CHAR500 Online

For new annual filings, and amendments

Annual Filing for Charitable Organizations

New York State Office of the Attorney General Charities Bureau - Registration Section 28 Liberty Street New York, NY 10005 <u>charitiesnys.com</u> Open to Public Inspection

| Filing Type: New Fil | ling O Ame | endment | Filing Year: 202 | 0 | - |
|--|---------------|--|------------------------|-----------------|-----------------------|
| | | | | | |
| General Information | | | | | |
| Current Organization Name | : SOFTWARE FF | REEDOM CONSERVANO | OY Updated Nam | ie: | N/A |
| NY Registration Number: | 40-39-09 | | Registration C | ategory: | DUAL |
| Organization Type: | Corporation | | EIN: | | 412203632 |
| Current Fiscal Year End: | 02/28 | | Updated Fisca | l Year End: | N/A |
| Organization Email: | info@sfcons | servancy.org | Organization's | S Phone: | 212-461-3245 |
| Tax Exempt Status: | 501(c)(3) | | Website: | | www.sfconservancy.org |
| Organization Address | | | | | |
| Mailing Addres | SS | Principa | l Address | | NY State Address |
| 137 Montague Street Brooklyn NY 11201-3548 UNITED STATES | | 137 Montague Brooklyn NY 11201-3548 UNITED STATI | | NA | |
| Primary Contact Information | on | | | | |
| First Name: Karen | | Last Name: S | andler | Title: E | executive Director |
| Phone: <u>2124614345</u> | | Email: <u>s</u> | tatebizregistration@sf | conservanc | y.org |
| Third Party Preparer | Informatio | n | | | |
| First Name: N/A | | Last Name: N | I/A | Title: <u>N</u> | N/A |
| Firm Name: N/A | | Phone: N | I/A | Email: <u> </u> | N/A |
| Third Party Address | | | | | |
| Street: N/A | | | | | |
| City: N/A | | Sta | ate: <u>N/A</u> | | |
| Zip: N/A | | Coun | try: N/A | | |

| Registration Category | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|
| Does the organization conduct activity in New York State (other than soliciting)? This may include, but is not limited to, maintaining an office, having employees or running a program. Yes | | | | | | | | | | |
| 2. Does the organization have assets in New York State? ② Yes ○ No | | | | | | | | | | |
| 3. Is the organization incorporated or formed in New York State? ○Yes ○No N/A | | | | | | | | | | |
| Does the organization solicit or receive more than \$25,000 annually in total contributions from New York State residents, foundations, corporations, or government agencies? ● Yes ○ No | | | | | | | | | | |
| 5. Does the organization use a professional fundraiser or fundraising counsel? | | | | | | | | | | |
| O Yes ● No | | | | | | | | | | |
| Based on your responses to the above questions, this organization's registration category remains as DUAL | | | | | | | | | | |
| | | | | | | | | | | |
| Annual Exemptions | | | | | | | | | | |
| Were the total contributions from New York State, including residents, foundations, government agencies, etc. under \$25,000 during the fiscal year? Yes No | | | | | | | | | | |
| 2. Did the organization use a professional fundraiser or fundraising counsel during the fiscal year? | | | | | | | | | | |
| O Yes ● No | | | | | | | | | | |
| 3. Were the organization's gross receipts under \$25,000 and the market value of its assets under \$25,000 during the | | | | | | | | | | |
| fiscal year? | | | | | | | | | | |
| OYes | | | | | | | | | | |
| Based on your responses to annual exemption questions, this organization is required to file under <u>DUAL</u> during this fiscal year. | | | | | | | | | | |
| Financial Information | | | | | | | | | | |
| Which IRS form does your organization use? IRS990 Organization's total revenue: 3,229,988 | | | | | | | | | | |
| Organization's total contributions: 3,177,281 Organization's total assets: N/A | | | | | | | | | | |
| Organization's net assets: 5,208,978 Organization's total revenue N/A | | | | | | | | | | |
| Organization's total liabilities: N/A and contributions: Organization's total assets/ N/A | | | | | | | | | | |
| Organization's total income: N/A worth: | | | | | | | | | | |
| Is the organization required to file form Schedule B - Schedule of contributors - with the IRS? \bigcirc Yes \bigcirc No \bigcirc N/A | | | | | | | | | | |
| For the current filing year, will your organization complete any of the following with its Charities Bureau Registration? | | | | | | | | | | |
| ☐ Closing ☐ Withdrawing ☐ Dissolving ☑ None | | | | | | | | | | |
| Is this your final filing with New York State? OYes ONo N/A | | | | | | | | | | |
| | | | | | | | | | | |

Filing Information

Did the organization use a professional fundraiser or fundraising counsel to solicit contributions in New York State?

OYes **⊙**No

| General Information | Description of Services | Description of Compensation |
|---------------------------------------|-------------------------|-----------------------------|
| Name of Firm: N/A | N/A | N/A |
| Type: N/A Registration ID: N/A | _ | |
| Contract Start: N/A Contract End: N/A | _ | |
| Amount Paid: N/A Phone : N/A | _ | |
| Mailing Address: N/A | | |
| | - | |
| Name of Firm: N/A | - N/A | N/A |
| Type: N/A Registration ID: N/A | _ | |
| Contract Start: N/A Contract End: N/A | | |
| Amount Paid: N/A Phone : N/A | _ | |
| Mailing Address: N/A | | |
| Name of Firm: N/A | N/A | N/A |
| Type: N/A Registration ID: N/A | | |
| Contract Start: N/A Contract End: N/A | _ | |
| Amount Paid: N/A Phone : N/A | | |
| Mailing Address: N/A | | |
| | - | |

Did the organization receive government grants during this fiscal year?

OYes

No

| Government Grant Agency | Grant Amount |
|-------------------------|--------------|
| N/A | N/A |
| N/A | N/A |
| N/A | N/A |
| N/A N/A N/A | N/A |
| N/A | N/A |

| Documents | |
|---|--|
| Attached organization's required documents: | |
| ☑ IRS document | |
| ☑ Certified Public Accountant's Audit Report | |
| ☐ Certified Public Accountant's Review Report | |
| ☐ Complete Certificate of Amendment or other document amending the name | |
| ☐ Schedule B | |
| ☐ Other documents | |

Signatures

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

| Role | First Name | Last Name | Emai | l |
|---------------------------|----------------------------------|-----------|------------------|-----------|
| President | Karen | Sandler | karen@sfconserva | ancy.org |
| Treasurer | Bradley | Kuhn | bkuhn@sfconserv | ancy.org |
| Signature of President | Earen M. Sandler AA8196D849F14EF | | Date: | 1/18/2022 |
| | B sta M Wal | | | |

Signature of Treasurer

-87076F288C504C4...

Date:

1/18/2022

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

Open to Public Inspection ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

| Α | For the | 2020 calend | dar year, or tax year begin | ning 3/0⊥ | , 2020, | and ending | 2/2 | 28 | , | 20 2021 | |
|---------------------------|---------------|------------------|--|-------------------------------|-----------------------|------------------|--------------------|-------------------------------|------------------------|---------------------|-------------|
| В | Check if ap | oplicable: | С | | | | | D Employ | er identi | fication numbe | r |
| | Addre | ess change | SOFTWARE FREEDOM | CONSERVANCY, | INC. | | | 41- | 22036 | 632 | |
| | Name | change | 137 MONTAGUE ST | | | | | E Telepho | | | |
| | | return | BROOKLYN, NY 112 | 01 | | | | 212 | -161- | -3245 | |
| | \vdash | eturn/terminated | · | | | | - | 212 | 401 | 3243 | |
| | \vdash | | | | | | | ^ - | | | 000 |
| | _ | ided return | | | | T | 4 > 1 - 11 : | G Gross r | | · · · · · | 29,988. |
| | Applic | cation pending | F Name and address of principal | officer: KAREN M. | SANDLER | | . , | group retur | | | Yes X No |
| | | | SAME AS C ABOVE | | | П | Are all s "No," | subordinates attach a list | included . See inst | 1? tructions | Yes No |
| ı | Tax-exe | mpt status: | X 501(c)(3) 501(c) (|) ◀ (insert no.) | 4947(a)(1) or | 527 | , | | | | |
| J | Websi | ite: ► HT | TPS://SFCONSERVAN | ICY.ORG/ | | H | (c) Group e | exemption n | umber ► | | |
| K | Form of | organization: | X Corporation Trust | Association Other ► | LY | ear of formation | : 2006 | 5 M s | State of le | egal domicile: | NY |
| | | Summar | | | l | | | | | . 3 | |
| 1 6 | | | be the organization's missi | on or most significan | nt activities:WF | PR∩M∩TF | TMPRC | JAL DE | VFT.OI | P FACTI | ΤΔͲϜ |
| | 1 | ND DEEE | ND FREE AND OPEN | SOUDCE SOFTW | NDF (FOSS) | ME VDV | | | | COETWADE | ; <u> </u> |
| 9 | 1 😤 | DEEDUW | AND SOFTWARE RIGH | THE OF THE DIT | SIIC ME DI | OULTE V | HOME | VMD - | LMED V | | , IDE T∩ |
| 뎔 | | | JECTS & INITATIVE | | | | | | LINI IXE | SINOCIC | KE IO |
| Je. | | | if the organization | | | | | | not acc | | |
| õ | | | oting members of the gover | | | | | | 1 3 | seis. | 10 |
| ∘ઇ | | | dependent voting members | | | | | | 4 | | 9 |
| es | | | of individuals employed in | | | | | | 5 | | 6 |
| ₹ | | | of volunteers (estimate if | | | | | | 6 | | 5,500 |
| Activities & Governance | | | ed business revenue from F | | | | | | 7a | | 0. |
| _ | | | I business taxable income | | | | | | 7b | | 0. |
| | 1 140 | or armonatou | a basiness taxable interne | 1101111 01111 330 1,1 0 | | | | rior Year | 75 | Curren | |
| | 8 Co | nntrihutions | and grants (Part VIII, line | 1h) | | | | ,510,1 | 40 | | 77,281. |
| ne | | | rice revenue (Part VIII, line | • | | | | 390,8 | | | |
| Revenue | | | ncome (Part VIII, column (A | | | | | | | <u> </u> | 43,032. |
| ě | | | e (Part VIII, column (A), lir | • | | | | 63,9 | | | 6,027. |
| _ | | | e — add lines 8 through 11 | | | | 2 | | 527. | 2 2 | 3,648. |
| | | | | | | | | ,970,6 | | | 29,988. |
| | | | imilar amounts paid (Part I | | • | | | 110,1 | 18. | | 70,426. |
| | | | to or for members (Part I) | | | | | | | | |
| S | 15 Sa | alaries, othe | er compensation, employee | e benefits (Part IX, co | olumn (A), lines | 5-10) | | 651,5 | 60. | 6 | 79,329. |
| Se | 16a Pr | ofessional : | fundraising fees (Part IX, c | olumn (A), line 11e) | | | | 10,3 | 331. | | 13,079. |
| Expenses | h To | otal fundrais | sing expenses (Part IX, col | umn (D), line 25) ► | 11 | 4,120. | | <u> </u> | | | · |
| X | 17 Ot | | ses (Part IX, column (A), lir | | | | 1 | 7.05 (| VC F | 1 0 | 20 700 |
| | | | | | | | | ,765,0 | | | 28,799. |
| | | | es. Add lines 13-17 (must e | | | | 2 | ,537,0 | | | 91,633. |
| | | evenue less | expenses. Subtract line 18 | 8 from line 12 | | | | 433,5 | | | 38,355. |
| o or | | | | | | | , | g of Currer | | End of | |
| sets | 20 To | | (Part X, line 16) | | | | 4 | ,754,1 | | 5,3 | 75,134. |
| Net Assets Fund Balanc | 21 To | otal liabilitie | s (Part X, line 26) | | | | | 183,5 | 45. | 10 | 66,156. |
| § 2 | 22 Ne | et assets or | fund balances. Subtract li | ne 21 from line 20 | | | 4 | ,570,6 | 523. | 5,20 | 08,978. |
| | | Signatur | e Block | | | | | , , | I | , | |
| _ | | | | rn including accompanying | schedules and staten | nents and to the | hest of my | v knowledae | and helie | ef it is true con | rect and |
| com | plete. Decla | aration of prepa | eclare that I have examined this returner (other than officer) is based on a | all information of which prep | parer has any knowled | lge. | , 5000 01 | , illioillougo | and bom | o., it io truo, ooi | 1000, 4114 |
| | | | | | | | | | | | |
| C: | n | Signatu | re of officer | | | | Dat | e | | | |
| Sig He | JII ro | וחגש | EN M CANDIED | | | | DDEC | c ED | | | |
| 116 | 16 | | EN M. SANDLER print name and title | | | | PRES | & ED | | | |
| | | | • | Dropororlo cianativa | | Data | ı | E | 11 | DTINI | |
| | | Print/Type p | oreparer's name | Preparer's signature | | Date | | Check | if ! | PTIN | |
| Pa | | | | SELF-PREPARE | D | | | self-employ | ed | | |
| Pr | eparer | Firm's name | • • <u> </u> | | | | | | | | |
| Us | e Only | Firm's addre | ess • | | | | | Firm's EIN | • | | |
| | | | | | | | | Phone no. | | | |
| Ma | v the IRS | discuss th | is return with the preparer | shown above? See i | nstructions | | | | | Yes | No |

