## Form **990**

(Rev. January 2020)

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

9010

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

**Return of Organization Exempt From Income Tax** 

▶ Go to www.irs.gov/Form990 for instructions and the latest information. For the 2019 calendar year, or tax year beginning 2019, and ending **February** March 1 29 Α . 20 20 C Name of organization Software Freedom Conservancy, Inc. D Employer identification number В Check if applicable: Doing business as 41-2203632 Address change Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number **137 MONTAGUE ST STE 380** 212-461-3245 Initial return Final return/terminated City or town, state or province, country, and ZIP or foreign postal code **BROOKLYN, NY 11201-3548** G Gross receipts \$ 2.970.607 Amended return F Name and address of principal officer: H(a) Is this a group return for subordinates? Yes No Application pending KAREN M. SANDLER, Postal address as in C above. **H(b)** Are all subordinates included? Yes No Tax-exempt status: ) ◀ (insert no.) 4947(a)(1) or ✓ 501(c)(3) 501(c) ( If "No," attach a list. (see instructions) Website: ► https://sfconservancy.org **H(c)** Group exemption number ▶ Form of organization: Corporation Trust Association L Year of formation: M State of legal domicile: NY Part I **Summary** 1 Briefly describe the organization's mission or most significant activities: Conservancy promotes, improves, develops, facilitates, Activities & Governance and defends Free and Open Source Software (FOSS). Conservancy advocates for the software freedom and software rights of the public. Conservancy provides a home and infrastructure to FOSS projects & initiatives, and helps our volunteers to improve FOSS 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . . . 10 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 9 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 5 6 6 Total number of volunteers (estimate if necessary) . . . . . . . . . . . . 5,500 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 39 7b 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . 3,078,324 2,510,140 Revenue 9 Program service revenue (Part VIII, line 2g) 186,601 390,872 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . 42,264 63,968 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 18,188 5,627 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,325,377 2,970,607 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . . 189,733 110,118 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 538,816 651,560 Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . 16a 10,331 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . 1,436,986 1,765,065 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,165,535 2,537,074 Revenue less expenses. Subtract line 18 from line 12 . 19 1,159,842 433,533 Assets or designation Assets **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 4,497,873 4,754,168 21 Total liabilities (Part X, line 26) . 360,783 183,545 22 Net assets or fund balances. Subtract line 21 from line 20 4,137,090 4,570,623 **Signature Block** Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. M. Sal 15 January 2021 Sign Signature of officer Date Here Karen M. Sandler, President and Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check | if **Paid** self-employed **Preparer** Firm's EIN ▶ Firm's name Use Only Firm's address ▶ Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) . Yes □No

Form 990 (2019) Page **2** 

Part	· · · · · · · · · · · · · · · · · · ·
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Conservancy promotes, improves, develops, facilitates and defends Free and Open Source Software (FOSS). Conservancy advocates
	for the software freedom and software rights of the public. Conservancy provides a home and infrastructure to FOSS projects
	and initiatives — mostly coordinated by volunteers. Conservancy helps these volunteers to focus on improving FOSS for the public.
	Projects include: embedded software for IoT devices, advocacy for consumer rights in software licensing, and internship programs.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
_	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
7	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others
	the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program correct reported.
4a	(Code: ) (Expenses \$ 1,692,205 including grants of \$ 110,118 ) (Revenue \$ 240,283 )
	FOSS development, documentation, internships, mentoring, & project support: During the tax year, Conservancy engaged 25
	different software developers as independent contractors to improve the software in its Godot, Microblocks, Outreachy, phpMyAdmin
	PyPy, Reproducible Builds, Samba, Selenium, and Teaching Open Source projects, as well as improving FOSS for Conservancy's
	own accounting infrastructure. All code was released freely to the public under licenses that encourage the public to use, share, and
	modify it. These contractors also coordinated volunteer software developers to contribute further software code. In the tax year,
	Conservancy funded 135 interns as part of Outreachy — an initiative to encourage participation in FOSS for those who face systemic
	bais, under-representation, or discrimination in the technology industry in their country. Outreachy interns become directly involved
	with improving FOSS, and increase the diversity of the FOSS community while also learning valuable skills. Conservancy staff also
	assisted volunteers in our projects on a daily basis with administration, coordination, legal and infrastructural tasks (as listed
	at https://sfconservancy.org/members/services/ ). Conservancy made software development grants to 10 individual developers in the
	Clojars project. Conservancy gave grants to two organizations: the newly-formed "Sugar Labs, Inc." and a small follow-up grant to
	ICSI for the Zeek (formerly Bro) project. Conservancy continued its advocacy for universal software freedom and software rights.
4b	(Code:) (Expenses \$360,819 including grants of \$) (Revenue \$150,589 )
	Facilitating and Participating in FOSS conferences: During the tax year of 2019, Conservancy planned, organized and/or ran seven
	conferences total. These included conferences for our Boost, DrupalNJ, North Bay Python, Racket, Reproducible Builds,
	and Selenium projects — as well as our second annual CopyleftConf. Additionally, Conservancy coordinated and funded
	many smaller "hackfest" events for its projects. Furthermore, Conservancy funded travel expenses for staff's and volunteers'
	attendance at nearly 50 different third-party software conferences. These events allow volunteer FOSS contributors and
	Conservancy staff to (a) speak about their work to the public, (b) teach the public how to use and improve their
	software, (c) generally promote the use, adoption and improvement of FOSS, and (d) explain and explore the policy issues
	surrounding software freedom and software rights. Most FOSS conferences include opportunities for software developers to
	meet and rapidly work closely together to make improvements to the software and release those improvements immediately to
	the public. Finally, Conservancy staff also assisted in organizing the Legal & Policy DevRoom at FOSDEM, the largest annual
	FOSS conference in Europe.
	(0.1
4c	(Code: ) (Expenses \$ 68,453 including grants of \$ ) (Revenue \$ )
	License Compliance Activity: Many of Conservancy's projects are available under "copyleft" licenses, such as the General
	Public License — the GPL. "Copyleft" are FOSS licenses, and they allow everyone to freely share, copy, modify, and
	install modified versions of the software. However, "copyleft" licenses additionally require that everyone who receives the
	software has an equal right to engage in those activities.
	Conservancy identifies situations where distributors fail to meet those requirements. Conservancy then enforces the copyright
	license, thereby requiring these distributors to provide the same rights to copy, share, modify and install modified versions of
	the software to all those who receive the software distribution (just as those distributors had initially received those rights.
	Through this process, Conservancy ensures that the public has equal rights to use, improve, and study the software, and to
	experiment with their own modifications to the software. Rarely, in particularly egregious cases of a GPL violation,
	seeks remedy in the courts through litigation.
	The primary goal of all these "copyleft" enforcement activities is always to ensure that all who receive copies of the copylefted
	software (or modified versions thereof) can freely engage in copying, modifying, improving and installing modified versions.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
1-	Total program convice expenses A 0 404 477

