THE FOUNDATION DEVELOPED A NEW PROGRAM CALLED MOZILLA

DRUMBEAT DESIGNED TO SUPPORT A WIDE VARIETY OF PROJECTS RELATED TO

MOZILLA'S MISSION OF PROTECTING THE OPEN INTERNET. THIS PROGRAM INCLUDES A

SIGNIFICANT DONATIONS AND VOLUNTEERING COMPONENT AIMED AT ATTRACTING NEW

932024 02-08-10 Schedule A (Form 990 or 990-EZ) 2009

Part IV | Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

AND ADDITIONAL PUBLIC SUPPORT.

THE FOUNDATION HAS ALSO BEEN ACTIVELY GROWING ITS PROGRAMS IN EDUCATION AND ACCESSIBILITY. THESE PROGRAMS HAVE ATTRACTED SUPPORT FROM INDIVIDUALS AND FOUNDATIONS ALIKE. AS AN EARLY INDICATION OF SUCCESS, MACARTHUR FOUNDATION PROVIDED A SIGNIFICANT GRANT IN 2009 TOWARDS MOZILLA'S EDUCATION EFFORTS. THE FOUNDATION IS ON TRACK TO ATTRACT EVEN MORE SUPPORT FOR THESE PROGRAMS IN 2010.

AS A PART OF THESE EFFORTS, FOUNDATION CONTINUES TO IMPROVE ITS WEB SITE AND ONLINE DONATIONS INFRASTRUCTURE. THESE IMPROVEMENTS ARE LEADING TO MEASURABLE INCREASES IN DONATIONS.

REPRESENTATIVE GOVERNING BODY

THE BOARD OF THE FOUNDATION CONSISTS OF EXPERTS IN INTERNET AND WEB TECHNOLOGY AND LEADERS OF THE BROAD COMMUNITY OF INTERNET CIVIC AND SOCIAL ACTIVISTS, INCLUDING MITCHELL BAKER (LEADER OF THE MOZILLA PROJECT SINCE SHORTLY AFTER ITS INCEPTION), BRIAN BEHLENDORF (CO-CREATOR OF THE APACHE WEB SERVER, THE MOST WIDESPREAD FREELY AVAILABLE OPEN SOURCE WEB SERVER, AND CO-FOUNDER OF THE APACHE FOUNDATION), BRENDAN EICH (INVENTOR OF THE JAVASCRIPT LANGUAGE AND TECHNICAL LEADER OF THE MOZILLA PROJECT SINCE ITS INCEPTION), JOI ITO (CHAIRMAN AND CEO OF CREATIVE COMMONS AND PRESENT OR PAST BOARD MEMBER OF MANY OTHER INTERNET-RELATED NONPROFIT ORGANIZATIONS), AND BOB LISBONNE (ENTREPRENEUR AND PAST VP OF NETSCAPE COMMUNICATIONS CORP.).

AVAILABILITY OF PUBLIC SERVICES AND PUBLIC PARTICIPATION IN PROGRAMS

MOZILLA1

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

MOZILLA FOUNDATION'S EFFORTS TO PROMOTE THE INTERNET AS A PUBLIC COMMONS

ARE OF INTEREST TO ANYONE WHO USES THE INTERNET AND THE WORLD WIDE WEB,

WHETHER FOR EDUCATION, CIVIC PURPOSES, BUSINESS OR PERSONAL AND FAMILY

MATTERS.

ALL OF THE END PRODUCTS OF THE FOUNDATION'S ACTIVITIES ARE MADE

AVAILABLE AS PUBLIC ASSETS. THIS INCLUDES EVERYTHING FROM THE POPULAR

FIREFOX WEB BROWSER TO THE CORE MOZILLA SOFTWARE PLATFORM WHICH IS USED BY

DOZENS OF PROJECTS AROUND THE WORLD TO

EDUCATIONAL MATERIALS PRODUCED BY THE MOZILLA COMMUNITY. ALL OF THESE

MATERIALS ARE PROVIDED FREE OF CHARGE TO THE GENERAL PUBLIC UNDER A

PERMISSIVE OPEN SOURCE LICENSE THAT GRANTS ANYONE THE RIGHT NOT ONLY TO

USE THESE MATERIALS BUT ALSO TO CREATE FURTHER INNOVATIONS BY REPURPOSING

THEM AND CREATING DERIVATIVE WORKS.