BAA

| | m 990 (2020) SOFTWARE FREEDOM CONSERVA | | 41 | -2203632 | Pa | ige 2 |
|-----|--|------------------------|---|------------------|------------------|--|
| Par | art III Statement of Program Service Accom | | | | | |
| | Check if Schedule O contains a response or no | te to any line ir | n this Part III | | | . X |
| 1 | Briefly describe the organization's mission: | | | | | |
| | WE IMPROVE AND SUPPORT FREE AND O | EN SOURCE | SOFTWARE (FOSS), ADVOCAT | ING FOR | THE | |
| | SOFTWARE FREEDOM AND SOFTWARE RIGH | ITS OF THE | PUBLIC. WE PROVIDE A HOM | E TO FOSS | 5 | |
| | PROJECTS, DEFEND CONSUMER RIGHTS | | | | | |
| | | | | | | |
| 2 | Did the organization undertake any significant program se | vices during the | year which were not listed on the prior | | | |
| | Form 990 or 990-EZ? | | | Ye | es X | No |
| | If "Yes," describe these new services on Schedule O. | | | <u> </u> | | |
| 3 | Did the organization cease conducting, or make signif | cant changes in | n how it conducts, any program services | ;? Y | es X | No |
| | If "Yes," describe these changes on Schedule O. | | | _ | | |
| 4 | Describe the organization's program service accomplis Section 501(c)(3) and 501(c)(4) organizations are requ | hments for each | ch of its three largest program services, | as measured | oy expense | es. |
| | Section 501(c)(3) and 501(c)(4) organizations are requand revenue, if any, for each program service reported | ।।red to report t । | he amount of grants and allocations to o | others, the tota | al expense | s, |
| | and revenue, if any, for each program convice reported | •• | | | | |
| 1: | a (Code:) (Expenses \$ 1,198,827 | including gra | ints of \$ 70,426.) (Reven | ue \$ | 40,032 | 2) |
| 40 | | _ | | | | |
| | FOSS DEVELOPMENT, DOCUMENTATION, & DIFFERENT INDEPENDENT CONTRACTORS | | | | | 42_ |
| | | | | | | |
| | LIBREHEALTH, MICROBLOCKS, OUTREACH PROJECTS, AS WELL AS FOR CONSERVAN | | | | | |
| | | | | | | |
| | RELEASED FREELY TO THE PUBLIC UNDI | | | | | <u>.c, _</u> |
| | AND MODIFY IT. OUR STAFF ASSISTED COORDINATION, LEGAL AND INFRASTRUC | | | | | |
| | | | | | | |
| | GRANTS TO 14 DEVELOPERS IN THE CLO | | | NIOK TEVI | <u> TEKSUTP</u> | _ <u>Ur</u> |
| | PROJECTS BOTH INSIDE AND OUTSIDE (| OR ORGANI | ZATION TO IMPROVE THEIR | | | |
| | NON-PROFIT MANAGEMENT SKILLS. | | | | | |
| | | | | | | |
| | 1 (0) | | | <u> </u> | | |
| 41 | | including gra | | - | 3,000 | |
| | OUTREACHY AND THE INSTITUTE FOR CO | | | | | D |
| | 240 INTERNS WITH OUTREACHY — AN II | | | | | |
| | THOSE WHO ARE SUBJECT TO SYSTEMIC | | | | I THE | |
| | TECHNICAL INDUSTRY WHERE THEY LIVE | | | | = | |
| | DOCUMENTATION, AND INCREASE THE D | | | | L <u>EARNI</u> N | G_ |
| | VALUABLE SKILLS. ICR MENTORS AND | | | | | |
| | SCIENTIFIC RESEARCH USING FOSS. DU | | | | | |
| | INTERNSHIP PROGRAMS ARE PAID PROGR | | | | | |
| | PRIVILEGED BACKGROUNDS TO PARTICI | <u>'ATE </u> | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 4 0 | c (Code:) (Expenses \$ 94,762 | | | | |) |
| | LICENSE COMPLIANCE & EDUCATION ACT | | | | | |
| | ALLOW EVERYONE TO FREELY SHARE, CO | | | | | Ε |
| | SOFTWARE. THEY REQUIRE THAT EVERY | | | | | |
| | ENGAGE IN THOSE ACTIVITIES. WHEN (| | | | | |
| | ENFORCE THE LICENSE, COMPELLING THE | | | | | |
| | (JUST AS THEY RECEIVED THOSE RIGHT | | | | <u>)BBYIST</u> | :S |
| | AND INDIVIDUALS WHO WISH TO IMPROV | | | | | |
| | ELECTRONICS PRODUCTS. WE ENSURE | | | | | |
| | IMPROVE & STUDY THEIR SOFTWARE, A | | | | | |
| | EGREGIOUS CASES OF COPYLEFT VIOLAT | | | | | |
| | AND THE SOFTWARE INDUSTRY ABOUT CO | PYLEFT, P | ARTICIPATE IN RELATED POI | ICY DISCU | <u>JSSIONS</u> | ; <u>. </u> |
| | | | | | | |
| 4 0 | d Other program services (Describe on Schedule O.) | | | | | |
| | (Expenses \$ 38,104. including gra | |) (Revenue \$ | |) | |
| 4 6 | e Total program service expenses ► 2.146 | 964 | | | | |

SOFTWARE FREEDOM CONSERVANCY, INC Form 990 (2020)

41-2203632

Page 3

Χ

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Χ 1 Χ Is the organization required to complete Schedule B, Schedule of Contributors See instructions?..... 2 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 Χ **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II*..... Χ 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.... 5 Χ Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Χ 6 Χ 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Χ complete Schedule D, Part III. 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV...... 9 Χ Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V...... Χ 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule 11 a Χ b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. Χ 11 b Χ 11 c d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported Χ in Part X, line 16? If 'Yes,' complete Schedule D, Part IX...... Χ e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X..... 11 e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X.... 11 f Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Χ Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and Χ if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional....... 12b Χ 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E..... 13 Χ 14a Did the organization maintain an office, employees, or agents outside of the United States?..... 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV..... 14h Χ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV..... Χ 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV..... 16 Χ 16 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 See instructions..... Χ 17 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 Χ Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' Χ complete Schedule G, Part III. 19 Χ 20a **20a** Did the organization operate one or more hospital facilities? *If 'Yes,' complete Schedule H.....* 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.....

Χ

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III..... 22 Χ 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 Χ Schedule J..... 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a..... Χ **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 24c **d** Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?..... 24d 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I..... Χ 25a **b** Is the organization aware that it engaged in an excess benefit transaction with a disgualified 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 25h Χ Χ 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these Χ persons? If 'Yes,' complete Schedule L, Part III. 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Χ 'Yes,' complete Schedule L, Part IV..... 28a Χ **b** A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV..... 28h c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV. 28c Χ Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M..... X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M..... 30 Χ Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I...... X 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N. Part II..... Χ 32 33 Χ 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1..... Χ 34 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?..... X **b** If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2...... 35b **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If 'Yes,' complete Schedule R, Part V, line 2*..... 36 Χ Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI*.............. 37 37 Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Χ 38 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable..... 48 0

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?.....

16

SOFTWARE FREEDOM CONSERVANCY, INC 41-2203632 Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) No Yes 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return..... **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns?... 2 b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Χ 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?... 3 a **b** If 'Yes,' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation on Schedule 0*..... 3 b 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Χ 4 a **b** If 'Yes,' enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). X 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?..... 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?..... 50 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Χ 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?.... 6 h Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?.... X 7 a **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b Χ c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Χ 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year..... Χ e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. 7 e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?...... 7 f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?..... 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.... 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?..... 8 9 Sponsoring organizations maintaining donor advised funds. 9 a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?..... 9 b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12..... **b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders..... **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)..... 11 b 12 a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? **b** If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year...... 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13 a Note: See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in 14a Did the organization receive any payments for indoor tanning services during the tax year?..... Χ 14a **b** If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O... 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Χ excess parachute payment(s) during the year?..... 15 If 'Yes.' see instructions and file Form 4720. Schedule N. Χ

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?.....

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

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Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. . . . 10 If there are material differences in voting rights among members SEE SCH. O of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent... 9 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... 8 a X X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. O. 15 a **b** Other officers or key employees of the organization...SEE .SCHEDULE .Q..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16 a X **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

BROOKLYN,

NY 11201

212-461-3245

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Form 990 (2020) SOFTWARE FREEDOM CONSERVANCY, INC

41-2203632

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

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

X

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

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

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

| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. | | | | | | | | | | | |
|--|---|-----------------------------------|-----------------------|--------------|--------------|------------------------------|--------|--|--|---|--|
| | (C) | | | | | | | | | | |
| (A) Name and title | (B) Average hours per | thar | one both | box, an c | unles | , | on | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations | (F) Estimated amount of other | |
| SEE SCHEDULE O | week (list any hours for related organiza- tions below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099-MISC) | (W-2/1099-MISC) | compensation from the organization and related organizations | |
| (1) KAREN M. SANDLER | 40_ | | | | | | | 155 005 | | | |
| PRES & ED | 0 | | | Χ | | | | 155,805. | 0. | 60,104. | |
| (2) BRADLEY M. KUHN TREASURER, ET AL | <u>41.36</u> 0 | Х | | Χ | | | | 100,797. | 0. | 40,089. | |
| (3) MARTIN MICHLMAYR | 2.85 | | | | | | | | | | |
| DIRECTOR | 0 | Χ | | | | | | 5,966. | 0. | 0. | |
| (4) JEREMY ALLISON | 1 | | | | | | | | | | |
| DIRECTOR | 0 | Χ | | | | | | 0. | 0. | 0. | |
| _(5)_ KATE_CHAPMAN | 1 | | | | | | | _ | _ | _ | |
| DIRECTOR | 0 | Χ | | | | | | 0. | 0. | 0. | |
| | $-\frac{1}{0}$ | Х | | | | | | 0. | 0. | 0 | |
| (7) MARK GALASSI | 24.19 | Λ | | | | | | 0. | 0. | 0. | |
| CHAIR, VP, ET AL | 0 | Х | | Χ | | | | 0. | 0. | 0. | |
| (8) BDALE GARBEE | 1.25 | | | | | | | <u> </u> | <u> </u> | · · | |
| DIRECTOR | 0 | Χ | | | | | | 0. | 0. | 0. | |
| (9) MIKE LINKSVAYER | 3 | | | | | | | | | | |
| DIRECTOR | 0 | Χ | | | | | | 0. | 0. | 0. | |
| (10) ALLISON RANDAL | 4.25 | | | | | | | | | | |
| DIRECTOR | 0 | Χ | | | | | | 0. | 0. | 0. | |
| (11) ANTHONY K. SEBRO, JR. DIRECTOR | 1 | Х | | | | | | 0. | 0. | 0. | |
| (12) | | | | | | | | | | | |
| <u>(13)</u> | | | | | | | | | | | |
| <u>(14)</u> | | | | | | | | | | | |