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	,	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	5		,
6	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 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, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		-
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		,
9	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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		,
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		-
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		,
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		,
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 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 if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
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	14b	,	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16	,	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		,
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		,
20a	If "Yes," complete Schedule G, Part III	19 20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		Ť
21	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 12 If "Yes," complete Schedule I. Parts Land II.	21	,	

<b>Part</b>	V Checklist of Required Schedules (continued)			
			Yes	No
22	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	~	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	_	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	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	25a		,
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or 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? <i>If "Yes," complete Schedule L, Part II</i>	26		,
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		·
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		,
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 </i>	34		<i>V</i>
35a b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a		
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38 Part	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.  V Statements Regarding Other IRS Filings and Tax Compliance	38	~	
Part	Check if Schedule O contains a response or note to any line in this Part V			
	2 Conduit o contains a respense of floto to any into in the fact v	• •	Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	_		

Part '	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment to	ax returns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instru				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	·	3a		~
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Sc		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	a financial account in a foreign country (such as a bank account, securities account, or other financial		4a		
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 A	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax y		5a		~
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter		5b		~
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,00				
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such or "Yes," and the organization include with every solicitation an express statement that such or "Yes," and the organization include with every solicitation an express statement that such or "Yes," and the organization include with every solicitation and express statement that such or "Yes," and "Yes,	contributions or	۵.		
-	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly as a c	partly for goods	7-		
	and services provided to the payor?		7a	<b>V</b>	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	~	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for	or which it was	7-		
_	required to file Form 8282?		7c		~
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	7-		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal be		7e 7f		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit the organization received a contribution of qualified intellectual property, did the organization file Form 8				-
g	If the organization received a contribution of qualified intellectual property, did the organization file Form of the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file	•	7g 7h		
			/11		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund ma sponsoring organization have excess business holdings at any time during the year?	untained by the	8		
9	Sponsoring organizations maintaining donor advised funds.				
	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related personal per		9b		
10	Section 501(c)(7) organizations. Enter:				
а	1.11.7	10a			
		10b			
11	Section 501(c)(12) organizations. Enter:	100			
a		11a			
	Gross income from other sources (Do not net amounts due or paid to other sources				
	· ·	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu or		12a		
		12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule	Ο.			
b	Enter the amount of reserves the organization is required to maintain by the states in which				
	· · · · · · · · · · · · · · · · · · ·	13b			
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year? .		14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on S	Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in r	emuneration or			
	excess parachute payment(s) during the year?		15		1
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investigation.	stment income?	16		~
	If "Yes," complete Form 4720, Schedule O.				

and financial statements available to the public during the tax year.

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Bradley M. Kuhn

Form 990 (2019) 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. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 ~ Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b R Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b 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 10a **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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a ~ 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . 13 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . . . . . . . . . . 15a 1 15b 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 16a J 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► NY 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website ✓ Another's website ✓ 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, 19

State the name, address, and telephone number of the person who possesses the organization's books and records ▶ 137 MONTAGUE ST STE 380, BROOKLYN, NY 11201-3548 +1-212-461-3245, x.10

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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 . . . . . . . . . . . . . . . . .

