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 ${\it Form} 990\text{-}EZ$

DLN: 93492294002095

OMB No 1545-1150

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at <u>www.irs.gov/form990</u>.

Short Form

Open to Public

		the Treasury			Inspection
		ue Service			
		e 2014 calendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015 f applicable C Name of organization	D Employ	or ide	entification numbe
		change NET Foundation		="	entinication numbe
	Name c		47-211 E Telepho		nhor
₽ ¹	nıtıal re		E releptio		
	inal				705-1008
	rn/term	unated City or town, state or province, country, and ZIP or foreign postal code Redmond, WA 98052	F Group E Number		ion
_		ion pending			
	фрисае				
G A	ccoun	ıtıng Method Cash	o attach	Sche	
τw	ehsite	(Form 99 cotnetfoundation org	0,990-E	Z, or	990-PF)
		npt status(check only one) - 501(c)(3) 501(c)(6) ◀(Insert no) 4947(a)(1) or 527			
K F	orm of	organization Corporation Trust Association Other			
LA	dd line	es 5b, 6c, and 7b to line 9 to determine gross receipts If gross receipts are \$200,000 or more, or if			
) are \$500,000 or more, file Form 990 instead of Form 990-EZ	► \$1		
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instance of the Check if the organization used Schedule O to respond to any question in this Part I	structions	for P	Part I)
	1 .			1 1	
	1	Contributions, gifts, grants, and similar amounts received		1	135,00
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	
	4	Investment income		4	
	5a	Gross amount from sale of assets other than inventory			
	b	Less cost or other basis and sales expenses	0		
Revenue	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5с	
ď	6	Gaming and fundraising events			
	a	Gross income from gaming (attach Schedule G if greater than \$15,000) . 6a			
	Ь	Gross income from fundraising events (not including \$of contributions		1	
		from fundraising events reported on line 1) (attach Schedule G if the			
		sum of such gross income and contributions exceeds \$15,000) 6b	0		
	c	Less direct expenses from gaming and fundraising events 6c	0		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	ı	6d	
	7a	Gross sales of inventory, less returns and allowances			
	ь	Less cost of goods sold	0		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	Other revenue (describe in Schedule O)		8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	•	9	135,00
	10	Grants and similar amounts paid (list in Schedule O)		10	
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	
Ψ.	13	Professional fees and other payments to independent contractors		13	59
5.6	14	Occupancy, rent, utilities, and maintenance		14	
Expenses		Printing, publications, postage, and shipping	• •	\vdash	
ш	15			15	264
	16	Other expenses (describe in Schedule O)		16	3,64
	17	Total expenses. Add lines 10 through 16	-	17	4,23
B	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	130,76
NetAssets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with			
et.		end-of-year figure reported on prior year's return)		19	
ž	20	Other changes in net assets or fund balances (explain in Schedule O)		20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20	. ►	21	130,76
_	_				

	Check if the organization used	Schedule O to respond to	any question in t	nis Pa	m 11		
				(A)	Beginning of year		(B) End of year
	Cash, savings, and investments Land and buildings					22	130,764
	Other assets (describe in Schedule O)				24	
25	Total assets				0	25	130,764
	Total liabilities (describe in Schedule of Net assets or fund balances (line 27 of	•	th line 21)		0	26 27	130,764
Whathe the stre	Check if the organization used t is the organization's primary exempt NET Foundation is an independent org NET ecosystem It serves as a forum fingthen the future of the NET ecosystem vation cribe the organization's program service.	I Schedule O to respond to purpose? panization to foster open de for community and commen m by promoting openness	evelopment and c rcial developers a and community p	this Pa ollabor ilike to articip	rt III	(c)(Expenses quired for section 501 (3) and 501(c)(4) anizations, optional for ers)
<u>ben</u> 28 T Gui	sured by expenses In a clear and concefited, and other relevant information for the NET Foundation provides the follow dance and Mentoring New NET project aing an open source community and acc	r each program title ving services in support of as joining the foundation ge	the projects assi t mentorship to h	gned t	o it Project th expertise in		
com sou infra proj to ti Fou Aut sec soft incr Fou com help proj with runn sell exp	ects We work with project leads to help imunity and help share knowledge on be ree community IP and Legal. We help prostructure for tracking a common, simplects. We can help in ensuring people reflex. We provide the notice that it is not to be a surface of the provide the notice of the conference ware Marketing and Communications. The ease the exposure of open source project and the provides access to these resourt informations. The NET for projects accept, invoice and process of these assets but the foundation will we can be assets but the foundation will we can great the surface of the service of the	est practices in running a fi rojects organize and mana- le, Contribution License A c spect the open source lice access to advice on legal a number of technical supp installers, binary distribution ing as well as document con the NET Foundation works exts in the NET community inces to projects and looks Foundation is not a grant fundation in call ganization (501(c)(6)), the ork with the project to ensure erences, the foundation call	riendly, collabora ge their IP assiging their IP assiging the second of	tive are ments all NE arks of project of the series are not the series on what approject es incorposed	ad innovative open as well as provide T Foundation for projects assigned as in the NET jects including so, hosting, shared ad access to broader industry to on The NET es of our T Foundation can of the individual what projects can do opriately When sto create ticket luding hosting et, sponsoring or	28a	
29							
(Gra	ints \$) If this	s amount includes foreign (grants, check her	e .	▶┌	29a	
<u> </u>		s amount includes foreign	grants, check her	e .	· · • <u> </u>	30a	
	Other program services (describe in Sch ants \$) If this	nedule O) s amount includes foreign (grants, check her	e .	▶┌	31a	
	rt IV List of Officers, Directors, Trus Check if the organization used	stees, and Key Employees	(list each one even it any question in t	not co	mpensated — see the ins	32 truction	ns for Part IV)
	(a) Name and title	(b) Average hours per week devoted to position	(c)Reportab compensation (Forms W-2/10 MISC) (if not enter -0-)	on)99-	(d) Health benef contributions t employee benefit p and deferred compensation	o lans,	(e) Estimated amount of other compensation
	Schmelzer sident	1 00		0			
	nugo Rabellino e President	4 00		0			
	los Barkoczı asurer	1 00		0			
	n Massı retary	10 00		0			
_	uel de Izaca octor	4 00		0			
	tın Woodward cutıve Dır	40 00		0			