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| | (B) (C) Position | | (D) | (E) | (F) | | | | | |
|--|---------------------------------|-----------------------------------|-----------------------|---------------------|--------------------|---------------------------------|--------------|--|---|--|
| (A) Name and title | Average hours per week | box | , unle | ss pe | erson | than is both or/trus | n an | Reportable compensation from | Reportable compensation from | Estimated amount of other |
| | (list any hours for | Individual or dire | nstitu | Officer | Key e | Highest co | Former | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | compensation from the organization and related |
| | related organiza - tions | Individual trustee or director | Institutional trustee | ₹. | Key employee | st comp | er | | | organizations |
| | below dotted line) | ustee | rustee | | × | Highest compensated employee | | | | |
| (15) | | | | | | ö | | | | |
| | | | | | | | | | | |
| (16) | | | | | | | | | | |
| (17) | | = | | | | | | | | |
| <u>(18)</u> | | | | | | | | | | |
| (19) | | | | | | | | | | |
| (20) | | | | | | | | | | |
| (21) | | | | | | | | | | |
| (22) | | | | | | | | | | |
| | | | | | | | | | | |
| (23) | | | | | | | | | | |
| (24) | | | | | | | | | | |
| (25) | | | | | | | | | | |
| 1 b Subtotal | | | | | | | > | 262,568. | 0. | 100,193. |
| c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c). | | | | | | | ▶ | <u>0.</u> 262,568. | 0. | 0. 100,193. |
| 2 Total number of individuals (including but not limited | | | | | | | ved | | | |
| from the organization 2 | | | | | | | | | | Yes No |
| 3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc. | tor, truste | e, ke | ey er | mplo | oyee | e, or | high | nest compensated | employee | . 3 X |
| For any individual listed on line 1a, is the sum of the organization and related organizations greate | | | | | | | | | | |
| the organization and related organizations greate such individual | r than \$1 | 50,00 | 00? | <i>If '</i> γ | es,' | com | iple | te Schedule J for | | . 4 X |
| 5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes | e compen ,' comple | satio te So | n fre chea | om : lule | any <i>J fo</i> | unre <i>r suc</i> | late :h p | ed organization or erson | individual | . 5 X |
| Section B. Independent Contractors | | | | | | | | | | |
| Complete this table for your five highest compensation from the organization. Report compensation. | sated indesation for | epen the c | dent alen | cor dar <u>y</u> | ntrad year | ctors endii | tha ng v | It received more the vith or within the or | nan \$100,000 of ganization's tax year | |
| (A) Name and business addr | ess | | | | | | | (B) Description of | of services | (C) Compensation |
| CHRISTOPHER LAMB PO BOX 6945 , LONDON W1A | | | | | M | | | SOFTWARE DEVE | LOPMENT | 102,000. |
| HOLGER LEVSEN BODENSTEDTSTRASSE 16 , HAMBU | RG 22765 | 5 GE | RMA | NY | | | | SOFTWARE DEVE | LOPMENT | 102,000. |
| | | | | | | | | | | |
| 2 Total number of independent contractors (including b | | ited to | o the | se I | isted | d abo | ve) | who received more | than | |
| \$100,000 of compensation from the organization | | TEEAO | 108L | 10/0 | 07/20 | | | | | Form 990 (2020) |

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Form 990 (2020) SOFTWARE FREEDOM CONSERVANCY, INC.

41-2203632

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| Par | t VI | Statement of | | | a roci | nonco or noto to an | y line in this Part V | III | | |
|--|--------|--|-------------|-------------|--------------------|----------------------|-----------------------|--|---|--|
| | | Check ii Schedul | <u>e O</u> | Contains | a res _i | ourse of riote to an | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| nts Its | 1 a | Federated campaig | ıns . | | 1 a | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | b | Membership dues. | | | 1 b | | | | | |
| S, C | С | Fundraising events | | | 1 c | | | | | |
| Sift lar | d | Related organization | ns . | | 1 d | | | | | |
| i.E | | Government grants (cont | | | 1 e | 92,600. | | | | |
| tion sr S | f | All other contributions, g similar amounts not incl | | | 1 f | 2 004 601 | | | | |
| ibur The | а | Noncash contributions in | | | - ' ' | 3,084,681. | | | | |
| d C | _ | lines 1a-1f | | | 1 g | | | | | |
| <u>೧</u> ⊭ | h | Total. Add lines 1a | -1f. | | | | 3,177,281. | | | |
| Program Service Revenue | _ | | | | | Business Code | | | | |
| eve | | SOFTWARE DEV | / <u>EL</u> | OPMENT | | 541511 | 40,000. | 40,000. | | |
| ē E | | HONORARIA_ | | | | 813319 | 3,000. | 3,000. | | |
| <u>5</u> . | C | I MOITO I TOMILL | <u>1</u> T | EM_SAL | <u>ES</u> _ | 813319 | 32. | 32. | | |
| အွ | d | | | | | | | | | |
| ram | e e | All other program s | orvi | | | | | | | |
| g. | | Total. Add lines 2a | | | | | 42 022 | | | |
| | | | | | | | 43,032. | | | |
| | 3 | Investment income (other similar amount | nts) | | enus, | • | 6,027. | 6,027. | | |
| | 4 | Income from invest | mer | nt of tax-e | exemp | t bond proceeds > | 0,027. | 0,027. | | |
| | 5 | Royalties | | | | | 3,648. | 3,648. | | |
| | | | | (i) R | eal | (ii) Personal | | | | |
| | 6 a | Gross rents | 6a | | | | | | | |
| | | Less: rental expenses | 6b | | | | | | | |
| | | Rental income or (loss) | | | | | | | | |
| | d | Net rental income of | or (lo | | | | | | | |
| | 7 a | Gross amount from | | (i) Secu | urities | (ii) Other | | | | |
| | | sales of assets other than inventory | 7a | | | | | | | |
| | b | Less: cost or other basis | | | | | | | | |
| | _ | and sales expenses | 7b 7c | | | | | | | |
| | | Gain or (loss) Net gain or (loss). | | | | | | | | |
| | | | | | Г | | | | | |
| Other Revenue | 8 a | Gross income from funda (not including \$ | raisin | g events | | | | | | |
| Ver | | of contributions reported | l on li | ne 1c). | | | | | | |
| æ | | See Part IV, line 18 | | | 8 | a | | | | |
| ē | b | Less: direct expens | ses. | | 8 | b | | | | |
| ਰੋ | С | Net income or (loss | s) fro | om fundra | aising | events | | | | |
| _ | 9 a | Gross income from gami | ng ac | tivities. | | | | | | |
| | | Gross income from gami See Part IV, line 19 | | | 9 | а | | | | |
| | | Less: direct expens | | | | b | | | | |
| | С | Net income or (loss | s) fro | om gamin | g acti | vities▶ | | | | |
| | 10 a | Gross sales of inventory, returns and allowances. | less | | | | | | | |
| | | | | | ⊢ |)a | | | | |
| | | Less: cost of goods | | | |)b | | | | |
| | С | Net income or (loss | s) irc | oni sales | UI INV | Business Code | | | | |
| Miscellaneous Revenue | 11 a | | | | | Business ooue | | | | |
| scellaneo Revenue | b | | | | | | | | | |
| ₩ Ver | | | | | | | | | | |
| Re. | q | All other revenue. | | | | | | | | |
| Ξ | - | Total. Add lines 11: | | | | ▶ | | | | |
| | | Total revenue. See | | | | | 3,229,988. | 52,707. | 0. | 0. |
| | | | | | | | | , • | | |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

| | Check if Schedule O contains a re | | | | |
|-----------|--|-----------------------|-------------------------------------|-------------------------------------|---------------------------------------|
| Do 6b, | not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | organizations and domestic governments. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | 27,000. | 27,000. | | |
| 3 | organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | 43,426. | 43,426. | | |
| 4 5 | Benefits paid to or for members | 351,785. | 191,151. | 114,632. | 46,002. |
| 6 | Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0. | 0. | 0. | 0. |
| 7 | | 252,058. | 114,891. | 120,060. | 17,107. |
| = | Pension plan accruals and contributions | 252,056. | 114,091. | 120,000. | 17,107. |
| 8 | (include section 401(k) and 403(b) employer contributions) | 9,800. | 6,117. | 2,567. | 1,116. |
| 9 | Other employee benefits | 26,389. | 14,371. | 9,685. | 2,333. |
| 10 | Payroll taxes | 39,297. | 19,604. | 15,766. | 3,927. |
| 11 | Fees for services (nonemployees): | | | | • |
| i | a Management | | | | |
| - 1 | b Legal | 76,144. | 74,254. | 1,890. | |
| (| c Accounting | 17,527. | 687. | 16,752. | 88. |
| (| d Lobbying | | | | |
| (| e Professional fundraising services. See Part IV, line 17 | 13,079. | | | 13,079. |
| 1 | f Investment management fees | | | | |
| | Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) | 5,627. | 5,627. | | 2.40 |
| | Advertising and promotion | 1,537. | 1,189. | 0.050 | 348. |
| 13 | Office expenses | 6,701. | 127. | 2,250. | 4,324. |
| 14 | Information technology | 46,747. | 31,916. | 14,242. | 589. |
| 15 | | 210 | | 21.0 | |
| 16 | Occupancy | 318. | 16 275 | 318. | |
| 17 | Travel. | 16,375. | 16,375. | | |
| 18 | expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 2,194. | 2,194. | | |
| 20 | Interest | | | | |
| 21 22 | Payments to affiliates Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 5,022. | | 5,022. | |
| 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| i | SOFTWARE DEVELOPMENT & DESIGN | 791,263. | 791,263. | | |
| ı | o INTERNSHIPS | 744,661. | 744,661. | | |
| | PROGRAM COORDINATION SERVICES | 48,366. | 48,366. | | |
| (| BAD DEBT EXPENSES | 31,553. | 6,350. | 31. | 25,172. |
| (| All other expenses | 34,764. | 7,395. | 27,334. | 35. |
| 25 | Total functional expenses. Add lines 1 through 24e | 2,591,633. | 2,146,964. | 330,549. | 114,120. |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720) | | | | |
| ВΛΛ | | | | | F 000 (0000) |

Form 990 (2020) SOFTWARE FREEDOM CONSERVANCY, INC.

41-2203632

Page **11**

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X..... (A) Beginning of year **(B)** End of year 1 295,929. Cash — non-interest-bearing..... 198,374 Savings and temporary cash investments..... 2 4,190,528. 4,833,014. Pledges and grants receivable, net..... 3 Accounts receivable, net 342,309 4 219,541 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons..... 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)..... 6 Notes and loans receivable, net..... 7 Inventories for sale or use..... 8 Prepaid expenses and deferred charges..... 9 22,957 26,650. **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10 a 10 c Investments — publicly traded securities..... 11 11 12 Investments – other securities. See Part IV, line 11..... 12 13 Investments – program-related. See Part IV, line 11..... 13 14 14 Intangible assets..... 15 Other assets. See Part IV, line 11.... 15 4,754,168. 16 5,375,134. 16 Total assets. Add lines 1 through 15 (must equal line 33).... 166,156 17 Accounts payable and accrued expenses..... 183,545 17 18 18 Grants payable 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Liabilities Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Unsecured notes and loans payable to unrelated third parties..... 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 Total liabilities. Add lines 17 through 25..... 183,545 26 166,156 Organizations that follow FASB ASC 958, check here ▶ **Fund Balances** and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 27 27 1,243,328 1,552,807. Net assets with donor restrictions..... 3,327,295 3,656,171. Organizations that do not follow FASB ASC 958, check here > and complete lines 29 through 33. Capital stock or trust principal, or current funds..... 29 Net Assets Paid-in or capital surplus, or land, building, or equipment fund..... 30 Retained earnings, endowment, accumulated income, or other funds..... 31 31 32 4,570,623. 32 5,208,978. Total liabilities and net assets/fund balances..... 5<u>,375,134</u>. 33 4,754,168. 33

BAA TEEA0111L 10/07/20 Form **990** (2020)

Audit Act and OMB Circular A-133?

Form 990 (2020) SOFTWARE FREEDOM CONSERVANCY, INC 41-2203632 Page 12 Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI..... Total revenue (must equal Part VIII, column (A), line 12)...... 229,988 2 Total expenses (must equal Part IX, column (A), line 25)..... 2 2,591,633 Revenue less expenses. Subtract line 2 from line 1 3 3 638,355 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))..... 4 4,570,623 5 Net unrealized gains (losses) on investments. 5 6 Donated services and use of facilities..... 6 7 Investment expenses 7 8 8 Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O)..... 9 9 0 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, 10 5,208,978. Part XII | Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII..... 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. Χ 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2 a If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?..... Χ 2 b If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Consolidated basis Separate basis X Both consolidated and separate basis c 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?..... Χ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.

BAA TEEA0112L 10/19/20 Form **990** (2020)

Χ

3 a

3 b

3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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 on Schedule O and describe any steps taken to undergo such audits......