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- 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 no	r any relate	d org	aniz	atic	n c	ompe	ensa	ated any current	officer, director,	or trustee.
				(0	C)					
(A)	(B)	Position						(D)	(E)	(F)
Name and title	Average	(do not check more than one						Reportable	Reportable	Estimated amount
Tallo alla illo	hours	box, unless person is both an officer and a director/trustee)						compensation	compensation	of other
	per week		_		_			from the	from related	compensation
	(list any hours for	핰	stit	Officer	ey e	l gle	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and
	related	dua	ltio	۳ ا	mp	yee	<u> </u>	(** =/ *********************************	(** =/ *********************************	related organizations
	organizations	7 7	nal i		Key employee	l ä				
	below dotted line)	Individual trustee or director	Institutional trustee		ď	pen				
		Ф	tee			Highest compensated employee				
(1) Jeremy Allison	1									
Director		1								
(2) Kate Chapman	2									
Director		~								
(3) Laura Fortunato	1									
Director		~								
(4) Mark Galassi	3									
Director, Chairperson, Vice President, Secretary		~		~						
(5) Bdale Garbee	1.25									
Director		~								
(6) Bradley M. Kuhn	40.92									
Director, Treasurer, Policy Fellow		~		~				98,982		34,227
(7) Mike Linksvayer	3									
Director		~								
(8) Martin Michlmayr	4.89									
Director		~						12,450		
(9) Allison Randal	1									
Director		~								
(10) Karen M. Sandler	50									
Executive Director, President				~				153,000		45,299
(11) Anthony K. Sebro, Jr.	1									
Director		~								
(12)		-								
(13)										
S.:/	†									
(14)										
			1		1	1	1			1

Part	VII Section A. Officers, Directors, 1	Trustees,	Key I	Εm	plo	yee	s, an	d F	Highest Compe	nsated Emplo	yees (	continu	ed)
						C)							
	(A) (B)			ot ch		ition more	e than o	one	(D)	(E)	(F)		
	Name and title	Average hours	box,	unles	s pe	rson	is both	n an	Reportable compensation	Reportable compensation	1	ted amoui other	nt
		per week		Ι_		_		<del>-</del>	from the	from related	com	pensation	
		(list any hours for	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest c employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	organi	om the zation and	
		related organizations	dual :	tion	_	nplo	st co yee	4			related o	organizatio	ons
		below	trust	ŧ		yee	mpei						
		dotted line)	8	stee			Highest compensated employee						
(15)			_				0.						
(16)													—
(17)													
(18)			-										
(19)			_										
(20)													
(21)			-										
(22)			_										_
(23)													
(24)													
(25)			_										
1b	Subtotal							<b></b>	264,432			79,5	526
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)			٠	•			<b>&gt;</b>	264,432			70.5	
	Total number of individuals (including but	 t not limited		nose	· list	ed	above	e) w	,	e than \$100,000	of	79,5	120
	reportable compensation from the organi								1				
•	Dilui i ii ii ii											Yes N	4o
3	Did the organization list any <b>former</b> of employee on line 1a? <i>If "Yes," complete s</i>										3		/
4	For any individual listed on line 1a, is the												
	organization and related organizations												
5	individual										4	<i>-</i>	
	for services rendered to the organization										5		/
	on B. Independent Contractors	ant name	onoot		inda		adant		antroctore that w	acciuad mara	than Of	00 000	
1	Complete this table for your five high compensation from the organization. Rep												
	<b>(A)</b> Name and business add	ress							<b>(B)</b> Description of serv	rices	( <b>C</b> ) Compens	ation	
Chris	opher Lamb, PO Box 6945, London W1A 6L	IS UK						so	ftware developme	nt		102,0	)00
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed abov	e) who			
	received more than \$100,000 or compens	anon nom	u ie Oi	gan	احما	1011			<u> </u>				

## Part VIII Statement of Revenue

		Check if Schedule O contains a response	onse or note to an	y line in this Pa	rt VIII		🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts is	1a	Federated campaigns 1a	a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1k	)				
عَ ق	С	Fundraising events 10	;				
r A	d	Related organizations 10	l l				
n is σ	е	Government grants (contributions) 16					
Sin	f	All other contributions, gifts, grants,					
iğ je		and similar amounts not included above 11	2,510,140				
흔	g	Noncash contributions included in					
o p			<b>)</b>  \$				
O B	h	Total. Add lines 1a–1f		2,510,140			
a)	_		Business Code				
Š	2a	Software Development Services	541,511	239,994	239,994		
le le	b	Conference registration fees	561,920	117,314	117,314		
n S	C .	Sponsorship Benefit Income	561,920	33,275	33,275		
gram Ser Revenue	d	Promotional Item Sales	813,319	289	289		
Program Service Revenue	e	All other program comics revenue					
•	f g	All other program service revenue <b>Total.</b> Add lines 2a–2f	•	390,872			
	3	Investment income (including dividen		390,072			
		other similar amounts)		63,968	63,968		
	4	Income from investment of tax-exempt to		55,555	55,555		
	5	Royalties		5,627	5,627		
		(i) Real	(ii) Personal	,	,		
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d		<u>.</u> ▶				
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
Revenue	b	Less: cost or other basis					
Ver		and sales expenses . <b>7b</b> Gain or (loss) <b>7c</b>					
Other	d 8a	Net gain or (loss)	· · · · •				
₹	Oa	events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	a				
	b	Less: direct expenses 8t	<b>5</b>				
	С	Net income or (loss) from fundraising ev	vents ▶				
	9a	Gross income from gaming					
		activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9t					
	С	Net income or (loss) from gaming activi	ties <b>&gt;</b>				
	10a	Gross sales of inventory, less	_				
	1	returns and allowances 10					
		Less: cost of goods sold <u>10</u> Net income or (loss) from sales of inven					
-	С	THE THEOTHE OF (1055) HOTH Sales OF HIVE	Business Code				
Miscellaneous Revenue	11a		Dusilless Code				
scellaneo Revenue	b		-				
ella vel	C		-				
isc.	d	All other revenue	-				
Σ	е	Total. Add lines 11a-11d	•				
	12	Total revenue. See instructions	•	2.970.607	460,467	0	0