THE MOZILLA PROJECT IS DRIVEN BY THE INVOLVEMENT AND PARTICIPATION OF OVER 30,000 VOLUNTEERS FROM THE UNITED STATES AND AROUND THE WORLD. THESE PARTICIPATE IN THE MOZILLA PROJECT AS A WAY TO ADVANCE THE CAUSE OF AN OPEN INTERNET, LEARN AND IMPROVE THEIR TECHNICAL SKILLS AND ENSURE THAT BETTER INTERNET SOFTWARE IS AVAILABLE TO PEOPLE IN THEIR COMMUNITIES.

THESE VOLUNTEERS ARE INVOLVED IN EVERYTHING FROM THE DEVELOPMENT OF THE CORE MOZILLA SOFTWARE PLATFORM AND THE DEVELOPMENT AND LOCALIZATION OF FIREFOX, THUNDERBIRD, BUGZILLA AND OTHER MOZILLA-SPONSORED OPEN SOURCE SOFTWARE PROJECTS, TO THE WIDESPREAD PROMOTION OF MOZILLA OPEN SOURCE SOFTWARE AND PUBLIC EDUCATION ABOUT THE OPEN WEB IN GENERAL.

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

**Schedule of Contributors** 

➤ Attach to Form 990, 990-EZ, or 990-PF.

OM8 No. 1545-0047

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization 20-0097189 MOZILLA FOUNDATION

Organization type (che	ck one):						
Filers of:	Section:						
Form 990 or 990·EZ	X 501(c)( 3 ) (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 organizati Note. Only a section 50	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 11(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General Rule							
	ation filing Form 990, 990 EZ, or 990 PF that received, during the year, \$5,000 or more (in money or property) from any one omplete Parts I and II.						
Special Rules							
509(a)(1) and	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%						
For a section 501(c)(3) organization filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 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 (i) Form 990, Part VIII, line 1h or (ii) Form 990 EZ, line 1. Complete Parts I and II.  For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributor, during the year, aggregate contributions 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.							
contributions If this box is c purpose. Do n	601(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributor, during the year, for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. hecked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., ot complete any of the parts unless the General Rule applies to this organization because it received nonexclusively itable, etc., contributions of \$5,000 or more during the year.						
<b>~</b>	ion that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),						

but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009) Name of organization MOZILLA FOUNDATION Part I Contributors (see instructions)

AND SHAP	111111111111111111111111111111111111111		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$ <u></u>	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
		\$ \$	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 Oncash 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 Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b></b> \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

923452 02-01-10

Name of organization

Employer identification number

#### MOZILLA FOUNDATION

20-0097189

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
(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
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047
2009
Open to Public Inspection

Name of the organization

MOZILLA FOUNDATION

Employer identification number 20-0097189

Parl	I Organizations Maintaining Donor Advised	Funds or Other Similar Fund	is or Accounts. Complete if 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)		
	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's e	xclusive legal control?	Yes L_ No
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that grant funds can b	e used only
_	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpos	se conferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the orga	anization answered "Yes" to Form 990	, Part IV, line 7.
	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or pl		nistorically important land area
	Protection of natural habitat		ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualific	ed conservation contribution in the for	m of a conservation easement on the last
-	day of the tax year.		
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic stru		
٦	Number of conservation easements included in (c) acquired a		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by	the organization during the tax
Ū	vear >		
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, inspection, handling	 of
٠	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easement	s during the year
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements dur	ing the year ▶ \$
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 1	70(h)(4)(B)(i)
U	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expe	nse statement, and balance sheet, and
9	include, if applicable, the text of the footnote to the organization	ion's financial statements that describ	es the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement an	d balance sheet works of art, historical
• • • • • • • • • • • • • • • • • • • •	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of	public service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
h	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and ba	alance sheet works of art, historical treasures,
ь	or other similar assets held for public exhibition, education, or	or research in furtherance of public ser	vice, provide the following amounts relating to
	these items:	, , , , , , , , , , , , , , , , , , , ,	•
			<b>▶</b> \$
	(ii) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
0	If the organization received or held works of art, historical tre	asures, or other similar assets for final	ncial gain, provide
2	the following amounts required to be reported under SFAS 1		<b>~</b>
_	D. Joseph J. France COO. Dark SHIL Board	. To to said to mine a memor	<b>&gt;</b> \$
a h	Assets included in Form 990, Part X		\$
b	Assers Biolidaed lift offit aso, Falt A		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