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

| lame of the organization | | | | | Employer identif | fication number |
|---|---|---|--------------------------|---------------------------|---|--|
| SOFTWARE FREEDOM CONSERV | ANCY, INC. | | | | 41-22036 | 32 |
| Part I Reason for Public Cha | rity Status. (All o | rganizations must | compl | ete this | s part.) See instri | uctions. |
| he organization is not a private found | ation because it is: (| For lines 1 through 12, | check o | nly one | box.) | |
| 1 A church, convention of churche | es, or association of ch | nurches described in sect | tion 1 <mark>70</mark> (| b)(1)(A)(| i). | |
| 2 A school described in section 13 | 70(b)(1)(A)(ii). (Attach | Schedule E (Form 990 or | 990-EZ |).) | | |
| 3 A hospital or a cooperative ho | ospital service organi | ization described in sec | ction 17 | 0(b)(1)(A | A)(iii). | |
| 4 A medical research organizat | ion operated in conju | unction with a hospital (| describe | d in sec | tion 170(b)(1)(A)(iii). | Enter the hospital's |
| name, city, and state: | | | | | | |
| 5 An organization operated for section 170(b)(1)(A)(iv). (Cor | the benefit of a colle | ge or university owned | or oper | ated by | a governmental unit | described in |
| 6 A federal, state, or local gove | ernment or governme | ental unit described in s | ection 1 | 70(b)(1) |)(A)(v). | |
| An organization that normally re in section 170(b)(1)(A)(vi). (0 | eceives a substantial p Complete Part II.) | part of its support from a | governm | ental uni | it or from the general p | public described |
| 8 A community trust described | in section 170(b)(1)(| A)(vi). (Complete Part I | l.) | | | |
| 9 An agricultural research organiz | zation described in sec | ction 170(b)(1)(A)(ix) oper | ated in c | onjunctio | on with a land-grant co | llege |
| or university or a non-land-gran | | | | | | |
| university: | | | | | | |
| An organization that normally from activities related to its e investment income and unreladune 30, 1975. See section 5 | xempt functions, sub ated business taxable | oject to certain exceptio e income (less section | ns; and | (2) no r | more than 33-1/3% of | f its support from gross |
| 11 An organization organized an | nd operated exclusive | ely to test for public safe | ety. See | section | n 509(a)(4). | |
| 12 An organization organized an | nd operated exclusive | ely for the benefit of, to | perform | the fun | ctions of, or to carry | out the purposes of one |
| or more publicly supported or | ganizations describe | ed in section 509(a)(1) o | or section | n 509(a |)(2). See section 509 | (a)(3). Check the box in |
| lines 12a through 12d that de a Type I. A supporting organization | | | | | | |
| organization(s) the power to reg complete Part IV, Sections A | gularly appoint or elect | a majority of the directo | rs or trus | stees of t | the supporting organiza | ation. You must |
| b Type II. A supporting organiza management of the supporting must complete Part IV, Section | organization vested in | controlled in connection the same persons that c | with its ontrol or | support manage | ted organization(s), be the supported organiz | y having control or ation(s). You |
| c Type III functionally integrated. organization(s) (see instruction | A supporting organizat | tion operated in connection | n with, a | nd functio | onally integrated with, it | ts supported |
| d Type III non-functionally integrated. The or | rated. A supporting org | anization operated in cor | nection | with its s | supported organization | (s) that is not |
| instructions). You must comp | ation received a writte | en determination from | | that it is | a Type I, Type II, Ty | pe III functionally |
| integrated, or Type III non-fur f Enter the number of supported o | | | | | | |
| a Provide the following information | • | | | | | |
| (i) Name of supported organization | (ii) EIN | (iii) Type of organization | (iv) | s the | (v) Amount of monetary | (vi) Amount of other |
| | | (described on lines 1-10 above (see instructions)) | organizat | ion listed overning nent? | support (see instructions) | support (see instructions) |
| | | | Yes | No | | |
| | | | | | | |
| A) | | | | | | |
| В) | | | | | | |
| C) | | | | | | |
| , | | | | | | |
| D) | | | | | | |
| E) | | | | | | |
| | | | | | | |

Page 2

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

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

| Sec | tion A. Public Support | | | | | | | |
|---------------|---|--------------------------------------|--|--|--|-------------------------------------|---------------------------|--|
| | ndar year (or fiscal year nning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total | |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') | 1,810,882. | 2,213,962. | 3,078,324. | 2,510,140. | 3,177,281. | 12,790,589. | |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | , | 0. | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. | |
| | Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | 1,810,882. | 2,213,962. | 3,078,324. | 2,510,140. | 3,177,281. | 12,790,589. 3,259,981. | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 9,530,608. | |
| Sec | tion B. Total Support | | | • | • | | , , , | |
| Cale: begi | ndar year (or fiscal year nning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total | |
| 7 | Amounts from line 4 | 1,810,882. | 2,213,962. | 3,078,324. | 2,510,140. | 3,177,281. | 12,790,589. | |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 3,608. | 17,275. | 42,264. | 66,759. | 66,759. | 196,665. | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | 5,000 | | 25,510 | 20,1222 | , | 0. | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). | | | | | | 0. | |
| | Total support. Add lines 7 through 10 | | | | | | 12,987,254. | |
| 12 | Gross receipts from related activ | vities, etc. (see ins | structions) | | | 12 | 1,475,530. | |
| 13 | First 5 years. If the Form 990 is organization, check this box and | for the organization stop here | on's first, second, | third, fourth, or f | ifth tax year as a | section 501(c)(3) | ▶ □ | |
| Sec | tion C. Computation of Pul Public support percentage for 20 | blic Support P | ercentage | | | | _ | |
| | Public support percentage for 20 Public support percentage from 3 | | | | | | 73.38 % | |
| | 33-1/3% support test—2020. If t | he organization di | id not check the b | oox on line 13, an | d line 14 is 33-1/3 | 3% or more, check | 72.30 % k this box | |
| b | and stop here. The organization qualifies as a publicly supported organization. b 33-1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. | | | | | | | |
| 17a | 10%-facts-and-circumstances te or more, and if the organization the organization meets the facts | meets the facts-a | nd-circumstances | s test, check this I | box and stop here | . Explain in Part | VI how | |
| | 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and | meets the facts-a d-circumstances | nd-circumstances test. The organiza | s test, check this lation qualifies as | box and stop here a publicly support | e. Explain in Part ed organization. | VI how the ► | |
| 18 | Private foundation. If the organization | zation did not che | ck a box on line | 13, 16a, 16b, 17a | , or 17b, check th | is box and see in | structions > | |

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Schedule A (Form 990 or 990-EZ) 2020

SOFTWARE FREEDOM CONSERVANCY, INC. 41-2203632

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization

| | fails to qualify under the te | ests listed below, | please complete f | Part II.) | | | |
|-------------|---|-------------------------|---------------------------|---------------------|----------------------|--------------------|-----------------|
| Sec | tion A. Public Support | | | | | | |
| Calend 1 | lar year (or fiscal year beginning in) > Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose. | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513. | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. | | | | | | |
| c | Add lines 7a and 7b | | | | | | |
| | Public support. (Subtract line 7c from line 6.) | | | | | | |
| Sec | tion B. Total Support | | | | | | |
| Calen | dar year (or fiscal year beginning in) | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b | | | | | | |
| | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| | First 5 years. If the Form 990 is organization, check this box and | stop here | | third, fourth, or f | fifth tax year as a | section 501(c)(3) |) ► [|
| | tion C. Computation of Pu | | | 10 . | | г. | |
| | Public support percentage for 20 | • | • • | | • | | % |
| | Public support percentage from | | | | | 16 | 0/0 |
| | tion D. Computation of Inv | | | | | | |
| 17 | Investment income percentage f | • | • • • | - | *** | | 0,0 |
| | Investment income percentage f | | | | | | 0/0 |
| | 33-1/3% support tests—2020. If is not more than 33-1/3%, check | this box and sto | p here. The organ | ization qualifies | as a publicly supp | orted organization | on ▶ ∐ |
| | 33-1/3% support tests—2019. If the line 18 is not more than 33-1/3% | , check this box a | and stop here. The | e organization qu | ualifies as a public | ly supported org | anization ► |
| 20 | Private foundation. If the organi | zation did not che | ck a box on line 1 | 14, 19a, or 19b, o | check this box and | see instructions | · |

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

| | | | Yes | No |
|-----|--|-----|-----|----|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was | | | |
| 3a | described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b | 2 | | |
| | and 3c below. | 3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination. | 3b | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use. | 3с | | |
| 4a | Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. | 4b | | |
| c | : Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was | | | |
| | accomplished (such as by amendment to the organizing document). | 5a | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| С | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5с | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i> | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ). | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ). | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI . | 9a | | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI . | 9b | | |
| c | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI. | 9c | | |
| l0a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer line 10b below. | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.). | 10b | | |

Schedule A (Form 990 or 990-EZ) 2020 SOFTWARE FREEDOM CONSERVANCY, INC. 41-2203632 Page 5 Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described in line 11a above? 11b 11c C A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If 'No,' describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers 1 during the tax year. 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the 2 supporting organization. Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in **Part VI** how control or management of the 1 supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the 1 organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played 3 in this regard. Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. No Yes a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities 2b but for the organization's involvement. 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI. За **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its

3h

supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990 or 990-EZ) 2020 SOFTWARE FREEDOM CONSERVANCY, INC.

41-2203632

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| Pai | t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga | nizati | ions | |
|-----|--|---------|--|--------------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization | t on No | v. 20, 1970 (explain ir t complete Sections A | n Part VI). See through E. |
| Sec | tion A — Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3. | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Sec | tion B — Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | | |
| ā | Average monthly value of securities | 1a | | |
| t | Average monthly cash balances | 1b | | |
| | Fair market value of other non-exempt-use assets | 1c | | |
| | I Total (add lines 1a, 1b, and 1c) | 1d | | |
| 6 | Discount claimed for blockage or other factors (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d. | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 0.035. | 6 | | |
| _ 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sec | tion C — Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | | |
| 2 | Enter 0.85 of line 1. | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | | |
| 4 | 3 **** * * * * * * * * * * * * * * * * | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-functionally inte (see instructions). | grated | Type III supporting or | ganization |
| BAA | | | Schedule A (F | orm 990 or 990-EZ) 2020 |

Schedule A (Form 990 or 990-EZ) 2020

| Pa | t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (cont | inued) | |
|-----|--|--------|--------------|
| Sec | tion D - Distributions | | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | 1 | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 | |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 | |
| 4 | Amounts paid to acquire exempt-use assets | 4 | |
| 5 | Qualified set-aside amounts (prior IRS approval required — provide details in Part VI) | 5 | |
| 6 | Other distributions (describe in Part VI). See instructions. | 6 | |
| 7 | Total annual distributions. Add lines 1 through 6. | 7 | |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. | 8 | |
| 9 | Distributable amount for 2020 from Section C, line 6 | 9 | |
| 10 | Line 8 amount divided by line 9 amount | 10 | |

| Section E — Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2020 | (iii) Distributable Amount for 2020 |
|---|--------------------------------|--|---|
| 1 Distributable amount for 2020 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2020 (reasonable cause required — <i>explain in Part VI</i>). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2020 | | | |
| a From 2015 | | | |
| b From 2016 | | | |
| c From 2017 | | | |
| d From 2018 | | | |
| e From 2019 | | | |
| f Total of lines 3a through 3e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2020 distributable amount | | | |
| i Carryover from 2015 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | |
| 4 Distributions for 2020 from Section D, line 7: \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2020 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from line 4. | | | |
| 5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. | | | |
| 6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions. | | | |
| 7 Excess distributions carryover to 2021. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2016 | | | |
| b Excess from 2017 | | | |
| c Excess from 2018 | | | |
| d Excess from 2019 | | | |
| e Excess from 2020 | | | |
| DAA | | Cohodulo A /Fo | rm 990 or 990 E7) 2020 |

BAA

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

SOFTWARE FREEDOM CONSERVANCY, INC

41-2203632

Page 8

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section E, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization SOFTWARE FREEDOM CONSERVANCY, INC 41-2203632 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?... Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit?.... Yes **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?.... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1.

b Assets included in Form 990, Part X.....