Form 990 (2019) Page **10** 

## 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 response or note to any line in this Part IX		ī

Check if Schedule O contains a response or note to any line in this Part IX									
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses				
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .	21,718	21,718						
2	Grants and other assistance to domestic individuals. See Part IV, line 22	38,000	38,000						
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	50,400	50,400						
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	353,090	182,969	137,341	32,780				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)								
7	Other salaries and wages	239,982	113,688	104,949	21,345				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,500	675	675	150				
9	Other employee benefits	18,907	7,952	9,235	1,720				
10	Payroll taxes	38,081	17,334	17,556	3,191				
11	Fees for services (nonemployees):	,	,	, i	<del></del>				
а	Management								
b	Legal	49,484	43,734	5.120	630				
C	Accounting	16,699	10,101	16,699					
d	Lobbying	10,000		10,000					
e	Professional fundraising services. See Part IV, line 17	10,331			10,331				
f	Investment management fees	10,001			10,001				
	Other. (If line 11g amount exceeds 10% of line 25, column								
g	(A) amount, list line 11g expenses on Schedule O.)	15 006	15 006						
40		15,806	15,806		0.000				
12	Advertising and promotion	8,724	5,924		2,800				
13	Office expenses	1,811	537	609	665				
14	Information technology	51,860	41,399	10,278	183				
15	Royalties								
16	Occupancy	411	411						
17	Travel	187,674	184,165	3,337	172				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings .	177,104	177,104						
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization .								
23	Insurance	4,157		4,157					
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.)								
а	Internships	486,000	486,000						
b	Software Development and Design	616,580	616,580						
C	Bad Debt Expenses	57,161	56,771	390					
d	Program Coordination Services	55,423	51,693	3,730					
e	All other expenses Bank Fees, Sales Tax, et al	36,171	8,617	27,545	9				
25	Total functional expenses. Add lines 1 through 24e	2,537,074	2,121,477	341,621	73,976				
26	Joint costs. Complete this line only if the	_,507,074	_,,,,,	371,021	10,010				
_•	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)								
	5			L	Form <b>990</b> (2019)				

Part X Balance Sheet

(A) Beginning of year End of  1 Cash—non-interest-bearing	year 198,374
2 Savings and temporary cash investments	4,190,528 342,309
2 Savings and temporary cash investments	
4 Accounts receivable, net	
5 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	22,957
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	22,957
controlled entity or family member of any of these persons	22,957
6 Loans and other receivables from other disqualified persons (as defined	22,957
under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .	22,957
7 Notes and loans receivable, net	22,957
7 Notes and loans receivable, net	22,957
9 Prepaid expenses and deferred charges	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a	
b Less: accumulated depreciation 10b	
11 Investments—publicly traded securities	
12 Investments—other securities. See Part IV, line 11	
13 Investments – program-related. See Part IV, line 11	
14 Intangible assets	
15 Other assets. See Part IV, line 11	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33)	4,754,168
17 Accounts payable and accrued expenses	183,545
18 Grants payable	
19 Deferred revenue	
20 Tax-exempt bond liabilities	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 21	
22 Loans and other payables to any current or former officer, director,	
trustee, key employee, creator or founder, substantial contributor, or 35%	
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	
20 Cooling the registre to a moral parties	
24 Unsecured notes and loans payable to unrelated third parties	
25 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	400 545
26 Total liabilities. Add lines 17 through 25	183,545
Organizations that follow FASB ASC 958, check here ► □ and complete lines 27, 28, 32, and 33.	
27 Net assets without donor restrictions	1 2/2 220
27 Net assets without donor restrictions	1,243,328 3,327,295
Organizations that do not follow FASB ASC 958, check here	3,321,293
and complete lines 29 through 33.	
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  7 Net assets without donor restrictions	
30 Paid-in or capital surplus, or land, building, or equipment fund	
31 Retained earnings, endowment, accumulated income, or other funds	
32 Total net assets or fund balances	4,570,623
33 Total liabilities and net assets/fund balances	4,754,168

Form 990 (2019) Page **12** 

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)			2,97	0,607
2	Total expenses (must equal Part IX, column (A), line 25)			2,53	7,074
3	Revenue less expenses. Subtract line 2 from line 1			43	3,533
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))			4,13	7,090
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O) 9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))			4,57	0,623
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				Ц
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain	າ in			
_	Schedule O.				4
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	-	2a		\ \
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	l or			
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		OI-		
D	Were the organization's financial statements audited by an independent accountant?		2b	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited o	n a			
	separate basis, consolidated basis, or both:				
_	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	/	
	•	_	20		
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	On			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	the			
	Single Audit Act and OMB Circular A-133?	.	3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo		_		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2019)

### **SCHEDULE A** (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 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.