Sched		FOUNDATION					)97189 Page 2
	t III Organizations Maintaining C	ollections of Ar	t, Historical Ti	easures, o	r Other	Similar Asse	ets (continued)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that	are a signi	ficant use of its	collection items
	(check all that apply):						
а	Public exhibition	d	Loan or exc	change prograi	ns		
b	Scholarly research	е	Other				
С	Preservation for future generations						
	Provide a description of the organization's co	lections and explain	n how they further	the organizatio	n's exemp	t purpose in Pa	rt XIV.
5	During the year, did the organization solicit or	r receive donations o	of art, historical trea	asures, or othe	r similar as	sets	
•	to be sold to raise funds rather than to be ma	intained as part of t	he organization's c	ollection?			Yes No
Par		gements. Comple	ete if organization a	nswered "Yes	to Form 9	90, Part IV, line	9, or
	reported an amount on Form 990, Par	_	Ü				
	Is the organization an agent, trustee, custodi		liary for contributio	ns or other ass	sets not inc	luded	
144	on Form 990, Part X?						☐ Yes ☐ No
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:				
D	II Tes, explain the analigement in art Aiv	and complete the to	motting (abio)				Amount
_	Designing holonge					1c	
	Beginning balance					1d	
u	Additions during the year					1e	•
e	Distributions during the year					1f	
1	Ending balance  Did the organization include an amount on F					L	Yes No
	•		211	. ,			
Par	If "Yes," explain the arrangement in Part XIV.  t V   Endowment Funds. Complete i		reward "Vas" to F	orm 990 Part	V line 10		
Гаі	t v Endowment i unds. Complete		(b) Prior year	(c) Two year	s back (d)	Three years had	k (e) Four years back
		(a) Current year	(b) Filor year	(C) The year	o back (a)	7 111100 70410 540	(9)
1a	Beginning of year balance						
b	Contributions						
C	Net investment earnings, gains, and losses						
ď	Grants or scholarships			<del>-</del>			
е	Other expenditures for facilities						
	and programs						
f	Administrative expenses			_			
g	End of year balance			i			
2	Provide the estimated percentage of the year						
a	Board designated or quasi-endowment		%				
b	Permanent endowment	%					
	TOTAL OF THE P	<u>%</u>					
За	Are there endowment funds not in the posse	ession of the organiz	zation that are held	and administe	red for the	organization	V- 11.
	by:						Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
b	If "Yes" to 3a(ii), are the related organization						3b
4	Describe in Part XIV the intended uses of th	e organization's end	owment funds.				
Pa	rt VI   Investments - Land, Buildin	gs, and Equipm					
	Description of investment	(a) Cost or obasis (invest		st or other is (other)		eciation	(d) Book value
1a	Land						
b							
С	Leasehold improvements						
d				38,382.		32,061.	6,321.
е	Other						
Tota	I. Add lines 1a through 1e. (Column (d) must	equal Form 990, Par	t X, column (B), line	e 10(c).)		<u></u>	6,321.

Schedule D (Form 990) 2009

(a) Description of security or category	(b) Book value	2-	(c) Method of valua	
(including name of security)	(2) 20011 121100	Co	st or end-of-year mar	ket value
nancial derivatives				
osely-held equity interests				
her				
0.000				
otal. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X,	line 13.		
(a) Description of investment type	(b) Book value	_	(c) Method of value	
(a) Description of investment type	(5) 200	Co	st or end-of-year ma	rket value
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, Ii				
	(a) Description			(b) Book value
	4. 4.			
Total. (Column (b) must equal Form 990, Part X, col (B)			·····	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, IINE 25.	(b) Amount		
		(2), 31100110	- ·	
Federal income taxes	EFTTS	16,097,000	-	
TNISHCORNIZHI) INCOME DAX BEND				
JNRECOGNIZED INCOME TAX BENI			-	
JNRECOGNIZED INCOME TAX BENI				
UNRECOGNIZED INCOME TAX BENI				
UNRECOGNIZED INCOME TAX BENI				
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UNRECOGNIZED INCOME TAX BENI				
UNRECOGNIZED INCOME TAX BENI				