| Schedule D (Form 990) 2020 SOFT | | | | 41-220 | | Page 2 |
|---|---|--|---------------------------------|------------------------------|--------------|----------|
| Part III Organizations Mainta | ining Collecti | ions of Art, Histo | rical Treasures, c | or Other Similar Ass | ets (contin | iued) |
| 3 Using the organization's acquisition items (check all that apply): | n, accession, and | other records, check a | ny of the following that i | make significant use of its | collection | |
| a Public exhibition | | d Loan o | or exchange program | | | |
| b Scholarly research | | e Other | | | | |
| c Preservation for future gene | rations | | - | | | |
| 4 Provide a description of the organize Part XIII. | zation's collections | s and explain how they | further the organization | n's exempt purpose in | | |
| 5 During the year, did the organizato be sold to raise funds rather t | ation solicit or red than to be mainta | ceive donations of art nined as part of the o | , historical treasures, | or other similar assets n? | Yes | No |
| Part IV Escrow and Custodia | al Arrangemer | nts. Complete if t | ne organization ar | | rm 990, Pa | art IV, |
| line 9, or reported an | amount on Fo | orm 990, Part X, | line 21. | | | |
| 1 a Is the organization an agent, tru on Form 990, Part X? | stee, custodian c | or other intermediary | for contributions or ot | her assets not included | Yes | □No |
| b If 'Yes,' explain the arrangement | | | | | □ | □ |
| . , | | · | | | Amount | |
| c Beginning balance | | | | 1c | | |
| d Additions during the year | | | | 1 d | | |
| e Distributions during the year | | | | 1e | | |
| f Ending balance | | | | 1f | | |
| 2a Did the organization include an a | amount on Form | 990, Part X, line 21, | for escrow or custodia | al account liability? | Yes | No |
| b If 'Yes,' explain the arrangemen | t in Part XIII. Che | eck here if the explar | ation has been provid | led on Part XIII | <u> </u> | П |
| | | | | | | |
| Part V Endowment Funds. | Complete if the | e organization an | swered 'Yes' on F | form 990, Part IV, li | ne 10. | |
| · | (a) Current yea | r (b) Prior year | (c) Two years ba | ck (d) Three years back | (e) Four yea | ars back |
| 1 a Beginning of year balance | | | | | | |
| b Contributions | | | | | | |
| c Net investment earnings, gains, and losses | | | | | | |
| d Grants or scholarships | | | | | 1 | |
| e Other expenditures for facilities and programs | | | | | | |
| f Administrative expenses | | | | | | |
| g End of year balance | | | | | | |
| 2 Provide the estimated percentage | e of the current | year end balance (lin | e 1g, column (a)) held | d as: | | |
| a Board designated or quasi-endown | nent ► | % | | | | |
| b Permanent endowment ▶ | % | | | | | |
| c Term endowment ► | % | | | | | |
| The percentages on lines 2a, 2b, a | nd 2c should equa | al 100%. | | | | |
| 3 a Are there endowment funds not in | the nossession of | the organization that a | re held and administers | ad for the | | |
| organization by: | the possession of | the organization that c | re nela ana aaministere | ou for the | Yes | No |
| (i) Unrelated organizations | | | | | 3a(i) | |
| (ii) Related organizations | | | | | 3a(ii) | |
| b If 'Yes' on line 3a(ii), are the rela | ated organization | is listed as required of | n Schedule R? | | . 3b | |
| 4 Describe in Part XIII the intende | | anization's endowme | nt funds. | | | |
| Part VI Land, Buildings, and | • • | | | | | |
| Complete if the organ | ization answe | red 'Yes' on Forr | n 990, Part IV, lin | e 11a. See Form 99 | 0, Part X, | line 10. |
| Description of property | (a) | Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book | value |
| 1 a Land | | | • | | | |
| b Buildings | | | | | | |
| c Leasehold improvements | | | | | | |
| d Equipment | | | | | | |
| e Other | | | | | | |
| Total. Add lines 1a through 1e. (Colum | nn (d) must eaua | I Form 990. Part X. o | column (B), line 10c.). | • | | Λ |

Page 2

BAA Schedule D (Form 990) 2020

| Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 2 | 25. |
|---|-----------------------------|
| 1. (a) Description of liability | (b) Book value |
| (1) Federal income taxes | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| (11) | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 25.). | • |
| 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization | n's liability for uncertain |

BAA Schedule D (Form 990) 2020 TEEA3303L 08/18/20

tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2020 SOFTWARE FREEDOM CONSERVANCY, INC. Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements..... 3,229,988. 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments..... **b** Donated services and use of facilities..... c Recoveries of prior year grants 2 c d Other (Describe in Part XIII.) e Add lines 2a through 2d. 2 e 3 Subtract line 2e from line 1..... 3 3,229,988. 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b..... **b** Other (Describe in Part XIII.) 4 b 4 c c Add lines 4a and 4b..... 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.). 5 3,229,988. Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 2,591,633. 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: **b** Prior year adjustments..... 2 b c Other losses. 2 c d Other (Describe in Part XIII.) e Add lines 2a through 2d. 2 e 3 Subtract line 2e from line 1..... 3 2,591,633.

Part XIII Supplemental Information.

4 Amounts included on Form 990. Part IX. line 25, but not on line 1:

c Add lines 4a and 4b.....

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).....

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

4 c

2,591,633

BAA Schedule D (Form 990) 2020

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

41-2203632

SOFTWARE FREEDOM CONSERVANCY, General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b.

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

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

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) PART V

| (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors | (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients | (e) If activity listed in (d) is a program service, describe specific type of service(s) in | (f) Total expenditures for and investments in the region |
|---|--|--|---|---|---|
| | | in the region | located in the region) | the region | PT V |
| CENTRAL | | | | | |
| (1) AMERICA/CARIBBEAN | | 1 | PROGRAM SERVICES | I | 4,000. |
| EAST ASIA AND THE (2) PACIFIC | | 12 | PROGRAM SERVICES | I, D, C, H | 53,402. |
| EAST ASIA AND THE | | | | , , , | , |
| (3) PACIFIC | | | GRANTS | | 6,000. |
| (4) EUROPE | | 38 | PROGRAM SERVICES | I, D, C, H, F | 672,501. |
| (5) EUROPE | | | GRANTS | | 36,000. |
| MIDDLE EAST AND NORTH | | | | | |
| (6) AFRICA | | 10 | PROGRAM SERVICES | I | 39,000. |
| (7) NORTH AMERICA | | 7 | PROGRAM SERVICES | I, E | 44,911. |
| (8) NORTH AMERICA | | | GRANTS | | 1,426. |
| RUSSIA AND | | 11 | DDOCDAM CEDUTCEC | T | 26 500 |
| (9) NEIGHBORING STATES | | 11 | PROGRAM SERVICES | I | 26,500. |
| (10) SOUTH AMERICA | | 25 | PROGRAM SERVICES | I, D | 212,922. |
| (11) SOUTH ASIA | | 83 | PROGRAM SERVICES | I, D | 257,825. |
| (12) SUB-SAHARAN AFRICA | | 41 | PROGRAM SERVICES | I, D | 140,000. |
| (13) | | | | | |
| (14) | | | | | |
| (15) | | | | | |
| (16) | | | | | |
| (17) | | | | | |
| 3 a Subtotal | | 228 | | | 1,494,487. |
| b Total from continuation sheets to Part I | | | | | |
| c Totals (add lines 3a and 3b) | 0 | 228 | | | 1,494,487. |

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

Schedule F (Form 990) 2020

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

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|---|--------------------------|--|------------|----------------------|--------------------------|---------------------------------|--|---------------------------------------|--|
| | | | | | | | | | |
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| | Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter | • |
|---|---|----------|
| _ | | |

3 Enter total number of other organizations or entities

BAA

Schedule F (Form 990) 2020

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of noncash assistance | (g) Description of noncash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|-------------------|--------------------------|---------------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
| | PART V | PART V | | | | | other) |
| (1) HARDWARE PURCHASE GRANT | EUROPE | 3 | 6,000. | WIRE TRANSFER | | | FMV |
| (2) SOFTWARE DEVELOPMENT GRANT | EAST ASIA/PACIFIC | 1 | 6,000. | WIRE TRANSFER | | | FMV |
| (3) SOFTWARE DEVELOPMENT GRANT | EUROPE | 4 | 30,000. | WIRE TRANSFER | | | FMV |
| (4) SOFTWARE DEVELOPMENT GRANT | NORTH AMERICA | 1 | 1,426. | WIRE TRANSFER | | | FMV |
| (5) | | | | | | | |
| _(6) | | | | | | | |
| (7) | | | | | | | |
| (8) | | | | | | | |
| (9) | | | | | | | |
| (10) | | | | | | | |
| (11) | | | | | | | |
| (12) | | | | | | | |
| (13) | | | | | | | |
| (14) | | | | | | | |
| (15) | | | | | | | |
| (16) | | | | | | | |
| (17) | | | | | | | |
| (18) | | | | | | | |
| BAA | | | | | | Schedule F | (Form 990) 2020 |

Schedule F (Form 990) 2020 SOFTWARE FREEDOM CONSERVANCY, INC 41-2203632 Page 4 Part IV Foreign Forms Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926). X No Yes Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Poreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) X No Yes Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)..... X No Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621). Yes X No Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) X No Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990) X No Yes

BAA TEEA3505L 09/16/20 Schedule F (Form 990) 2020

Part V Supplemental Information

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

PART I. LINE 2 - GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE US

ORGANIZATION ESTABLISHES VOLUNTEER COMMITTEES TO COORDINATE EACH OF OUR PROJECTS AND INITIATIVES. THE COMMITTEE EVALUATES ALL GRANT REQUESTS BASED ON VARIOUS FACTORS, INCLUDING BUT NOT LIMITED TO WHETHER THE ACTIVITY WILL HAVE EDUCATIONAL AND PUBLIC BENEFIT IMPACT. ALL GRANTEES MUST SUBMIT REPORTS OF THEIR WORK WHICH ARE REVIEWED BY THE COMMITTEE AND STAFF.

TRAVEL ASSISTANCE IS ALWAYS CARRIED OUT IN ACCORDANCE WITH THE WRITTEN ORGANIZATION
TRAVEL POLICY WHICH IS PUBLISHED ON OUR WEBSITE AT

HTTPS://SFCONSERVANCY.ORG/PROJECTS/POLICIES/CONSERVANCY-TRAVEL-POLICY.HTML
PRIOR TO PAYMENT, THE REPORTS AND EXPENDITURES ARE REVIEWED BY AT LEAST ONE VOLUNTEER
BOARD MEMBER.

PART I - ADDITIONAL SUPPLEMENTAL INFORMATION

PART I, COLUMN 3(E): WE HAVE CODED PROGRAM SERVICES IN EACH REGION BY A SINGLE LETTER AND DESCRIBE EACH HEREIN:

"C" MEANS "CONFERENCES", WHICH INDICATES THAT EITHER A STAFF PERSON OR VOLUNTEER
RECEIVED TRAVEL EXPENSE REIMBURSEMENT TO SPEAK AT AND/OR ATTEND A CONFERENCE IN THE
REGION, OR WE ASSISTED IN ORGANIZING A CONFERENCE OR EVENT IN THAT REGION.

"D" MEANS "SOFTWARE DEVELOPMENT", WHICH INDICATES THAT WE FUNDED A CONTRACTOR IN THAT REGION TO PERFORM SOFTWARE DEVELOPMENT SERVICES AS PART OF WORK DESCRIBED IN FORM 990, PART III, 4(A)

"E" MEANS "EMPLOYEE WAGES", WHICH REFERS TO OUR SINGLE EMPLOYEE IN CANADA, WHO WORKS REMOTELY FOR OUR ORGANIZATION IN THE USA

"F" MEANS "BAD DEBT DUE TO FUNDRAISING"; WE HAD A LARGE DONOR IN THIS REGION RENEGE ON A DONATION PLEDGE AND IT WAS PROCESSED AS A BAD DEBT EXPENSE.

"H" MEANS "HARDWARE", WHICH INDICATES EITHER A PURCHASE OF COMPUTER HARDWARE IN THAT REGION FOR USE IN THE USA, OR PURCHASING COMPUTER HARDWARE FOR A VOLUNTEER IN THAT REGION.

BAA TEEA3504L 09/16/20 Schedule F (Form 990) 2020

Part V Supplemental Information

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

PART I - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

"I" MEANS "INTERNSHIP", WHICH INDICATES THAT WE FUNDED AN INTERN IN THIS REGION AS PART OF ONE OF OUR INTERNSHIP PROGRAMS DESCRIBED IN FORM 990, PART III, 4(B)

PART I, LINE 3F - INVESTMENTS & EXPENDITURES PER REGION

ALL EXPENSES FOR THE TAX WERE INCLUDED IN EXPENDITURES. ORGANIZATION HAS NO FOREIGN INVESTMENTS.

PART III, LINE 1 - METHOD OF ACCOUNTING

AS PART OF THE GRANT REVIEW PROCESS DESCRIBED ABOVE, THE VOLUNTEER COMMITTEE DETERMINED THAT THE WORK DONE FOR EACH SOFTWARE DEVELOPMENT GRANT WAS PAID NO MORE THAN PREVAILING MARKET RATES FOR SOFTWARE DEVELOPMENT IN THAT FIELD. FOR HARDWARE GRANTS, NO MORE THAN PREVAILING MARKET RATES FOR PERSONAL COMPUTER PURCHASES WERE PROVIDED.

PART III, LINE 1 - ESTIMATED NUMBER OF RECIPIENTS

NUMBER OF RECIPIENTS IS COUNTED EXACTLY.

