

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2009, or tax year beginning 07/01, 2009, and ending 06/30, 20 10

2009

Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

▶ See instructions on back.

Name of exempt organization

Employer identification number

INTERNET CORP FOR ASSIGNED NAMES & NUMBE

95-4712218

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .	1b	<u>68318183.</u>
2a Form 990-EZ check here	▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	

Part II Declaration of Officer

6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2009 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Sign Here

Chitra Chelliah | 5/13/11
Signature of officer Date

COO
Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature	<u><i>T. Magdziuska</i></u>	Date	<u>05/13/2011</u>	Check if also paid preparer	<input checked="" type="checkbox"/>	Check if self-employed	<input type="checkbox"/>	ERO's SSN or PTIN	
	Firm's name (or yours if self-employed), address, and ZIP code	<u>ERNST & YOUNG U.S. LLP</u>			EIN	<u>34-6565596</u>				
		<u>4370 LA JOLLA VILLAGE DRIVE STE 500</u>			Phone no.	<u>858-535-7200</u>				
		<u>SAN DIEGO</u>				<u>CA 92122</u>				

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer's Use Only	Preparer's signature		Date		Check if self-employed	<input type="checkbox"/>	Preparer's SSN or PTIN	
	Firm's name (or yours if self-employed), address, and ZIP code				EIN			
					Phone no.			

Return of Organization Exempt From Income Tax

2009

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning 07/01, 2009, and ending 06/30, 2010

Header section containing organization name (INTERNET CORP FOR ASSIGNED NAMES & NUMBERS), EIN (95-4712218), address (4676 ADMIRALTY WAY, MARINA DEL REY, CA), and principal officer (ROD BECKSTROM).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, governance metrics, and financial data for Prior Year and Current Year.

Part II Signature Block

Signature block containing a declaration of accuracy and a signature line for the officer.

Preparer information section including the preparer's signature, date (05-13-2011), firm name (ERNST & YOUNG U.S. LLP), and identifying number.

May the IRS discuss this return with the preparer shown above? (see instructions) Yes X No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. * Form 990 (2009)

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 41,372,330. including grants of \$ 431,482.) (Revenue \$ 64,096,971.)

SEE SCHEDULE O

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ▶ 41,372,330.

Part IV Checklist of Required Schedules

Table with 3 main columns: Question, Yes, No. Rows 1-20 contain various questions about organizational activities and reporting requirements. Row 12A includes a sub-table with Yes/No columns.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 21 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and Schedule O completion.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question number, description, and Yes/No columns. Includes rows for 1a, 1b, 1c, 2a, 2b, 3a, 3b, 4a, 4b, 5a, 5b, 5c, 6a, 6b, 7, 7a, 7b, 7c, 7d, 7e, 7f, 7g, 7h, 8, 9, 9a, 9b, 10, 10a, 10b, 11, 11a, 11b, 12a, 12b.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (15); 1b Enter the number of voting members that are independent (13); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a material diversion of the organization's assets? (X); 6 Does the organization have members or stockholders? (X); 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (X); 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? (X); 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (X); 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (X); 13 Does the organization have a written whistleblower policy? (X); 14 Does the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? (X).

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA,
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. [X] Own website [] Another's website [X] Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: JUAN OJEDA 4676 ADMIRALTY WAY, SUITE 330 MARINA DEL REY, CA 90292-6601 310-823-9358