uncertain tax positions under FIN 48.
932053
02-01-10

				equal Form 990, Par	t I, IIne 18.)		0		
(, line	2; Part )	IV Supplemental Information  this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.  ARIZED FIN 48 DISCLOSURE:  LLA FOUNDATION FOLLOWS FINANCIAL ACCOUNTING STANDARDS BOARD (FASB)							
40Z	ILLA	FOUNDATION	FOLLOWS	FINANCIAL	ACCOUNTING	STANDARDS	BOARD	(FASB)	

FINANCIAL INTERPRETATION NO. 48 (FIN 48) ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES- AN INTERPRETATION OF FASB STATEMENT NO. 109.

THE ACTIVITY RELATED TO MOZILLA'S UNRECOGNIZED TAX BENEFITS IS SET FORTH BELOW:

Schedule D (Form 990) 2009

2

3

4

5

6

7

8

#### Schedule F (Form 990)

### Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

OM8 No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

OZILLA FOUNDAT	ION			20-009718	9
Part I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organization answered "	Yes"
to Form 990, Part	IV, line 14b.				
1 For grantmakers. Does	the organization	maintain record	is to substantiate the amount of the g	rants or assistance, the	
grantees' eligibility for th	e grants or assis	tance, and the s	selection criteria used to award the gra	ants or assistance? X	Yes No
2 For grantmakers. Desc	ribe in Part IV the	e organization's	procedures for monitoring the use of g	grant funds outside the United Sta	tes.
A A M Mar	O.b. July E.4	(T 000) if ad	distance on age in proceed to		
3 Activities per Region. (U (a) Region	(b) Number of		ditional space is needed.) (d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
(a) negion	offices	employees or	(by type) (i.e., fundraising,	is a program service,	expenditures
	in the region	agents in	program services, grants to	describe specific type	for region
		region	recipients located in the region)	of service(s) in region	
		ļ			
		:	GRANTS TO RECIPIENTS		
EUROPE	0	0	LOCATED IN REGION		14,983.
SOROL B					
EAST ASIA AND THE			GRANTS TO RECIPIENTS		20.500
PACIFIC	C	0	LOCATED IN REGION		32,500.
			GRANTS TO RECIPIENTS		
NORTH AMERICA	,	0	LOCATED IN REGION		80,910.
	<del> </del>				
			L Surviva		228,356.
NORTH AMERICA		2	MAINTAINING AGENTS		2.00,000
				WEB EDUCATION ONLINE	
SUB-SAHARAN AFRICA	1	0	PROGRAM SERVICE	COURSE	2,500.
EUROPE		0 0	PROGRAM SERVICE	TECHNICAL CONSULTATION	3,926.
EGROEE		<u> </u>			
		1			
					363,175.
Totals	lonomicals D = 1	0 2	on one the Instructions for Form 990	Schedule F	(Form 990) 2009
LHA FOR Privacy Act and P	aperwork Redu	ICTION ACT NOTIC	e, see the Instructions for Form 990	, Octobrio	, ,

20-0097189

Page 2

MOZILLA FOUNDATION

(i) Method of valuation (book, FMV, appraisal, other) CASH VALUE CASH VALUE recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any (h) Description of non-cash assistance (g) Amount of non-cash assistance 0 of cash grant cash disbursement 80,910 WIRE TRANSFER (f) Manner of (e) Amount ENECA COLLEGE OPEN URJC OPEN SUPPORT (d) Purpose of SOURCE EDUCATION grant PROGRAM Use Schedule F-1 (Form 990) if additional space is needed. NORTH AMERICA (c) Region (b) IRS code section and EIN (if applicable) Schedule F (Form 990) 2009 (a) Name of organization Part II

.