Employer identification number

	ware Freedom Conservancy, Inc.					41-22				
Pai	t I Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instructio	ns.			
The o	The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)									
1	☐ A church, convention of churc	hes, or associati	on of churches descri	ibed in <b>se</b>	ection 17	0(b)(1)(A)(i).				
2	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990 or 990-EZ).)									
3	☐ A hospital or a cooperative ho									
4	A medical research organization	•	onjunction with a hosp	oital desc	ribed in <b>s</b>	section 170(b)(1)(A)	iii). Enter the			
	hospital's name, city, and stat									
5	An organization operated for section 170(b)(1)(A)(iv). (Com	plete Part II.)			·		al unit described in			
6	☐ A federal, state, or local gover	•								
7	An organization that normally described in section 170(b)(1)			port from	a gover	nmental unit or from	the general public			
8	A community trust described i	n <b>section 170(b)</b>	(1)(A)(vi). (Complete	Part II.)						
9	An agricultural research organ or university or a non-land-grauniversity:									
10	An organization that normally receipts from activities related support from gross investmen acquired by the organization a	to its exempt ful t income and uni	nctions—subject to c related business taxal	ertain exc ble incom	ceptions, ne (less se	and (2) no more that ection 511 tax) from	n 33¹/₃% of its			
11	An organization organized and		•		•	•				
12	☐ An organization organized and	•	•	-			rv out the nurnoses			
	of one or more publicly support									
	Check the box in lines 12a thro									
а	☐ <b>Type I.</b> A supporting organ	nization operated	, supervised, or contr	olled by i	ts suppo	rted organization(s),	typically by giving			
	the supported organization									
	supporting organization. Y	ou must comple	ete Part IV, Sections	A and B	ī					
b	_ ;;									
	control or management of organization(s). You must				persons	that control or mana	age the supported			
С	Type III functionally integ its supported organization						ally integrated with,			
d	Type III non-functionally that is not functionally inte requirement (see instructionally in	grated. The orga	nization generally mu	st satisfy	a distribu	ıtion requirement an				
е							e II, Type III			
	functionally integrated, or	• •	tionally integrated sup	oporting (	organizati	ion.				
f	Enter the number of supported									
g										
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
				Yes	No					
(A)										
(B)										
(C)										
(D)										
(E)										
Toto										

18

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.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 **(e)** 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 1,810,882 3,078,324 1,780,653 2,213,962 2,510,140 11,393,961 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities 3 furnished by a governmental unit to the organization without charge . . . . Total. Add lines 1 through 3. . . . 4 1,780,653 1,810,882 3,078,324 2,510,140 2,213,962 11,393,961 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . 3,065,438 **Public support.** Subtract line 5 from line 4 8,328,523 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 7 Amounts from line 4 . . . . . . 1,810,882 3,078,324 1,780,653 2,510,140 11,393,961 2,213,962 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . . 1,555 3,608 17,275 42,264 66,759 131,461 Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . **Total support.** Add lines 7 through 10 11 11,525,422 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 1.572.724 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . . 72.3 % Public support percentage from 2018 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 331/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . . 331/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

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

If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support	ander the te-	Sto lioted ben	ow, picase oc	omplete i art	,	
	dar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) 2010	(3) 2010	(6) 2011	(4) 2010	(6) 2010	(i) rotal
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	<b>Total.</b> 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						
с 8	Add lines 7a and 7b						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(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.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	e			•	ear as a sectio	
	on C. Computation of Public Suppor						
15	Public support percentage for 2019 (line 8						%
16 Saati	Public support percentage from 2018 Sch					16	%
	on D. Computation of Investment Inc			v lino 12 polic	umn (f))	17	0/
17 18	Investment income percentage for <b>2019</b> (Investment income percentage from <b>2018</b>			•			<u>%</u> %
19a	33 <sup>1</sup> / <sub>3</sub> % support tests—2019. If the organi						
·va	17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box a						
b	331/3% support tests—2018. If the organization 18 is not more than 331/3%, check this back	ation did not c	heck a box on	line 14 or line	19a, and line 16	is more than 3	33 <sup>1</sup> /3%, and
20	Private foundation. If the organization did	_	<del>-</del>	•	-		_

## Part IV Supporting Organizations

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

## Section A. All Supporting Organizations

CCLI	on 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 <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) 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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) 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 <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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 (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	<b>Substitutions only.</b> 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? If "Yes," provide detail in <b>Part VI</b> .	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).			
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).	7		
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	8		
b	in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .  Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	9a		
С	the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .  Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	9b		
10a	from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i> Was the organization subject to the excess business holdings rules of section 4943 because of section	9с		
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	iva		
D	determine whether the organization had excess business holdings.)	10b		

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	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 organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in 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 government entity (so the complete line 3).		struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> 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 (a) 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations		
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ				
Section 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			
<b>6</b> 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			
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				
a Average monthly value of securities	1a			
<b>b</b> Average monthly cash balances	1b			
c Fair market value of other non-exempt-use assets	1c			
d Total (add lines 1a, 1b, and 1c)	1d			
e 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			
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% 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 .035.	6			
7 Recoveries of prior-year distributions	7			
8 Minimum Asset Amount (add line 7 to line 6)	8			
Section C-Distributable Amount			Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2 Enter 85% of line 1.	2			
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4 Enter greater of line 2 or line 3.	4			
5 Income tax imposed in prior year	5			
<b>6 Distributable Amount.</b> 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-functionall instructions).	y int	egrated Type III supporti	ng organization (see	

Secti		Current Year		
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	rted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Part VI	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section 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 B

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

Department of the Treasury Internal Revenue Service Name of the organization

Software Freedom Conservancy, Inc.

#### Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

**Employer identification number** 

41-2203632

Organization type (check one): Filers of: Section: Form 990 or 990-EZ ✓ 501(c)( ) (enter number) organization 3 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF ☐ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

 Name of organization
 Employer identification number

 Software Freedom Conservancy, Inc.
 41-2203632

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
_1		\$ 365,187	Person Payroll Noncash Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2		\$193,438	Person Payroll Noncash  (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
3		\$117,000	Person Payroll Complete Part II for noncash contributions.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
4		\$ 100,000	Person Payroll Doncash Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
5		\$ 95,410	Person Payroll Complete Part II for noncash contributions.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
6			Person 🗸				

 Name of organization
 Employer identification number

 Software Freedom Conservancy, Inc.
 41-2203632

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$ 75,000	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
8		\$64,084	Person Payroll Noncash  (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
9		\$63,666	Person Payroll Noncash  (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
_10		\$58,500	Person Payroll Noncash  (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				

Name of organization

Employer identification number

Noncash Property (see instructions). Use duplicate co	pies of Part II if additional space	ce is needed.	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
	  \$		
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
	  \$		
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
	   \$		
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
	  \$		
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
	  \$		
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
	  \$		
	(b)  Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given  \$	

Name of organization

Employer identification number

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

		ations completing Pa	rt III, enter the tota	Complete columns (a) through (e) and al of exclusively religious, charitable, etc., the instructions (b)		
	Use duplicate copies of Part III if ad					
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held		
			fer of gift			
_	Transferee's name, address, a		Relatio	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	(e) Transf Transferee's name, address, and ZIP + 4		nsfer of gift  Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, address, a	(e) Transfer of gift				
_				nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
			fer of gift			
	Transferee's name, address, a		Relatio	nship of transferor to transferee		

# SCHEDULE D (Form 990)

## **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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

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

varrie 0	i tile organization			Employer identification number
Softwa	are Freedom Conservancy, Inc.			41-2203632
Par	t I Organizations Maintaining Donor Advi	sed Funds or Oth	er Similar Fund	ls or Accounts.
	Complete if the organization answered "	Yes" on Form 990,	Part IV, line 6.	
		(a) Donor adv	sed funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year) .			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor a			
_	funds are the organization's property, subject to the	-	_	
6	Did the organization inform all grantees, donors, an			
	only for charitable purposes and not for the benefit			
				· · · · · L Yes L No
Par	Conservation Easements.			
	Complete if the organization answered "	Yes" on Form 990,	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o	rganization (check al	I that apply).	
	Preservation of land for public use (for example, recreation)	ation or education) [	☐ Preservation of	f a historically important land area
	☐ Protection of natural habitat		Preservation of	f a certified historic structure
	☐ Preservation of open space			
2	Complete lines 2a through 2d if the organization hel	d a qualified conserv	ation contribution	in the form of a conservation
	easement on the last day of the tax year.			Held at the End of the Tax Year
а				. 2a
b	Total acreage restricted by conservation easements			
C	Number of conservation easements on a certified hi			
_			` '	
d	Number of conservation easements included in (a historic structure listed in the National Register .	c) acquired after 7/2		
•	-			
3	Number of conservation easements modified, trans	terrea, releasea, exti	nguisnea, or term	ninated by the organization during the
	tax year ►		4 1 <b>N</b>	
4	Number of states where property subject to conserv			
5	Does the organization have a written policy regulations and enforcement of the conservation and			
_	violations, and enforcement of the conservation eas			
6	Staff and volunteer hours devoted to monitoring, inspec	ting, nandling of violati	ons, and enforcing	conservation easements during the year
	<u> </u>			
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violatior	ns, and enforcing o	conservation easements during the year
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2	2(d) above satisfy the	requirements of s	section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports co	onservation easemer	its in its revenue a	and expense statement and
	balance sheet, and include, if applicable, the text of		rganization's fina	ncial statements that describes the
	organization's accounting for conservation easemer	nts.		
Part	III Organizations Maintaining Collections	of Art, Historical	Treasures, or 0	Other Similar Assets.
	Complete if the organization answered "	Yes" on Form 990,	Part IV, line 8.	
1a	If the organization elected, as permitted under FAS	B ASC 958 not to re	nort in its revenu	e statement and halance sheet works
	of art, historical treasures, or other similar assets			
	service, provide in Part XIII the text of the footnote to			
b	If the organization elected, as permitted under FAS			
D	art, historical treasures, or other similar assets held			
	provide the following amounts relating to these item	•	caddation, or res	dator in farmerance of public service,
	(i) Revenue included on Form 000 Part VIII line 1			<b>•</b> •
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li></ul>			· · · • Ψ
_	(ii) Assets included in Fulfil 990, Falt A			<b>ν</b> φ
2	If the organization received or held works of art,			assets for financial gain, provide the
	following amounts required to be reported under FA	_		. Φ
a	Revenue included on Form 990, Part VIII, line 1 .			
b	Assets included in Form 990, Part X			> \$

Schedule D (Form 990) 2019 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Part III Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply): ☐ Public exhibition **d** Loan or exchange program а Other Scholarly research **c** Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not ☐ Yes ☐ No If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Beginning balance . . . . . 1c 1d 1e 1f Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? \( \subseteq \text{Yes} \) **b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. . . . . Part V **Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back Beginning of year balance . . . Contributions . . . . . . Net investment earnings, gains, and losses . . . . . . . . . . Grants or scholarships . . . . Other expenditures for facilities and programs . . . . . . . . . Administrative expenses . . . . End of year balance . . . . . 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ \_\_\_\_\_ % Permanent endowment ▶ \_\_\_\_% Term endowment ▶ \_\_\_\_% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No 3a(i) 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . . . . . 3b Describe in Part XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment. Part VI Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. (a) Cost or other basis Description of property (b) Cost or other basis (d) Book value (c) Accumulated (investment) (other) depreciation Buildings . . . . . . . . . Leasehold improvements . . . . Equipment . . . . . .