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
HARALD TVEIT ALVSTRAND DIRECTOR	10.00	X					0.	0.	0.	
RAIMUNDO BECA DIRECTOR	10.00	X					0.	0.	0.	
ROD BECKSTROM DIRECTOR/PRESIDENT AND CEO	60.00	X		X			401,786.	0.	27,151.	
STEVEN CROCKER DIRECTOR	10.00	X					0.	0.	0.	
ROBERTO GAETANO DIRECTOR	10.00	X					0.	0.	0.	
STEVEN GOLDSTEIN DIRECTOR	10.00	X					0.	0.	0.	
DENNIS JENNINGS DIRECTOR	10.00	X					0.	0.	0.	
RITA RODIN JOHNSTON DIRECTOR	10.00	X					0.	0.	0.	
GONZALO NAVARRO DIRECTOR	10.00	X					0.	0.	0.	
RAYMOND A PLZAK DIRECTOR	10.00	X					0.	0.	0.	
RAJASEKHAR RAMARAJ DIRECTOR	10.00	X					0.	0.	0.	
GEORGE SADOWSKY DIRECTOR	10.00	X					0.	0.	0.	
MIKE SILBER DIRECTOR	10.00	X					0.	0.	0.	
JEAN-JACQUES SUBRENAT DIRECTOR	10.00	X					0.	0.	0.	
PETER DENGATE THRUSH DIRECTOR	10.00	X					0.	0.	0.	
BRUCE TONKIN DIRECTOR	10.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KATIM TOURAY DIRECTOR	10.00	X						0.	0.	0.
KUO-WEI WU DIRECTOR	10.00	X						0.	0.	0.
DOUGLAS BRENT CHIEF OPERATING OFFICER	60.00			X				421,573.	0.	45,803.
JOHN JEFFREY GENERAL COUNSEL	60.00			X				293,325.	0.	21,303.
PAUL LEVINS VP CORPORATE AFFAIRS	60.00			X				365,547.	0.	37,803.
KURT PRITZ SR VP STAKEHOLDER RELATIONS	60.00			X				311,948.	0.	37,803.
KEVIN WILSON CHIEF FINANCIAL OFFICER	60.00			X				198,402.	0.	37,683.
STEVE ANTONOFF DIRECTOR HUMAN RESOURCES	60.00				X			181,380.	0.	25,912.
DAVID CONRAD VP RESEARCH AND IANA STRATEGY	60.00				X			260,405.	0.	31,016.
DENISE MICHEL VP, POLICY DEVELOPMENT	60.00				X			261,706.	0.	40,303.
AMY STATHOS DEPUTY GENERAL COUNSEL	60.00				X			231,016.	0.	24,591.
THERESA SWINEHART VP, GLOBAL AND STRATEGIC PSHIP	60.00				X			255,259.	0.	26,466.
OLOF NORDLING DIR OF SERV. REL. & BRANCH MGR	60.00					X		243,723.	0.	40,636.
1b Total CONTINUED AT SCHEDULE J-2								5,246,408.	0.	720,622.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **68**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **51**

Part VIII Statement of Revenue

95-4712218

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions) . .	1e					
	f All other contributions, gifts, grants, and similar amounts not included above .	1f	1,666,781.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			1,666,781.			
Program Service Revenue		Business Code					
	2a DOMAIN NAME REGISTRY AND REGISTRAR FEES		900099	57,885,719.	57,885,719.		
	b SPONSORSHIPS		900099	948,585.	948,585.		
	c ADDRESS REGISTRY FEES		900099	823,000.	823,000.		
	d ACCREDITATION FEES		900099	4,058,667.	4,058,667.		
	e APPLICATION FEES		900099	381,000.	381,000.		
	f All other program service revenue						
	g Total. Add lines 2a-2f			64,096,971.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			2,454,129.			2,454,129.
	4 Income from investment of tax-exempt bond proceeds . . .			0.			
	5 Royalties			0.			
		(i) Real	(ii) Personal				
	6a Gross Rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)				0.		
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory			8,164,812.			
	b Less: cost or other basis and sales expenses			8,064,510.			
	c Gain or (loss)			100,302.			
	d Net gain or (loss)				100,302.		100,302.
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
c Net income or (loss) from fundraising events				0.			
9a Gross income from gaming activities. See Part IV, line 19	a						
b Less: direct expenses	b						
c Net income or (loss) from gaming activities				0.			
10a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory				0.			
Miscellaneous Revenue			Business Code				
11a _____							
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d				0.			
12 Total Revenue. See instructions				68,318,183.	64,096,971.	0.	2,554,431.