9,483, WIRE TRANSFER

EDUCATION PROGRAM

EUROPE

Schedule F (Form 990) 2009					Of GIANACE	סנוחפי טניטמי וולמייטי יא	3 Enter total number of other organizations of entires
0	Δ			the IRS, or for which the grantee or counsel has provided a section of 1(5)(5) equivalents from	sel nas provideu a secilo	the grantee or coun	
8	xempt by	recognized as tax∙∈	foreign country,	recognized as charities by the foreign country, recognized as tax-exempt by a fortively an invalency letter	Enter total number of recipient organizations listed above that are recogn	recipient organizati	2 Enter total number of
			1.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4				
CASH VALUE	0	5,000 WIRE TRANSFER	5,000.8	EAST ASIA AND THE SOFTWARE FOR VISUALLI PACIFIC IMPAIRED	EAST ASIA AND THE PACIFIC		
				NVDA SCREEN READER		,	
CASH VALUE	0	20,000.WIRE TRANSFER	20,000.W	SUPPORTING ACCESSIBILITY	EAST ASIA AND THE PACIFIC		
				NVDA GRANT 2009 GRANT			

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20-0097189

MOZILLA FOUNDATION

Schedule F (Form 990) 2009 MOZILLA FOUNDATION

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.

(h) Method of valuation (book, FMV, appraisal, other)	CASH VALUE	CASH VALUE	CASH VALUE			0000 000	Schedule F (Form 990) 2009
(g) Description of non-cash assistance							Schedu
(f) Amount of non-cash assistance	ō	ò	Ö				
(e) Manner of cash disbursement	3,000, WIRE TRANSFER	1,500,WIRE TRANSFER	5,000 MIRE TRANSFER				
(d) Amount of cash grant	3,000,8	1,500.	5,000,5				
ber of ants	<b>1</b> -1	1	н				
(b) Region	EUROPE	EUROPE	EAST ASIA AND THE PACIFIC				
(a) Type of grant or assistance (b) Region recipies recipies (c) Num	ACCESSIBILITY CHATZILLA IRC	COMMUNITY RUN OPEN SOURCE SOFTWARE CALENDAR PROJECT	NEOTENY START UP CAMP				

Complete this part to provide the information required in Part I, line 2, and any additional information.

SCHEDULE F, PART I, LINE 2: WE MAINTAIN ONLINE INFORMATION ON GRANTS ON
OUR INTRANET, INCLUDING GRANT AMOUNTS, THE NAME, COUNTRY, AND TYPE OF
GRANTEE (E.G., AUSTRALIA-BASED FOR-PROFIT CORPORATION, UK-BASED NONPROFIT,
ETC.) AND SUPPORTING DOCUMENTATION SUCH AS GRANT PROPOSALS, SIGNED
AGREEMENTS, REPORTS FROM GRANTEES, ETC. IN SOME CASES WE HAVE AN EXPLICIT
ASSESSMENT SECTION ON THE GRANT PAGE THAT CONTAINS OUR EVALUATION OF THE
PROPOSAL AND THE GRANTEE; IN OTHER CASES THAT INFORMATION IS IN OUR EMAIL
ARCHIVES.

WE ENTER APPROPRIATE CONTRACTUAL AGREEMENTS WITH INDIVIDUAL OR CORPORATE

GRANTEES REQUIRING THEM TO ACCOMPLISH CHARITABLE WORK OF DIRECT BENEFIT

TO THE PUBLIC AND SPECIFICALLY DESCRIBED IN A STATEMENT OF WORK.

PAYMENTS ARE TYPICALLY TIED TO ACHIEVEMENT OF SPECIFIC MILESTONES; THE

INDIVIDUALS OR CORPORATIONS INVOICE THE MOZILLA FOUNDATION, AND WE MAKE

OUR GRANT PAYMENT AFTER CONFIRMING THAT THE GRANTEE HAS COMPLETED THE

AGREED-UPON WORK.