BAA TEEA3504L 09/16/20 Schedule F (Form 990) 2020

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

| Name of the organization SOFTWARE FREEDOM CONSERVANCY, INC. | Employer identification number 41-2203632 |
|--|---|
| Part I General Information on Grants and Assistance | 41 2203032 |
| Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. | XYes No |
| Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional spanning. | |
| | (g) Description of oncash assistance (h) Purpose of grant or assistance |
| <u>(1)</u> | |
| (2) | |
| (3) | |
| <u>(4)</u> | |
| (5) | |
| (6) | |
| | |
| | |
| | |
| 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 3 Enter total number of other organizations listed in the line 1 table. | |

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

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of noncash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---------------------------------|---------------------------------|--------------------------|----------------------------------|---|---------------------------------------|
| 1 SOFTWARE DEVELOPMENT | 5 | 27,000. | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION

ORGANIZATION REQUIRES A WRITTEN AGREEMENT WITH ALL GRANTEES THAT EXPLAIN THE WORK EXPECTED UNDER THE GRANT. GRANT PERIOD IS CLEARLY DEFINED IN THAT AGREEMENT. AT THE END OF THE GRANT PERIOD OR ANNUALLY (WHICHEVER IS SHORTER), THE GRANTEE MUST PROVIDE A WRITTEN REPORT OF WORK ACCOMPLISHED. AT THE END OF THE GRANT PERIOD, GRANTEES MUST PUBLICLY PUBLISH EITHER (A) A REPORT ABOUT THE GRANT, OR (B) THE WORK COMPLETED UNDER THE GRANT. USUALLY, THAT WORK IS FREELY LICENSED SOFTWARE AVAILABLE FOR THE PUBLIC.

BAA Schedule I (Form 990) 2020

SOFTWARE FREEDOM CONSERVANCY, INC.

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service **Compensation Information**

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

41-2203632

| Par | rt I Questions Regarding Compensation | | | | |
|-----|--|---|------|----|----|
| | | | Ye | es | No |
| 1 a | a Check the appropriate box(es) if the organization provided any of the for VII, Section A, line 1a. Complete Part III to provide any relevant in | llowing to or for a person listed on Form 990, Part formation regarding these items. | | | |
| | First-class or charter travel | lousing allowance or residence for personal use | | | |
| | Travel for companions | Payments for business use of personal residence | | | |
| | Tax indemnification and gross-up payments | lealth or social club dues or initiation fees | | | |
| | Discretionary spending account | Personal services (such as maid, chauffeur, chef) | | | |
| Ł | b If any of the boxes on line 1a are checked, did the organization follow a reimbursement or provision of all of the expenses described above | | l b | | |
| 2 | Did the organization require substantiation prior to reimbursing or a trustees, and officers, including the CEO/Executive Director, regard | allowing expenses incurred by all directors, ding the items checked on line 1a? | 2 | | |
| 3 | Indicate which, if any, of the following the organization used to establish Executive Director. Check all that apply. Do not check any boxes for establish compensation of the CEO/Executive Director, but explain | n the compensation of the organization's CEO/ or methods used by a related organization to in Part III. | | | |
| | Compensation committee V | Vritten employment contract | | | |
| | Independent compensation consultant X C | Compensation survey or study | | | |
| | X Form 990 of other organizations | Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed on Form 990, Part VII, Section organization or a related organization: | | | | |
| | a Receive a severance payment or change-of-control payment? | <u> </u> | la . | | X |
| | b Participate in or receive payment from a supplemental nonqualified | · | l b | | X |
| (| c Participate in or receive payment from an equity-based compensat If 'Yes' to any of lines 4a-c, list the persons and provide the applic | <u> </u> | ł c | | X |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations mus | st complete lines 5-9. | | | |
| 5 | For persons listed on Form 990, Part VII, Section A, line 1a, did the org contingent on the revenues of: | anization pay or accrue any compensation | | | |
| a | a The organization? | | ā | | Χ |
| b | b Any related organization? | ! | 5 b | | Χ |
| | If 'Yes' on line 5a or 5b, describe in Part III. | | | | |
| 6 | For persons listed on Form 990, Part VII, Section A, line 1a, did the org contingent on the net earnings of: | anization pay or accrue any compensation | | | |
| a | a The organization? | | 6 a | | Χ |
| k | b Any related organization? | | 6 b | | Χ |
| | If 'Yes' on line 6a or 6b, describe in Part III. | | | | |
| 7 | For persons listed on Form 990, Part VII, Section A, line 1a, did th payments not described on lines 5 and 6? If 'Yes,' describe in Part | e organization provide any nonfixed | , | | Х |
| 8 | Were any amounts reported on Form 990, Part VII, paid or accrued to the initial contract exception described in Regulations section 53 If 'Yes,' describe in Part III | 3.4958-4(a)(3)? | 3 | | Х |
| 9 | If 'Yes' on line 8, did the organization also follow the rebuttable presump section 53.4958-6(c)? | otion procedure described in Regulations | , | | |

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

Schedule J (Form 990) 2020

41-2203632

Page 2

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

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

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

| (A) Name and Title | | (B) Breakdown | of W-2 and/or 1099-MIS | SC compensation | (C) Detirement | (D) Novetovolska | (F) Total of | (F) Common position |
|--------------------|------|-----------------------|-------------------------------------|---|--|--------------------------------|--------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns(B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
| KAREN M. SANDLER | (i) | 155,805. | 0. | 0. | 16,724. | 43,380. | 215,909. | 0. |
| 1 PRES & ED | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| 2 | (ii) | | T | | T | | T | |
| | (i) | | | | | | | |
| 3 | (ii) | | T | | T | | T | |
| | (i) | | | | | | | |
| 4 | (ii) | | T | | T | | T | |
| | (i) | | | | | | | |
| 5 | (ii) | | T | | T | | T | |
| | (i) | | | | | | | |
| 6 | (ii) | | T | | T | | T | |
| | (i) | | | | | | | |
| 7 | (ii) | | | | T | | T | |
| | (i) | | | | | | | |
| 8 | (ii) | | | | T | | T | |
| | (i) | | | | | | | |
| 9 | (ii) | | | | T | | T | |
| | (i) | | | | | | | |
| 10 | (ii) | | | | | | | |
| | (i) | | | | | | | |
| 11 | (ii) | | | | | | | |
| | (i) | | | | | | | |
| 12 | (ii) | | | | | | | |
| | (i) | | | | | | | |
| 13 | (ii) | | | | | | | |
| | (i) | | | | | | | |
| 14 | (ii) | | | | † | | | |
| | (i) | | | | | | | |
| 15 | (ii) | | † <u>-</u> | | † | | t | |
| | (i) | | | | | | | |
| 16 | (ii) | | † | | † | | t | |
| PAA | 1,, | | TFFA4102L 09/25 | 120 | 1 | | Cahadula | I (Form 990) 2020 |

BAA

Schedule J (Form 990) 2020

Schedule J (Form 990) 2020 SOFTWARE FREEDOM CONSERVANCY, INC.

41-2203632

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Part III Supplemental Information

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

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SOFTWARE FREEDOM CONSERVANCY, INC.

Employer identification number

41-2203632

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

FACILITATING AND PARTICIPATING IN FOSS CONFERENCES: DURING THE TAX YEAR OF 2020, CONSERVANCY PLANNED, ORGANIZED AND/OR RAN A FEW CONFERENCES EARLY IN 2020. HISTORICALLY, WE RAN AND ORGANIZED MANY EVENTS AND CONFERENCES FOR THE FOSS COMMUNITY THROUGHOUT THE YEAR, AND SENT STAFF AND VOLUNTEERS TO MANY OTHER EVENTS. DUE TO THE GLOBAL PANDEMIC, WE INDEFINITELY CURTAILED THIS ACTIVITY BEGINNING IN MARCH 2020. WE DID PARTICIPATE IN ONLINE EVENTS.

FORM 990, PART VI, LINE 1A - EXPLANATION OF MATERIAL DIFFERENCES OF VOTING RIGHTS

ORGANIZATION'S BOARD OF DIRECTORS CHARTED AN EVALUATION COMMITTEE (SEE

HTTPS://SFCONSERVANCY.ORG/ABOUT/EVAL-COMMITTEE/). THE BOARD DELEGATES TO THAT

COMMITTEE THE AUTHORITY TO EVALUATE FOSS PROJECTS THAT HAVE APPLIED TO BECOME PART

OF THE ORGANIZATION. THE EVALUATION COMMITTEE IS AUTHORIZED TO ENGAGE WITH

PROSPECTIVE PROJECTS AND ACCEPT PROJECTS ON THE BOARD'S BEHALF. THE BOARD OF

DIRECTORS DELEGATES TO THAT COMMITTEE FULL AUTHORITY TO EVALUATE AND ADD NEW FOSS

PROJECTS WITHOUT DIRECT BOARD APPROVAL. DURING THE TAX YEAR, THE FOLLOWING PEOPLE

SERVED ON CONSERVANCY'S EVALUATION COMMITTEE: JEREMY ALLISON, TOM CALLAWAY, MARK

GALASSI, KARL FOGEL, BDALE GARBEE, BRADLEY M. KUHN, MIKE LINKSVAYER, TOM MARBLE, DEB

NICHOLSON, AND KAREN M. SANDLER. SANDLER IS OFFICER, BUT NOT A DIRECTOR. CALLAWAY,

FOGEL, AND MARBLE ARE NOT DIRECTORS. NICHOLSON WAS AN EMPLOYEE DURING THE 2019 TAX

YEAR.

THE BOARD OF DIRECTORS ALSO CHARTERED A FINANCE SUBCOMMITTEE OF THE DIRECTORS, THAT MEETS QUARTERLY TO APPROVE MINOR ADJUSTMENTS TO THE BUDGET, ADVISE STAFF ABOUT INVESTMENT POLICY, AND REVIEW AND APPROVE THE ANNUAL AUDIT BEFORE 990 FILING. THE FINANCE SUBCOMMITTEE IS CURRENTLY: BDALE GARBEE, MIKE LINKSVAYER, MARTIN MICHLMAYR,

Name of the organization

SOFTWARE FREEDOM CONSERVANCY, INC.

Employer identification number
41-2203632

FORM 990, PART VI, LINE 1A - EXPLANATION OF MATERIAL DIFFERENCES OF VOTING RIGHTS (CONTINUED)

MEETINGS EX-OFFICIO.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE FINANCE SUBCOMMITTEE MEETS DIRECTLY WITH THE AUDITORS TO REVIEW THE AUDIT REPORT AND THE 990. THE FINANCE SUBCOMMITTEE IMMEDIATELY FILES A REPORT OF THAT MEETING BY EMAIL TO THE FULL BOARD. BEFORE CONSERVANCY STAFF FILE THE 990, A FINAL DRAFT IS SUBMITTED TO THE DIRECTORS. THE DIRECTORS REVIEW THE 990 AT THAT TIME, AND CAN RAISE ANY URGENT ISSUES IMMEDIATELY WITH EACH OTHER AND STAFF BY EMAIL OR TELEPHONE. FORMAL APPROVAL OF THE 990 AND AUDIT REPORT OCCURS AT THE NEXT REGULAR MEETING OF THE DIRECTORS.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE BOARD OF DIRECTORS FORMALLY ADOPTED AND CONSENTED TO THE ORGANIZATION'S CONFLICT

OF INTEREST, WHISTLEBLOWER, AND DOCUMENT RETENTION POLICY ON 16 MARCH 2012. THE

POLICES ARE AVAILABLE FOR PUBLIC INSPECTION AND COMMENT. THE ORGANIZATION'S POLICY

IS TO REMIND THE BOARD ANNUALLY THAT THE CONFLICT OF INTEREST POLICY IS IN EFFECT

AND ANY WRITTEN CONFLICTS DISCLOSURES ARE COLLECTED ANNUALLY BY A DIRECTOR.

VOLUNTEERS WHO HELP THE ORGANIZATION SELECT CONTRACTORS ARE REQUIRED TO ADHERE TO

THE CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT
ALL FULL-TIME EMPLOYEES (INCLUDING ANY KEY EMPLOYEES OR FULL-TIME COMPENSATED
OFFICERS) ARE EQUALLY ELIGIBLE FOR THE SAME BENEFITS PACKAGE, WHICH INCLUDES
PAID-TIME-OFF, 403(B) (INCLUDING MATCHING FUNDS), MEDICAL, VISION AND DENTAL
BENEFITS PACKAGE. THAT BENEFITS PACKAGE, AND CHANGES THERETO, ARE DISCUSSED AND
APPROVED BY THE BOARD OF DIRECTORS. ANY EMPLOYEE SERVING ON THE BOARD OF DIRECTORS
OR PRESENT AT THE MEETING RECUSE THEMSELVES FROM THAT VOTE AND THE BOARD CONSIDERS
BENEFITS PACKAGE CHANGES ONLY IN EXECUTIVE SESSION WITHOUT ANY EMPLOYEES PRESENT.
KAREN SANDLER, THE CURRENT PRESIDENT AND EXECUTIVE DIRECTOR, NEGOTIATED HER

Name of the organization

SOFTWARE FREEDOM CONSERVANCY, INC.