	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part	V		<u>l</u>
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O			No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		No
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2,6a, and 7a, among others)?			No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		No
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a			
b	Did the organization file Form 1120-POL for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations Enter			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities 39b 0			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶, section 4912 ▶, section 4955 ▶			
b	Section $501(c)(3)$, $501(c)(4)$, and $501(c)(29)$ organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization			
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No
41	List the states with which a copy of this return is filed 🕨			
42a	The organization's books are in care of ▶ Miklos Barkoczi Telephone no	<u>(4 2</u>	25)705	-1008
	Located at ▶ One Microsoft Way Redmond, WA ZIP + 4	9	8052	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		F	I
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No No
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
c	At any time during the calendar year, did the organization maintain an office outside the U S ?	42c		No
	If "Yes," enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. •	· 「
	<u> </u>		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of		163	140
- T-G	Form 990-EZ	44a		l No
h	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed	u		100
	Instead of Form 990-EZ	44b		No
	Did the organization receive any payments for indoor tanning services during the year?	44c		No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		No
452	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		No
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	750		110
,50	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)			No

orm 990-EZ (2	2014)							Page 4
							Yes	No
	ganızatıon engage, directly s for public office? If "Yes,"				for in opposition to			No
	ection 501(c)(3) orga							
ar	l section 501(c)(3) orga nd 51				•		s for lir	ies 50
Ch	neck if the organization use	d Schedule O to respond to	o any question in this	s Part VI				Γ
							Yes	No
	ganization engage in lobbyi complete Schedule C, Part I		tion 501(h) election		during the tax year?	. 47		
18 Is the org	anızatıon a school as descr	ribed in section 170(b)(1)((A)(II)? If "Yes," com	plete Sch	edule E .	. 48		
49a Did the or	ganızatıon make any transf	ers to an exempt non-char	ritable related organiz	zation?		. 49a		
b If"Yes," v	was the related organization	ı a section 527 organizatio	on?			. 49b		
	this table for the organizati							
	s) who each received more	than \$100,000 of compen (b) A verage	(c) Reportable		f there is none, enter Health benefits,			amount
(a) Name an	u title of each employee	hours per week devoted to position	compensation (Forms W-2/1099 MISC)	empl	ontributions to oyee benefit plans, and deferred compensation	1 ' '		ensation
IONE								
51 Complete	mber of other employees pa this table for the organizationsation from the organization	on's five highest compens		 ntractors	who each received	▶ more th	an \$10	0,000
(a	a) Name and business addre	ess of each independent co	ontractor	(b)	Type of service	(c) (ompen	sation
IONE								
52 Did the	mber of other independent or organization complete Scho ted Schedule A	_	•			<u> </u>	┌ Yes	 s
	of perjury, I declare that I hav elief, it is true, correct, and c							
*	****				2015-10-21			
loro L	Signature of officer				Date			
	Iıklos Barkoczı Treasurer Type or prınt name and title							
1,7	Print/Type preparer's name Judy C Jones CPA	Preparer's signature	e D	Date	Check If PTIN	31100		
Paid	Firm's name F Jones & Asso	L Ociates LLC CPAS			self-employed P0028 Firm's EIN F	.1100		
Preparer Jse Only	Firm's address ► 1701 NE 104				Phone no (206) 525-	5170		
	Seattle, WA		Instructions		<u> </u>		_е Г	No

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DLN: 93492294002095

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization NET Foundation	Employer identification number
	47-2119192

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1003	Information Technology \$2402
Other Expenses 1	Taxes, Fees, and Licenses \$1077
Other Expenses 2	Promotional Materials \$167