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) . . . . . . ▶

Schedule D (Form 990) 2019 Page **3** 

Part VII	Investments – Other Securities.		
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
	neld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	man (h) manat agual Farma 000 Bart V and (B) line 10		
Part VIII	mn (b) must equal Form 990, Part X, col. (B) line 12.) .  Investments—Program Related.		
Part VIII	Complete if the organization answered "Yes" on For	m 000 Part IV lin	o 11c Soo Form 900 Part V line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	(a) Description of investment	(b) Book value	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8) (9)			
	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ▶		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. See Form 990, Part X, line 15.
	(a) Description	•	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	(b) man (c) (D) (in a 45)		
	mn (b) must equal Form 990, Part X, col. (B) line 15.)	<u> </u>	•
Part X	Other Liabilities.  Complete if the organization answered "Yes" on For	m 000 Dort IV lin	a 11a ar 11f Caa Farm 000 Dart V
	line 25.	iii 990, Fart IV, iiii	e Tie of Til. See Form 990, Part A,
1.	(a) Description of liability		(b) Book value
(1) Federal in	***************************************		(b) Book value
(2)	isome taxes		
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		•
	runcertain tax positions. In Part XIII, provide the text of the footn	ote to the organization	n's financial statements that reports the
	s liability for uncertain tax positions under FASB ASC 740. Check		

Schedule D (Form 990) 2019 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . 2,970,607 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 Net unrealized gains (losses) on investments . . . . . Donated services and use of facilities Recoveries of prior year grants . . . . Other (Describe in Part XIII.) . . . . . . . Add lines **2a** through **2d** . . . . . . . . . . . 2e Subtract line **2e** from line **1** . . . . . . . . . . 3 3 2,970,607 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines **4a** and **4b** . . . 4c Total revenue, Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) 5 2,970,607 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. 2,537,074 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 Donated services and use of facilities Prior year adjustments 2b Other losses . . . . . . . . 2c Other (Describe in Part XIII.) . . . . . Add lines 2a through 2d . . . . 2e 3 Subtract line **2e** from line **1** . . . . . . . . 3 2,537,074 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a **c** Add lines **4a** and **4b** . . . . . . . . . . . 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . 2,537,074 Supplemental Information. 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.

Schedule D (Fo	m 990) 2019	Page \$
Part XIII	Supplemental Information (continued)	

#### **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.

OMB No. 1545-0047 2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990.

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

Name of the organization **Employer identification number** Software Freedom Conservancy, Inc. 41-2203632 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I 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? ✓ Yes No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (b) Number (d) Activities conducted in the (a) Region (e) If activity listed in (d) is (f) Total employees, of offices in expenditures for region (by type) (such as, a program service, agents, and the region fundraising, program services, describe specific type of and investments independent investments, grants to recipients service(s) in the region in the region contractors in the region located in the region) (1) East Asia and the Pacific 7 **Program services** Conferences, promotion 18.362 (2) Europe 33 **Program services** Conferences, comp. equip. 83,133 (3) Europe Grants 50,938 (4) Middle East and North Africa 5 Conference travel **Program services** 8,358 (5) North America 9 Conference travel **Program services** 11,508 (6) Russia and Neighboring States 7 **Program services** Conference travel 2,060 (7) Russia and Neighboring States **Grants** 5,400 (8) South America 23 **Program services** Conference travel 4,493 (9) South Asia **Program services** 39 Conference travel 10,053 (10) Sub-Saharan Africa 17 **Program services** Conference travel 732 (11)(12)(13)(14)(15)(16)(17)Subtotal . . . . . 140 195.036

140

Total from continuation sheets to Part I . . . . Totals (add lines 3a and 3b)

195,036

Par		line 15, for any	recipient who re	eceived more than	\$5,000. Part II ca	n be duplicated if a	additional space is	anization answered "\s 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)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
2				ed above that are rec as provided a sectio					

Schedule F (Forn	n 990) 2019
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Schedule F (Form 990) 2019

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	<b>(d)</b> 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)
(1) Software development grant	Europe	5	50,938	Bank wire, PayPal			FMV
(2) Software development grant	Russia and Neighboring S	1	5,400	Bank wire			FMV
(3)							
(4)							
(5)							
(6)							
_ (7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2019 Page **4** 

## Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	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)	☐ Yes	✓ No

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019 Page **5** 

## Part V Supplemental Information

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

Part I, Line 2: 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, Column 3(e): "conference travel" means either a staff person from the USA receiving travel expense reimbursment to speak at
and/or attend a conference in the region, or a volunteer from the region receiving a travel expense reimbursement to
speak at or attend a conference.
Part I, Column 3(f): All amounts are expenditures. Organization has no foreign investments.
Part III, accounting method: 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.
Part III, column (c): Number of recipients is counted exactly.