Employer identification number

41-2203632

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT (CON COMPENSATION PACKAGE WITH AN OUTSIDE DIRECTOR AND BOARD CHAIRPERSON, MARK GALASSI, WHEN HIRED. THAT COMPENSATION PACKAGE WAS THEN DISCUSSED AND APPROVED BY THE OUTSIDE DIRECTORS. CHANGES TO SANDLER'S COMPENSATION POLICY ARE MADE ONLY WITH EXECUTIVE-SESSION DISCUSSION BY OUTSIDE DIRECTORS. SANDLER'S SUBSTANTIAL SALARY INCREASE IN THE 2017 TAX YEAR WAS AGAIN NEGOTIATED WITH GALASSI AND DISCUSSED IN EXECUTIVE SESSION BY OUTSIDE DIRECTORS. SANDLER RECEIVES NOW AND HAS ALWAYS RECEIVED THE SAME BENEFITS PACKAGE AS ALL OTHER EMPLOYEES (DESCRIBED ABOVE), AND RECEIVES COLAS USING THE SAME FORMULA AS OTHER EMPLOYEES.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

ALL FULL-TIME EMPLOYEES (INCLUDING ANY KEY EMPLOYEES OR FULL-TIME COMPENSATED

OFFICERS) ARE EQUALLY ELIGIBLE FOR THE SAME BENEFITS PACKAGE, WHICH INCLUDES

PAID-TIME-OFF, 403(B) (INCLUDING MATCHING FUNDS), MEDICAL, VISION AND DENTAL

BENEFITS PACKAGE. THAT BENEFITS PACKAGE, AND CHANGES THERETO, ARE DISCUSSED AND

APPROVED BY THE BOARD OF DIRECTORS. ANY EMPLOYEE SERVING ON THE BOARD OF DIRECTORS

OR PRESENT AT THE MEETING RECUSE THEMSELVES FROM THAT VOTE AND THE BOARD CONSIDERS

BENEFITS PACKAGE CHANGES ONLY IN EXECUTIVE SESSION WITHOUT ANY EMPLOYEES PRESENT.

BRADLEY M. KUHN, POLICY FELLOW, IS ALSO AN OFFICER AND DIRECTOR. HIS ORIGINAL

COMPENSATION PACKAGE (IN 2010) WAS NEGOTIATED WITH GALASSI AND APPROVED IN EXECUTIVE

SESSION BY THE BOARD, USING DATA FROM FORM 990S OF SIMILAR ORGANIZATIONS AND OTHER

SALARY RESEARCH DATA KUHN RECEIVES COLAS USING USING THE SAME FORMULA AS OTHER

STAFF, SINCE THAT TIME. KUHN RECEIVES THE SAME BENEFITS PACKAGE (DESCRIBED ABOVE)

AS ALL OTHER EMPLOYEES.

CONSERVANCY'S FORM 990S, AUDITOR REPORTS, ARTICLES OF INCORPORATION & BY-LAWS ARE AVAILABLE ON CONSERVANCY'S WEBSITE AT: https://sfconservancy.org/about/filings/

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

OTHER KEY POLICY DOCUMENTS ARE DEVELOPED IN PUBLIC AT:

Schedule O (Form 990 or 990-EZ) (2020)

Page 2

Name of the organization

SOFTWARE FREEDOM CONSERVANCY, INC.

Employer identification number
41-2203632

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE (CONTINUED)

HTTPS://K.SFCONSERVANCY.ORG/POLICIES

FORM 990, PART VII - COMPENSATION EXPLANATION

BRADLEY M. KUHN

AMOUNTS ON PART VII, LINE 3(F) & 7(F) ARE FOR SANDLER AND KUHN'S HEALTH, DENTAL, WORKER'S COMP INSURANCE, DISABILITY INSURANCE PREMIUMS, AS WELL AS FUNDS FOR HEALTHCARE REIMBURSEMENT ARRANGEMENTS, 403(B) AND A FEW IMMATERIAL INCIDENTAL EXPENSES.

KAREN M. SANDLER

AMOUNTS ON PART VII, LINE 3(F) & 7(F) ARE FOR SANDLER AND KUHN'S HEALTH, DENTAL, WORKER'S COMP INSURANCE, DISABILITY INSURANCE PREMIUMS, AS WELL AS FUNDS FOR HEALTHCARE REIMBURSEMENT ARRANGEMENTS, 403(B) AND A FEW IMMATERIAL INCIDENTAL EXPENSES.



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| Financial Statements | |
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Independent Auditor's Report

To the Board of Directors of Software Freedom Conservancy, Inc.

We have audited the accompanying financial statements of Software Freedom Conservancy, Inc., which comprise the Statement of Financial Position as of February 28, 2021, and the related Statements of Activities, Functional Expenses and Cash Flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Software Freedom Conservancy, Inc., as of February 28, 2021, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited Software Freedom Conservancy, Inc., Organization's 2020 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated January 13, 2021. In our opinion, the summarized comparative information presented herein as of and for the year ended February 29, 2020, is consistent, in all material respects, with the audited financial statements from which it has been derived.

January 12, 2022

Dary Mirenday

Software Freedom Conservancy, Inc. Statement of Financial Position February 28, 2021 (With Summarized Financial Information for 2020)

| | | February 28, <u>2021</u> | February 29, <u>2020</u> |
|--|----------------|---|---|
| Assets | | | |
| Current Assets Cash Receivable from PayPal Prepaid expenses Contributions receivable Security deposit Total Current Assets | \$ | 5,128,943 3,904 26,650 215,037 600 5,375,134 | \$ 4,388,902 2,267 22,957 339,442 600 4,754,168 |
| Total Assets | \$ | 5,375,134 | \$ 4,754,168 |
| Liabilities and Net Assets Liabilities Current Liabilities Accounts payable and accrued expenses Total Current Liabilities | \$ | 166,156 166,156 | \$ 183,545 183,545 |
| Net Assets | | | |
| Net Assets Without donor restrictions With donor restrictions Total Net Assets | Si | 1,552,807 3,656,171 5,208,978 | 1,243,328 3,327,295 4,570,623 |
| Total Liabilities and Net Assets | \$ | 5,375,134 | \$ 4,754,168 |

Software Freedom Conservancy, Inc. Statement of Activities For the Year Ended February 28, 2021 (With Summarized Financial Information for 2020)

| Support and Revenue | Without Donor <u>Restrictions</u> | With Donor Restrictions | Total Year Ended February 28, <u>2021</u> | Year Ended February 29, 2020 |
|--|--|--|---|--|
| Contributions Software development Conference registration fees Interest and currency conversion gains Conference sponsorship income Trademark licensing income Book royalties Promotional items sales Realized gain (loss) on currency conversion Honoraria | \$ 1,100,206 - - 7,748 - 294 68 3 (1,721) 300 | \$ 2,077,075 40,000 - - 2,654 632 29 - 2,700 | \$ 3,177,281 40,000 - 7,748 - 2,948 700 32 (1,721) 3,000 | \$ 2,510,140 239,994 117,314 66,759 33,275 4,820 807 289 (2,791) |
| | 1,106,898 | 2,123,090 | 3,229,988 | 2,970,607 |
| Net Assets released from restrictions: Satisfaction of program restrictions Total Support and Revenue | 1,794,214 2,901,112 | (1,794,214) | 3,229,988 | 2,970,607 |
| Expenses | | | | |
| Program services | 2,146,964 | | 2,146,964 | 2,121,477 |
| Supporting services: General and administrative Fund-raising Total Supporting services | 330,549 114,120 444,669 | | 330,549 114,120 444,669 | 341,621 73,976 415,597 |
| Total Expenses | 2,591,633 | 6 2 | 2,591,633 | |
| Change in Net Assets | 309,479 | 328,876 | 638,355 | 2,537,074 433,533 |
| Beginning Net Assets | 1,243,328 | 3,327,295 | 4,570,623 | 4,137,090 |
| Ending Net Assets | \$ 1,552,807 | \$ 3,656,171 | \$ 5,208,978 | \$ 4,570,623 |

Software Freedom Conservancy, Inc. Statement of Functional Expenses Year Ended February 28, 2021 (With Summarized Financial Information for 2020)

| | _ | Program Services | | Supportin | g Se | rvices | | | |
|---|----|---------------------|-----------|---|------|------------------|--|---|-------------------------------|
| | | | <u>Ac</u> | General and <u>Administrative</u> <u>Fund-raising</u> | | 22 | Total Year Ended February 28, <u>2021</u> | Year Ended February 29, <u>2020</u> | |
| Salaries and wages | \$ | 268,044 | \$ | 206,388 | \$ | 53,534 | \$ | 527,966 | \$ 476,776 |
| Employee benefits | | 58,485 | | 35,452 | | 13,024 | | 106,961 | 130,054 |
| Internships | | 744,661 | | - | | 2 | | 744,661 | 486,000 |
| Payroll taxes | | 19,604 | | 15,766 | | 3,927 | | 39,297 | 38,081 |
| Technology expenses | | 31,916 | | 14,242 | | 589 | | 46,747 | 51,860 |
| Bad debt expenses | | 6,350 | | 31 | | 25,172 | | 31,553 | 57,161 |
| Copyleft license enforcement | | 18,526 | | - | | - | | 18,526 | 19,138 |
| Office supplies and other | | 127 | | 2,250 | | 4,324 | | 6,701 | 1,811 |
| Travel, meals and lodging | | 380 | | · | | <u> -</u> | | 2 | 3,959 |
| Taxes and government assessments | | 3,462 | | 1,325 | | 35 | | 4,822 | 7,684 |
| Bank charges and other fees | | (:(| | 26,008 | | 2 | | 26,008 | 27,128 |
| Membership | | 198 | | (4) | | - | | 198 | 99 |
| Insurance | | - | | 5,022 | | | | 5,022 | 4,157 |
| Payroll processing fees | | 687 | | 1,886 | | 88 | | 2,661 | 2,612 |
| Occupancy | | 1 2 02 | | 318 | | Vi <u>a</u> Y | | 318 | 411 |
| Mentoring student software developers | | 1,627 | | - | | - | | 1,627 | 4,750 |
| Grants | | 70,426 | | (=) | | - | | 70,426 | 110,118 |
| Professional services: | | | | | | | | SAFEL SAFE TARE | 34354040 6 .00 - 60.00 |
| Software development and design | | 791,263 | | 120 | | | | 791,263 | 619,810 |
| Accounting and audit | | - | | 14,866 | | _ | | 14,866 | 14,087 |
| Promotional | | 1,189 | | - | | 348 | | 1,537 | 8,724 |
| Non-license enforcement legal fees | | 59,464 | | 1,890 | | 1 | | 61,354 | 31,604 |
| Graphic design | | 4,000 | | - | | : = : | | 4,000 | 11,056 |
| Program Coordination | | 48,366 | | 5,105 | | 2,906 | | 56,377 | 60,157 |
| Fundraising Services | | - | | - | | 10,173 | | 10,173 | 9,018 |
| | | 2,128,395 | | 330,549 | | 114,120 | | 2,573,064 | 2,176,255 |
| Direct conference expenses: | | | | | | | | | |
| Travel, meals and lodging | | 16 275 | | | | | | | |
| Venue rental | | 16,375 | | - | | -70 | | 16,375 | 183,715 |
| Audio / video | | 7 | | | | (#J) | | - | 106,281 |
| | | - | | * | | - | | - | 32,008 |
| Bank charges and other fees Services | | 194 | | - | | - | | 194 | 2,170 |
| | | 99 | | 8 | | | | 99 | 10,139 |
| Materials | | 1,901 | | - | | · | | 1,901 | 5,996 |
| T-shirts | | XX X | | - | | - | | - | 1,506 |
| Other conference expenses | - | 10 500 | | | | | | | 19,004 |
| | | 18,569 | _ | | | | - | 18,569 | 360,819 |
| Total Expenses | \$ | 2,146,964 | \$ | 330,549 | \$ | 114,120 | \$ | 2,591,633 | \$ 2,537,074 |



Software Freedom Conservancy, Inc. Statement of Cash Flows For the Year Ended February 28, 2021 (With Summarized Financial Information for 2020)

| | | Year Ended February 29, 2021 | Year Ended February 29, <u>2020</u> |
|--|----|------------------------------------|---|
| Cash Flows from Operating Activities | | | |
| Change in Net Assets Adjustments to reconcile changes in net assets to net cash provided by (used in) operating activities: (Increase) decrease in operating assets: | \$ | 638,355 | \$ 433,533 |
| Receivable from PayPal Prepaid expenses Contributions receivable | 20 | (1,638) (3,693) 124,406 | (2,039) (9,301) |
| Increase (decrease) in operating liabilities: Accounts payable and accrued expenses | | (17,389) | 283,532 (148,690) |
| Unearned income - advance program registration fees | _ | 710.011 | (28,548) |
| Net cash provided by operating activities | | 740,041 | 528,487 |
| Net Increase in Cash | | 740,041 | 528,487 |
| Beginning Cash | | 4,388,902 | 3,860,415 |
| Ending Cash | \$ | 5,128,943 | \$ 4,388,902 |

Note 1 - Nature of Activities and Summary of Significant Accounting Policies

Nature of Activities

Software Freedom Conservancy, Inc. (the Organization) is a not - for - profit organization that helps promote, improve, develop, and defend Free, Libre, and Open Source Software (FLOSS) projects. Conservancy provides a nonprofit home and infrastructure for FLOSS projects. This allows FLOSS developers to focus on what they do best — writing and improving FLOSS for the general public.