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) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	0.			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	431,482.	431,482.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	3,721,054.	2,581,072.	1,139,982.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	613,083.	425,259.	187,824.	
7 Other salaries and wages	12,332,791.	8,554,517.	3,778,274.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	1,597,874.	1,108,358.	489,516.	
9 Other employee benefits	1,563,123.	1,084,253.	478,870.	
10 Payroll taxes	1,211,150.	840,108.	371,042.	
11 Fees for services (non-employees):				
a Management	0.			
b Legal	3,524,294.	2,444,609.	1,079,685.	
c Accounting	71,855.		71,855.	
d Lobbying	420,070.	420,070.		
e Professional fundraising services. See Part IV, line 17	0.			
f Investment management fees	287,958.		287,958.	
g Other	15,628,645.	10,834,683.	4,793,962.	
12 Advertising and promotion	0.			
13 Office expenses	2,839,671.	1,969,738.	869,933.	
14 Information technology	1,007,801.	699,056.	308,745.	
15 Royalties	0.			
16 Occupancy	2,203,110.	1,528,177.	674,933.	
17 Travel	6,859,157.	4,757,821.	2,101,336.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	3,300.	2,289.	1,011.	
19 Conferences, conventions, and meetings	1,590,659.	1,590,659.		
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization . . .	1,484,937.	1,030,019.	454,918.	
23 Insurance	235,548.	163,387.	72,161.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>EXTERNAL COMMUNICATIONS</u>	548,609.	380,543.	168,066.	
b <u>DUES & SUBSCRIPTIONS</u>	354,534.	245,921.	108,613.	
c <u>BAD DEBT</u>	140,366.	97,364.	43,002.	
d <u>STAFF TRAINING</u>	54,620.	37,887.	16,733.	
e <u>MISCELLANEOUS</u>	209,124.	145,058.	64,066.	
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	58,934,815.	41,372,330.	17,562,485.	0.
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,218,080.	1	344,042.
	2 Savings and temporary cash investments	25,903,777.	2	16,860,912.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	11,737,086.	4	16,723,357.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	20,720.	5	0.
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	919,493.	9	328,583.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,242,435.		
	b Less: accumulated depreciation	10b 2,581,106.	2,645,589.	10c 2,661,329.
	11 Investments - publicly traded securities	30,438,835.	11	45,680,165.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	344,898.	15	394,975.
16 Total assets. Add lines 1 through 15 (must equal line 34)	73,228,478.	16	82,993,363.	
Liabilities	17 Accounts payable and accrued expenses	9,746,165.	17	5,682,085.
	18 Grants payable		18	
	19 Deferred revenue	10,204,858.	19	12,603,416.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	7,000.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	19,958,023.	26	18,285,501.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	53,270,455.	27	64,707,862.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	53,270,455.	33	64,707,862.	
34 Total liabilities and net assets/fund balances	73,228,478.	34	82,993,363.	

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form **990** (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)

- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a Type I b Type II c Type III - Functionally integrated d Type III - Other

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 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) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Rows include: 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)); 15 Public support percentage from 2008 Schedule A, Part II, line 14; 16a 33 1/3 % support test - 2009; b 33 1/3 % support test - 2008; 17a 10%-facts-and-circumstances test - 2009; b 10%-facts-and-circumstances test - 2008; 18 Private foundation.

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	277,585.	815,954.	1,583,406.	1,567,752.	1,666,781.	5,911,478.
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	24,091,759.	43,345,759.	48,791,338.	58,675,378.	64,096,971.	239,001,205.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	24,369,344.	44,161,713.	50,374,744.	60,243,130.	65,763,752.	244,912,683.
7a 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	9,875,250.	21,408,494.	26,985,551.	31,350,698.	37,586,921.	127,206,914.
c Add lines 7a and 7b	9,875,250.	21,408,494.	26,985,551.	31,350,698.	37,586,921.	127,206,914.
8 Public support (Subtract line 7c from line 6.)						117,705,769.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	24,369,344.	44,161,713.	50,374,744.	60,243,130.	65,763,752.	244,912,683.
10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	98,927.	433,258.	1,171,468.	2,456,325.	2,454,129.	6,614,107.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	98,927.	433,258.	1,171,468.	2,456,325.	2,454,129.	6,614,107.
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 IV.)	0.	152.	499.	0.	0.	651.
13 Total support. (Add lines 9, 10c, 11, and 12.)	24,468,271.	44,595,123.	51,546,711.	62,699,455.	68,217,881.	251,527,441.
14 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) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	46.80 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	50.91 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	2.63 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	2.07 %

- 19 a 33 1/3 % support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3 % support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