FOR GRANTS TO NON-US NON-PROFIT ORGANIZATIONS WE USE A GRANT AGREEMENT
BASED ON ONE RECOMMENDED IN THE COUNCIL ON FOUNDATIONS PUBLICATION
"UNUSUAL GRANTS: AN ONLINE LEGAL GUIDE FOR PUBLIC CHARITIES", SECTION
D, "INTERNATIONAL GRANTMAKING" FOR PRIVATE FOUNDATIONS:

HTTP://CLASSIC.COF.ORG/ACTION/CONTENT.CFM?ITEMNUMBER=1648

PRIOR TO MAKING A GRANT TO A FOREIGN NONPROFIT, WE REVIEW SUPPORTING

DOCUMENTATION PROVIDED BY THE GRANTEE OR PUBLICLY AVAILABLE ONLINE TO

DETERMINE THAT IT IS EQUIVALENT TO A U.S. PUBLIC CHARITY.

MOZILLA1

Schedule I (Form 990) 2009 2 | Employer identification number 20-0097189 SUPPORT VISION IMPAIRED Open to Public OMB No. 1545-0047 2009 Inspection (h) Purpose of grant TREBUG EXTENSION TO or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule 1-1 (Form 990) if additional space is needed WEB DEVELOPERS Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. CASH VALUE Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. (d) Amount of 25,000. cash grant 3 Enter total number of other organizations

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable 501(C)(3) FOUNDATION General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization MOZILLA UNIVERSITY OF ILLINOIS AT URBANA or government CAMPAIGN - PO BOX 4610 SPRINGFIELD, IL 62708 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1 (Form 990) Partl Part II

Page 2

Schedule 1 (Form 990) 2009

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) 501(C)(3)) AND SUPPORTING DOCUMENTATION SUCH AS 2: WE MAINTAIN ONLINE INFORMATION ON GRANTS ON OUR Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. THE NAME, COUNTRY, AND TYPE OF GRANTEE ETC. IN SOME CASES CASH VALUE THAT IN OTHER HAVE AN EXPLICIT ASSESSMENT SECTION ON THE GRANT PAGE 0 (d) Amount of non-cash assistance SIGNED AGREEMENTS, REPORTS FROM GRANTEES, THE GRANTEE; 12,000. (c) Amount of cash grant CONTAINS OUR EVALUATION OF THE PROPOSAL AND (b) Number of EMAIL ARCHIVES recipients INCLUDING GRANT AMOUNTS, SAMUEL SIDLER: WEB SITE DEVELOPMENT FOR CAMINO US-BASED INDIVIDUAL, OUR (a) Type of grant or assistance LINE N THAT INFORMATION IS COMMUNITY OPEN SOURCE PROJECT H PART PROPOSALS, Н SCHEDULE × INTRANET (E.G., GRANT CASES

932102 02-02-10

Part IV Supplemental Information
GRANTEES REQUIRING THEM TO ACCOMPLISH CHARITABLE WORK OF DIRECT BENEFIT TO
THE PUBLIC AND SPECIFICALLY DESCRIBED IN A STATEMENT OF WORK. PAYMENTS ARE
TYPICALLY TIED TO ACHIEVEMENT OF SPECIFIC MILESTONES; THE INDIVIDUALS OR
CORPORATIONS INVOICE THE MOZILLA FOUNDATION, AND WE MAKE OUR GRANT PAYMENT
AFTER CONFIRMING THAT THE GRANTEE HAS COMPLETED THE AGREED-UPON WORK.
FOR US-BASED NON-PROFIT ORGANIZATIONS WE USE A GRANT AGREEMENT THAT
INCLUDES AN ATTESTATION OF 501(C)(3) STATUS AND OTHER CONDITIONS. WE EITHER
ASK FOR A DETERMINATION LETTER OR CHECK THEIR 501(C)(3) STATUS ONLINE.
THE GRANT AGREEMENTS WE USE INCLUDE REQUIREMENTS FOR THE GRANTEE TO REPORT
ON USE OF THE FUNDS. WE KEEP THE REPORTS (OR LINKS TO THEM) ON THE INTRANET
WITH THE OTHER GRANT INFORMATION.
FOR BOTH US AND NON-US INDIVIDUALS AND FOR-PROFIT CORPORATIONS THE
MONITORING IS PART OF THE INVOICE APPROVAL PROCESS AS NOTED ABOVE.

#### **SCHEDULE J** (Form 990)

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

➤ Attach to Form 990. ➤ See separate instructions.