FLOSS projects whose applications are accepted become part of the Organization (akin to a separate department of a large agency). Once joined, the "member project" receives most of the benefits of existing as a non-profit corporate entity without engaging in the arduous work of forming a separate, new organization. The Organization aggregates the work of running a FLOSS non - profit for its many members.

The Organization provides many important services for its member projects. Member projects can take directed donations, which allows donors to earmark their donations for the benefit of a specific FLOSS project. The Organization provides fiscal oversight to ensure that these funds are spent in a manner that advances the project and fits with the Organization's 501(c)(3) mission to promote, advance, and defend software freedom.

If the member project's leaders want, the Organization can also hold other assets and titles on behalf of the projects, such as copyrights, trademarks, domain names, online hosting accounts, and title and ownership of physical hardware. Also at discretion of the project's leaders, the Organization can assist in defending the rights represented in these assets. For example, the Organization is available to assist member projects in enforcing the terms of the projects' FLOSS license.

Finally, developers of the Organization's member projects, when operating in their capacity as project leaders, could receive some protection from personal liability for their work on the project.

Software Freedom Conservancy, Inc., was incorporated in the State of New York in 2006.

Basis of Accounting

The financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Financial Statement Presentation

The Organization reports information regarding its financial position and activities according to two classes of net assets: without donor restrictions and donor restricted net assets.

Net assets without donor restrictions: Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the organization. These net assets may be used at the discretion of the Organization's management and the board of directors. Donor restricted contributions that are expended for their restricted purpose in the same reporting period as received may be recorded as without donor restrictions.

Net assets with donor restrictions: Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Organization or by the passage of time. Other donor restrictions are perpetual in nature, where by the donor has stipulated the funds be maintained in perpetuity.



Note 1 - (Continued)

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Functional Allocation of Expenses

The costs of providing various program and other activities have been summarized on a functional basis in the statement of activities. Certain expenses have been classified based on direct expenditures, other cost were allocated based on estimates made by management such as time spent, quantities of items consumed and the proportion of physical space used.

Cash

Cash consists of demand deposit accounts held at major financial institutions and may at times exceed the insurable amount. Management believes it mitigates its risk by investing in a major financial institution and in funds that are currently U.S. federal government insured. Recoverability of investments is dependent upon the performance of the issuer.

Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all highly liquid investments purchased with original maturities of three months or less when purchased to be cash equivalents.

Revenue Recognition

Contribution Revenue

Contribution revenue is recognized when the donor makes a promise to give to the Organization that is in substance, unconditional. Contributions that are restricted by the donor are reported as increases in net assets without donor restrictions if the restriction expires in the same reporting period in which the Contribution revenue is recognized. All other donor restricted contributions are reported as increases in donor restricted net assets. When a restriction expires donor restricted net assets are reclassified to net assets without donor restrictions.

Revenue from Contracts with Customers

Revenue is recognized when control of the promised goods or services is transferred to our customers, in an amount that reflects the consideration the Organization expects to be entitled to in exchange for those goods or services.

From time to time the organization provides software development services. Performance obligations are satisfied and the related revenue is recognized upon completion and delivery of the contract specified services.

Reclassifications

Certain reclassifications have been made to prior year amounts to conform to the current year presentations.



Note 1 - (Continued)

Contributions Receivable

Contributions receivable are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectible amounts through adjustments to valuation allowances based on its assessment of the current status of individual receivables. Balances still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance. On February 28, 2021, the allowance for doubtful accounts was \$0.

Contributions receivable are expected to be collected within the current operating cycle of one year.

Concentrations

Approximately 47% of contributions receivable (\$100,000) was due from one contributor on February 28, 2021. The contribution was paid on March 16, 2021.

Income Taxes

The Organization is exempt from federal income taxes under section 501(c)(3) of the Internal Revenue Code. Therefore, no provision for income taxes has been provided for in the accompanying financial statements.

The Organization's policy is to record interest expense and penalties in operating expenses. As of February 28, 2021, there was no interest and penalties expense recorded and no accrued interest and penalties.

Contributed Services

Contributed services are recognized as contributions if the services (1) create or enhance nonfinancial assets or (2) require specialized skills, are performed by people with those skills, and would otherwise be purchased by the Organization. Volunteers provide various services that are not recognized as contributions in the financial statements since the recognition criteria were not met.

Subsequent Events

In preparing these financial statements, the Organization has evaluated subsequent events and transactions for potential recognition or disclosure in the financial statements through January 12, 2022 the date the financial statements were available to be issued.

COVID-19

The COVID-19 outbreak in the United States has caused business disruption through mandated and voluntary closings. The COVID-19 outbreak is also disrupting supply chains and affecting production and sales across a wide range of industries. While the disruption is currently expected to be temporary, there is considerable uncertainty around the duration of the closings. Therefore the Organization expects this matter may negatively affect its operations and results. The extent of the impact of COVID-19 on the Organization's operational and financial performance will depend on certain developments, including the duration and spread of the outbreak, impact on the Organization's donors and customers, employees and vendors all of which are uncertain and cannot be predicted. At this point, the extent to which COVID-19 may impact the financial condition of the Organization or results of operations is uncertain.



Note 1 - (Continued)

New Accounting Pronouncement

Effective January 1, 2019 the Organization adopted FASB ASU 2014-09, Revenue from Contracts with Customers (Topic 606). This Update affects contracts with customers to transfer goods or services and contracts for the transfer of non-financial assets (unless those contracts are within the scope of other standards). The core principle of this Update is that an entity should recognize revenue to depict the transfer of promised goods or services in an amount that reflects the consideration to which the entity expects to be entitled in exchange for the goods or services. This Update requires entities to make new judgements and estimates and provide expended disclosures about revenue. The adoption of this pronouncement had no material effect on the financial statements.

Note 2 - Employee benefits

The Organization maintains a 403(b) retirement plan. In addition to employee contributions The Organization contributes matches up to \$2,500 of eligible salaries for qualified employees.

The Organization contributed \$ 16,300 to the plan during the year ended February 28th, 2021.

Note 3 – Liquidity and Availability of Financial Assets

The Organization's working capital and cash flows have seasonal variations during the year attributable to the timing of program and fundraising activities. Monthly cash outflows vary each year based on the specific requirements of the program activities. To manage liquidity the Organization budgets cash flow and conducts fundraising and program activities that are timed according to expected requirements.

The following reflects the Organization's financial assets as of the balance sheet date:

| Cash | \$ 5,128,943 |
|---|---------------------|
| Receivable from PayPal | 3,904 |
| Contributions receivable | 215,037 |
| Total financial assets | 5,347,884 |
| Less: Donor restricted net assets | (3,656,171) |
| Financial assets available to meet cash needs for | |
| general expenditures within one year | <u>\$ 1,691,713</u> |

Note 4 - Donor restricted net assets

Donor restricted net assets by revenue source and changes therein for the year ended February 28, 2021, were as follows:

| | | nce as of ary 29, 2020 | ٨ | dditions | Releases Restric | | Balance as of February 28, 2021 |
|---|---------|---------------------------|--------|----------------|---------------------|------------------|------------------------------------|
| Restricted as to purpose for The following projects: | | | | | | | |
| Argo UML Backdrop Boost | \$ | 12,736 222 127,899 | \$ | 1,235 2,871 | \$ | - 55 8,553 | \$12,736 1,402 122,217 |
| | See Inc | dependent A | uditor | 's Report | | | |



Note 4 - (continued)

| | Balance as of February 28, 2020 | Additions | Releases from Restrictions | Balance as of February 29, 2021 |
|---|------------------------------------|------------------|-------------------------------|------------------------------------|
| Restricted as to purpose for The following projects: | | | | |
| Bro | _ | - | 4 | 2 |
| Buildbot | 9,930 | - | 367 | 9,563 |
| BusyBox | 67,999 | 18 | 1 | 68,016 |
| Clojars | 48,026 | 20,902 | 68,928 | = |
| CommonWorkflow Language | 188 | 513 | 17 | 684 |
| Coreboot | 34,870 | 8,574 | 90 | 43,354 |
| Darcs | 1,751 | 164 | 37 | 1,878 |
| DrupalNJ | 39,083 | 90 | 143 | 39,030 |
| Etherpad | 287 | 108 | (2.222) | 394 |
| Evergreen Foresight | 22,673 | 16 | (3,638) | 26,327 |
| Gevent | 393 10,012 | - | 393 | 10.010 |
| Git | 62,242 | 4 433 | 1 606 | 10,012 |
| Godot | 111,203 | 4,433 527,506 | 1,686 348,936 | 64,989 |
| Harvey | 494 | 90 | 340,930 | 289,773 581 |
| Homebrew | 141,667 | 84,054 | 13,879 | 211,842 |
| Houdini | 176 | 13,500 | 10,425 | 3,251 |
| ICR | 22,500 | 23,044 | 28,924 | 16,620 |
| Inkscape | 174,737 | 106,593 | 5,862 | 275,468 |
| K3D | 2,869 | - | 23 | 2,846 |
| Kaltihea | | 45 | 15 | 30 |
| Kohana | 17 | ***** | 17 | _ |
| LiberHealth | 27,336 | 4,211 | 2,931 | 28,616 |
| Linux Compliance | 27,096 | <u>≅</u> | 1,560 | 25,536 |
| Linux XIA | 7,761 | | ¥ | 7,761 |
| LuxRender | 965 | | 965 | |
| Mercurial | 17,573 | 314 | 2,185 | 15,702 |
| Metalink | 929 | 1 | <u></u> | 930 |
| MicroBlocks | 25,471 | 4,357 | 4,961 | 24,867 |
| North Bay Python | 6,945 | 2 | 117 | 6,828 |
| OpenChange OpenWRT | 12,000 | 4.044 | 4047 | |
| Outreachy | 12,000 | 1,614 | 1,247 | 12,367 |
| phpMyAdmin | 902,711 206,261 | 1,004,270 | 833,227 | 1,073,754 |
| PyGMO | 200,201 | 69,249 | 63,231 | 212,279 |
| PyPy | 26,008 | 158 | 26,266 | - |
| QEMU | 17,272 | 10,528 | 718 | 27,082 |
| Racket | 22,023 | 3,903 | 407 | 25,519 |
| Reproducible Builds | 271,354 | 152,516 | 276,366 | 147,504 |
| Samba | 162,317 | 2,243 | 81,529 | 83,031 |
| Selenium | 470,643 | 63,749 | 8,123 | 526,269 |
| SpecOps | 8,755 | 50050 550 5 | -, | 8,755 |
| Squeak | 1,057 | 288 | 303 | 1,042 |
| Sugar | 88,355 | | 39 | 88,316 |
| SWIG | 3,916 | 12 | 2 | 3,926 |
| Teaching Open Source | 91,782 | 5 | 3750 3750 | 91,782 |
| Twisted | 14,542 | 4,608 | 5,041 | 14,109 |
| Wine | 6,903 | 4,208 | 325 | 10,786 |
| Xapian | 15,346 | 3,105 | 54 | 18,397 |
| | \$ 3,327,295 | \$2,123,090 | <u>\$1,794,214</u> | <u>\$3,656,171</u> |