LINE 12 - OTHER INCOME

LINE 12, 2006 = \$152 MISC. INCOME

LINE 12, 2007 = \$499 MISC. INCOME

Schedule of Contributors

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

2009

Name of the organization INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBER	Employer identification number 95-4712218
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Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

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

Name of organization	INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBER	Employer identification number	95-4712218
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	NOMINET UK MINERVA HOUSE, OXFORD SCIENCE PARK OXFORD UNITED KINGDOM	\$ 235,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	.AU DOMAIN ADMINISTRATION 114 CARDIGAN STREET 3053 CARLTON, VICTORIA AUSTRALIA	\$ 209,505.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	STICHTING INTERNET DOMEINREGISTRATIE NED P.O. BOX 5022 6802 EA ARNHEM NETHERLANDS	\$ 105,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	JAPAN REGISTRY SERVICE CO. LTD CHIYODA FIRST BLDG. EAST 13-F, 3-8-1 NIS CHIYODA-KU, TOKYO JAPAN	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	DENIC EG KAISERSTRASSE 75-77 D-60329 FRANKFURT AM MAIN GERMANY	\$ 90,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	CIRA 350 SPARKS STREET, SUITE 306 K1R 7S8 OTTAWA CANADA	\$ 85,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBER	Employer identification number	95-4712218
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	IIT - CNR INSTITUTE VIA MORUZZI, 1 I-56124 PISA ITALY	\$ 85,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	SWITCH (CH) WERDSTRASSE 2 CH-8004 ZURICH SWITZERLAND	\$ 70,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	COORDINATION CENTER FOR TLD RU #433, M-II, WTC, 12, KRASNOPRESNENSKAYA MOSCOW RUSSIA	\$ 55,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	AFNIC 2 RUE STEPHENSON-MONTIGNY-LE-BRETONNEUX SAINT-QUENTIN-EN-YVELINES CEDEX FRANCE	\$ 44,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	TAIWAN NETWORK INFORMATION CENTER 4F-2 NO 9 , ROOSEVELT ROAD, SECTION 2 10 TAIPEI TAIWAN	\$ 42,654.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	DNS-BE VZW UBICENTER, PHILIPSSITE 5, BUS 13 B-3001 LEUVEN BELGIUM	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBER	Employer identification number	95-4712218
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	EURID VZW/ASBL PARKSTATION, WOLUWELAAN 150 1831 DIEGEM VLAAMS BRABANT BELGIUM	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	NEUSTAR 46000 CENTER OAK PLAZA STERLING, VA 20164	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	NUCLEO DE INFORMACAO E COORDENACAO DO AV DAS NACOES UNIDAS, N 11541, 7 ANDAR SAO PAULO BRAZIL	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	UNINETT NORID AS ABELSGATE 5 N-7465 TRONDHEIM NORWAY	\$ 31,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	INTERNET INFRASTRUCTURE FOUNDATION PO BOX 7399 SE-103 91 STOCKHOLM SWEDEN	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	KOREAN INTERNET & SECURITY AGE 12F, DAEDONG BLDG., 109 JUNGDAE-GU 138-9 SEOUL KOREA, REPUBLIC OF (SOUTH)	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBER	Employer identification number	95-4712218
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	NIC-MEXICO AV. EUGENIO GARZA SADA 427, LOC. 4,5,6 6 MONTERREY NEUVO LEON MEXICO	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
20	DANSK INTERNET FORUM KALVEBOD BRYGGE 43, 4TH FLOOR DK-1560 COPENHAGEN V. DENMARK	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
21	COUNCIL OF HUNGARIAN INTERNET PROVIDERS VICTOR HUGO 18-22 H-1132 BUDAPEST HUNGARY	\$ 22,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
22	INTERNET USERS SOCIETY NIUE 266 MAIN ST., STE. 31 2052 MEDFIELD NIUE	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
23	NIC.AT JAKOB-HARINGER-STRASSE 8 A-5020 SALZBURG AUSTRIA	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
24	CZ.NIC, Z.S.PO AMERICKA 23 2 120 00 PRAGUE CZECH REPUBLIC	\$ 17,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBER	Employer identification number	95-4712218
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25	INTERNETNZ PO BOX 11881 6142 WELLINGTON NEW ZEALAND	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
26	UNIVERSIDAD DE CHILE RUT. 60.910.000-1, MIRAFLORES 222 PISO 14 SANTIAGO CHILE	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
27	NATL INSTITUTE FOR R&D IN INFORMATICS BD. AVERESCU 8-10, SECTOR 1 11454 BUCHAREST ROMANIA	\$ 12,936.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
28	HONG KONG INTERNET REGISTRATION CORP LTD 308 DES VOEUX ROAD CENTRAL SHEUNG WAN CHINA	\$ 12,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
29	UNIVERSITY OF LOS ANDES CARRERA 1A NO. 18A-70 BOGOTA, CUNDINAMARCO COLOMBIA	\$ 8,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
30	AS DOMAIN REGISTRY REGISTRAR, PO BOX 997303 96799 PAGO PAGO AMERICAN SAMOA	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBER	Employer identification number	95-4712218
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31	FINNISH COMMUNICATIONS REG AUTHORITY PO BOX 313 FI-00181 HELSINKI FINLAND	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
32	ACADEMIC AND RESEARCH NETWORK- SLOVENIA JAMOVA 39 1000 LJUBLJANA SLOVENIA	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
33	GAUSS RESEARCH LABORATORY, INC. PO BOX 21613 00931-1613 SAN JUAN PUERTO RICO	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
34	ICS-FORTH GR 100 VASSILIKA VOUTON, HERAKLION GR-700 1 CRETE GREECE	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
35	RESTENA 6, RUE COUDENHOVE-KALERGI L-1359 LUXEMBOURG LUXEMBOURG	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
36	SINGAPORE NETWORK INFORMATION CENTER SUNTEC TOWER THREE #14-00 38988 SINGAPORE SINGAPORE	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBER	Employer identification number 95-4712218
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
37	UNIVERSITY OF LATVIA RAINIS BOULEVARD 29 LV-1459 RIGA LATVIA	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
38	VIRGIN ISLANDS PUBLIC TELCOMMUNICATIONS CORPORATE PLACE, ROYAL DANE MALL 802 ST. THOMAS SYDNEY, NSW VIRGIN ISLANDS	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
39	VERISIGN, INC. 501 E. MIDDLEFIELD ROAD MOUNTAIN VIEW, CA 94043	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization INTERNET CORP FOR ASSIGNED NAMES & NUMBERS	Employer identification number 95-4712218
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group.
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		420,070.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities? If "Yes," describe in Part IV		X	
j Total. Add lines 1c through 1i			420,070.
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		X	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