MOZILLA FOUNDATION

Employer identification number 20-0097189

Pai	t I   Questions Regarding Compensation	-		<del></del>
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			ĺ
	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			ĺ
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees		,	ĺ
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u></u>
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		
	, <b>, , , , , , , , , , , , , , , , , , </b>			
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.			
	Compensation committee  X Written employment contract X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			v
a	Receive a severance payment or change-of-control payment?	4a	<u> </u>	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	<u> </u>	X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	ऻ—	1
	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) and 501(c)(4) organizations must complete lines 5-9.			
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		X
	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
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		X
	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.			
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		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
-	initial contract exception described in Regs, section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
•	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2009

Schedule J (Form 990) 2009

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.

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(D)	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	reported in prior Form 990 or Form 990-EZ
		C			C	0	0	0
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	3 8	2		0	1		1	0.
BRENDAN EICH	3 (	325,50	104,625.		47,198.	16,709.	494,032.	0
	Ξ			0.				0
JAMES COOK	Ξ	ļ	54,688.	0	35,001.	N.	325, I48.	0
	Ξ	158,	0	0		3,144.	-1	
MARK SURMAN	Ξ		0.	0		0 /	177 270	
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FRANK HECKER	Ξ	0.	0	0	0		•	0
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#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

MOZILLA FOUNDATION

Employer identification number 20-0097189

FORM 990, PART VI, SECTION B, LINE 11: SEVERAL INDIVIDUALS ASSOCIATED WITH THE ORGANIZATION DILIGENTLY GATHER AND PREPARE ALL DATA AND NARRATIVE EXPLANATIONS TO ACCURATELY COMPLETE IRS FORM 990. SEVERAL DRAFTS OF THE FORM 990 ARE REVIEWED AND EDITED BY MANAGEMENT, OFFICERS, AND DIRECTORS.

ALL DIRECTORS RECEIVE A FINAL COPY OF THE 990 PRIOR TO FILING. UPON FINAL DRAFT, THE AUDIT COMMITTEE OF THE MOZILLA FOUNDATION BOARD OF DIRECTORS REVIEWS AND APPROVES THE FINAL FILING OF THE FORM 990 TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: MOZILLA REQUIRES ALL BOARD MEMBERS
TO RESPOND TO AN ANNUAL QUESTIONNAIRE THAT DETAILS POTENTIAL CONFLICTS OF
INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: MARK SURMAN'S COMPENSATION WAS

REVIEWED AND APPROVED BY THE BOARD. A COMPENSATION PROPOSAL WAS DEVELOPED

USING INDUSTRY STANDARD DATA REPORTS (RADFORD, INFOCOMPSTUDY, OTHERS). THE

METHODOLOGY WAS CONSISTENT WITH PRIOR YEARS.

FORM 990, PART VI, SECTION C, LINE 19: THE 1023, 990, 990-T, GOVERNING

DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC ON THE

MOZILLA FOUNDATION'S WEBSITE.

PART VII, SECTION A, COLUMN B

MITCHELL BAKER AND BRENDAN EICH PROVIDE AN ESTIMATED 40 HOURS PER WEEK

TO RELATED ORGANIZATIONS, MOZILLA CORPORATION AND MOZILLA MESSAGING.

JAMES COOK PROVIDES AN ESTIMATED 20 HOURS PER WEEK TO THE SAME RELATED

ORGANIZATIONS.

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

Schedule O (Form 990) 2009

#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of	the or	ganiz	ation		МО	ZILL	A ]	FOU1	IDAT:	ION					Ε	mployer i 20 – 0 (	dentification ) 97189	number
FORM	99(	) ,	PAR	T :	XI,	LIN	E	2C:	THE	PROCE	ss	то	SELECT	AN	INDEPE	NDENT	[	
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Schedule R (Form 990) 2009 Employer identification number 20-0097189 2009 Open to Public Inspection OMB No. 1545-0047 Direct controlling Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) status (if section 501(c)(3)) End-of-year assets Public charity <u>e</u> Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Exempt Code Total income section Ö ◆ See separate instructions. Related Organizations and Unrelated Partnerships Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. ► Attach to Form 990. Primary activity Primary activity MOZILLA FOUNDATION Name, address, and EIN Name, address, and EIN of related organization of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) PartII Partl