## **SCHEDULE I** (Form 990)

# 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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

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

Name of the organization							Employer id	lentification number
Software Freedom Conservancy, Inc.								41-2203632
Part I General Information	on Grants and	Assistance						
<ul><li>Does the organization mainta the selection criteria used to</li><li>Describe in Part IV the organ</li></ul>	award the grants ization's procedu	or assistance? res for monitoring	the use of grant fu		States.			. V Yes No
Part II Grants and Other As Part IV, line 21, for ar	ssistance to Do ny recipient that	mestic Organiz received more t	<b>zations and Dom</b> han \$5,000. Part	nestic Governm Il can be duplica	<b>lents.</b> Complete it ated if additional s	the organization the the theorem is the theorem in the theorem is needed	on answer	ed "Yes" on Form 990
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assista		(h) Purpose of grant or assistance
(1) Sugar Labs, Inc.	84-3289298		20,000				b	pootstrap organization
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
<ul><li>2 Enter total number of section</li><li>3 Enter total number of other of</li></ul>								0

Schedule I (Form 990) (2019) Page 2 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (e) Method of valuation (book, (b) Number of (c) Amount of (d) Amount of (f) Description of noncash assistance recipients cash grant noncash assistance FMV, appraisal, other) 1 Software Development 5 33.000 2 Educational cirriculum development 5.000 3 4 5 6 Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional 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 (b) the work completed under the grant. Usually, that work is freely licensed software available for the public.

### **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 2019

Open to Public Inspection

41-2203632

Name of the organization

Software Freedom Conservancy, Inc.

Employer identification number

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?			
	10:	2		
•				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	✓ 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 A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		~
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		~
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		~
b	Any related organization?	5b		~
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For parcone listed on Form 000 Part VIII Section A line to did the argenization pay or coordinate			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
_	The organization?	6a		V
a b	Any related organization?	6b		~
b	If "Yes" on line 6a or 6b, describe in Part III.	OD		
	The second of the describe in that in.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		~
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		~
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	ا م ا		

Schedule J (Form 990) 2019

## 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.

Note: The sum of columns (B)(I)–(III) to			W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Karen M. Sandler	(i)	153,000			1,500	43,799	198,299	
President and Executive Director	(ii)							
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

chedule J (F	orm 990) 2019	Page
Part III	Supplemental Information	
Provide to or any ac	e information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Parditional information.	t II. Also complete this pa

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

#### 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

**Employer identification number** 

Software Freedom Conservancy, Inc. 41-2203632 FORM 990, PART VI, SECTION A, LINE 1(a): Conservancy'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 Conservancy. The Evaluation Committee is authorized to engage with prospective projects and accept projects on the Board's behalf. Conservancy's 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, Karl Fogel, Mark Galassi, Bdale Garbee, Bradley M. Kuhn, Mike Linksvayer, Tom Marble, Martin Michlmayr, 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. Conservancy also chartered a Finance Subcommittee of the Directors, that currently 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, and Bradley M. Kuhn. Karen Sandler the Subcommittee meetings ex-officio. FORM 990, PART VI, SECTION B, LINE 11(B) - Form 990 Review Process: The Finance Subcommittee meets directly with the auditors to review the audit report before the 990 is filed. 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, SECTION B, LINES 12, 13, 14: The Board of Directors formally adopted and consented to Conservancy's Conflict of Interest, Whistleblower, and Document Retention policy on 16 March 2012. The polices are available for public inspection and comment. Conservancy'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 Conservancy select contractors for Conservancy are required to adhere to the Conflict of Interest policy. FORM 990, PART VI, SECTION B, LINE 15: 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), medical, vision and dental benefits package. (Continued on next page.)

Name of the organization	Employer identification number
Software Freedom Conservancy, Inc.	41-2203632
FORM 990, PART VI, SECTION B, LINE 15: (continued)	
That benefits package, and changes thereto, are discussed and approved by the Board of Directors. Ar	y employee serving
on the Board of Directors or present at the meeting recuse themselves from that vote and the Board co	nsiders benefits package changes
only in executive session without any employees present.	
FORM 990, PART VI, SECTION B, LINE 15a - Compensation Review & Approval Process for CEO, Executiv	e Director or Top Management:
Karen Sandler, the current President and Executive Director, negotiated her compensation package with	n 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 exe	cutive session by outside Directors.
Sandler receives now and has always received the same benefits package as all other employees (desc	ribed above), and receives COLAs
using the same formula as other employees.	
FORM 990, PART VI, SECTION B, LINE 15b - Compensation Review & Approval Process for Other Officers	and Key Employees:
Bradley M. Kuhn, Policy Fellow, is also an officer. His original compensation package (in 2010) was neg	jotiated with Galassi
and approved in executive session by the Board, using data from Form 990s of similar organizations an	d 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.	
FORM 990, PART VI, LINE 19 - Other Organization Documents Publicly Available:	
Conservancy's Form 990s, auditor reports, articles of incorporation & by-laws are available on Conserv	ancy's website at:
https://sfconservancy.org/about/filings/ Other key policy documents are developed in public at: https://	k.sfconservancy.org/policies
Due to an error, the FY 2017 documents specifically did not appear properly on the website until recently	y, but all documents are now there.
FORM 990, PART VII, LINE (3,7)(F) - Other Compensation to Kuhn and Sandler:	
Amounts on Part VII, Line 3(F) & 7(F) are for Sandler and Kuhn's health, dental, worker's comp insurance	e, disability insurance premiums,
as well as funds for healthcare reimbursement arrangements, 403(b) and a few immaterial incidental exp	enses.