LOBBYING EXPENDITURES

SCHEDULE C PART II-B

THE ORGANIZATION UTILIZED THE SERVICES OF TWO GOVERNMENT AFFAIRS FIRMS

DURING THE YEAR ENDED JUNE 30, 2010. AS PART OF THE SERVICES PROVIDED,

THE GOVERNMENT AFFAIRS FIRMS INCURRED \$420,070 OF LOBBYING EXPENDITURES

RELATED TO LOBBYING WITH FEDERAL LEGISLATORS.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990. See separate instructions.

Name of the organization

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution..., 3 Number of conservation easements modified..., 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy..., 6 Staff and volunteer hours devoted to monitoring..., 7 Amount of expenses incurred..., 8 Does each conservation easement reported on line 2(d) above satisfy the requirements..., 9 In Part XIV, describe how the organization reports conservation easements...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116, not to report..., 1b If the organization elected, as permitted under SFAS 116, to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included..., b Assets included...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 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? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XI V and complete the following table:
- | | Amount |
|---|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XI V.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment ▶ _____ %
 - b Permanent endowment ▶ _____ %
 - c Term endowment ▶ _____ %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		608,036.	256,212.	351,824.
d Equipment		4,061,876.	1,988,381.	2,073,495.
e Other		572,523.	336,513.	236,010.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,661,329.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	68,318,183.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	58,934,815.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	9,383,368.
4	Net unrealized gains (losses) on investments	4	2,053,824.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-192.
9	Total adjustments (net). Add lines 4 through 8	9	2,053,632.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	11,437,000.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	70,084,000.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	2,053,824.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	2,053,824.
3	Subtract line 2e from line 1	3	68,030,176.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	287,958.
b	Other (Describe in Part XIV.)	4b	49.
c	Add lines 4a and 4b	4c	288,007.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	68,318,183.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	58,647,000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	143.
e	Add lines 2a through 2d	2e	143.
3	Subtract line 2e from line 1	3	58,646,857.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	287,958.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	287,958.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	58,934,815.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIV Supplemental Information (continued)