41

20-0097189

Page 2

Schedule R (Form 990) 2009 MOZILLA FOUNDATION

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

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(a)	( <u>p</u> )	(၁)	(a)	(a)				3		
Name, address, and EIN	Primary activity	Legal domicite (state or	Direct controlling entity	Predominant income (related,		Share of total Sh income end	Share of end-of-year	Disproportion- ate allocations?	Code V-UBI	General or managing
טן פומיפט טיטמייניין		foreign country)		excluded from tax under sections 512-514)	ider )	Ϋ́	assets	Yes No	K-1 (Form 1065)	
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									_	
						•				
					-					
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related part IV organizations treated as a corporation or trust during the tax year.)	Identification of Related Organizations Taxable as a Corporation or anizations treated as a corporation or trust during the tax year.)	poration or x year.)	Trust (Complete if t	he organization ans	wered "Yes"	to Form 990, Par	t IV, line 34	because if	t had one or mo	e related
(4)			(h)	(c)	(g	(e)	(£)		(B)	<u>E</u>
(b)	2	à	Driman, activity	Direct controlling	controlling	Type of entity	Share of total	ftotal	Share of	Percentage

organizations treated as a corporation or trust during the tax year,	year.)						
(2)	(q)	<u> </u>	ਓ)	(e)	£	(G)	Ē
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
MOZILLA CORPORATION - 20-3226186							
650 CASTRO ST, SUITE 300	·		MOZITTA				
MOUNTAIN VIEW, CA 94041	INTERNET SERVICES	CA	FOUNDATION	C CORP	42698357.	114399552	*00T
MOZILLA MESSAGING - 26-1947919	MANAGE AND DEVELOP						
650 CASTRO ST. SUITE 300	OPEN SOURCE EMAIL		MOZILLA	-		4	d d
MOUNTAIN VIEW, CA 94041	(THUNDERBIRD)	CA	FOUNDATION	C CORP	-355,311.	818,044.	\$00T
The state of the s							
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Schedule R (Form 990) 2009

932162 07-21-10

Page 3

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

		Voc	<u> </u>
ote. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedu		3	-
		1a X	
		╀	×
		2 4	×
c Gift, grant, or capital contribution from other organization(s)		2 7	  -
d Loans or loan guarantees to or for other organization(s)		ם	4
Loans or loan guarantees by other organization(s)		1e	×
			<b>&gt;</b>
f Sale of assets to other organization(s)		#	4
g Purchase of assets from other organization(s)		19	× >
		4	4
		<b>;</b>	×
			×
j Lease of facilities, equipment, or other assets from other organization(s)		1 2	<b>*</b>
k Performance of services or membership or fundraising solicitations for other organization(s)		4 7	: >
1 Performance of services or membership or fundraising solicitations by other organization(s)		= ;	4
m Sharing of facilities, equipment, mailing lists, or other assets		+	
n Sharing of paid employees		다	
o Reimbursement paid to other organization for expenses		to X	
		<del>1</del>	×
		p	×
q Other transfer of cash or property to outer organization(s)		1r	×
1	on thresholds		
l	(b) Transaction type (a-r)	(c) Amount involved	p <sub>o</sub>
(1) MOZILLA CORPORATION	0	69,3	300.
MOZITI. A CORPORATION	A	10,000	.000
1			
(3)			
(4)			
(6) 932163 02-04-10	Sch	Schedule R (Form 990) 2009	) 2009

Page 4

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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.

(h)	(4)	(c)	(g)	(e)	Θ	(6)	Ξ	
(g)			Aro off partness	30 1000 30 1100		Code 1/1 IB1		ō
Name, address, and EIN	Primary activity	Legal domicile	section 50 1(c)(3)	Share of end-or-	tionate	amount in box 20	griganam	g c
of entity		state or toreign	organizations?	year assers	ions?	of Schedule K-1	partner	.
		country)	Yes No		Yes No	(Form 1065)	Yes	2
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	-							
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	,							
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	<b>Y</b>							
·						Schedule R (Form 990) 2009	m 990) 2	5003

FOOTNOTES

STATEMENT

\*MITCHELL KAPOR STEPPED DOWN FROM THE BOARD OF DIRECTORS IN 2009.