FIN 48 FOOTNOTE

SCHEDULE D, PART X

ICANN ADOPTED THE PROVISIONS OF ASC 740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ON JULY 1, 2009. ASC 740-10 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTERPRISES'S FINANCIAL STATEMENTS. ASC 740-10 ALSO PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT STANDARD FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT FOR AN INCOME TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. ONLY TAX POSITIONS THAT MEET THE MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD AT THE EFFECTIVE DATE MAY BE RECOGNIZED OR CONTINUE TO BE RECOGNIZED UPON ADOPTION. IN ADDITION, ASC 740-10 PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE, AND TRANSITION. THE ADOPTION OF ASC 740-10 DID NOT HAVE A SIGNIFICANT IMPACT ON ICANN'S FINANCIAL STATEMENTS.

AS OF JUNE 30, 2010 AND 2009, ICANN HAD NO UNCERTAIN TAX POSITIONS REQUIRING ACCRUAL.

RECON OF CHANGE IN NET ASSETS FROM FORM 990 TO FINANCIAL STATEMENTS

SCHEDULE D, PART XI, LINE 8

ROUNDING: -\$192

RECON OF REV PER AUDITED FINANCIAL STATEMENTS W/ REVENUE PER RETURN

SCHEDULE D, PART XII, LINE 4B

ROUNDING: \$ 49

Part XIV Supplemental Information *(continued)*

RECON OF EXPENSES PER AUDITED FINANCIAL STATEMENTS W/ EXP PER RETURN

SCHEDULE D, PART XIII, LINE 2D

ROUNDING: \$143

**Schedule F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

- ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b line 15, or line 16.
- ▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
EUROPE (INCLUDING ICELAND AND	1	64	PROGRAM SERVICES	SEE FORM 990, PART III	5,727,173.
EAST ASIA AND THE PACIFIC	1	69	PROGRAM SERVICES	SEE FORM 990, PART III	4,859,351.
MIDDLE EAST AND NORTH AFRICA	0	2	PROGRAM SERVICES	SEE FORM 990, PART III	349,209.
NORTH AMERICA	0	1	PROGRAM SERVICES	SEE FORM 990, PART III	883,166.
CENTRAL AMERICA/CARIBBEAN	0	1	PROGRAM SERVICES	SEE FORM 990, PART III	30,066.
SOUTH AMERICA	0	0	PROGRAM SERVICES	SEE FORM 990, PART III	21,575.
SOUTH ASIA	0	0	PROGRAM SERVICES	SEE FORM 990, PART III	26,894.
SUB-SAHARAN AFRICA	0	58	PROGRAM SERVICES	SEE FORM 990, PART III	2,101,513.
RUSSIA/INDEPENDENT STATES	0	0	PROGRAM SERVICES	SEE FORM 990, PART III	23,363.
Totals	2	195			14,022,310.

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

Schedule F (Form 990) 2009

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000
 Use Schedule F-1 (Form 990) if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			MIDDLE EAST/NORTH AFRICA	MENOG 5 SPONSORSHIP	10,000.	CHECK			
			MIDDLE EAST/NORTH AFRICA	IGF & AFTLD SPONSORSHIP	25,000.	CHECK			
			SOUTH AMERICA	MEETING SPONSORSHIP	8,475.	CHECK			
			MIDDLE EAST/NORTH AFRICA	AFTLD SPONSORSHIP	10,000.	CHECK			
			CENT. AMERICA/CARIBBEAN	MEETING SPONSORSHIP	20,000.	CHECK			
			EAST ASIA/PACIFIC	MEETING SPONSORSHIP	6,500.	CHECK			
			CENT. AMERICA/CARIBBEAN	ICT ROADSHOW SPONSORSHIP	10,000.	CHECK			
			RUSSIA	MSU 2010 SPONSORSHIP	10,000.	CHECK			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 0
 3 Enter total number of other organizations or entities 8

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIP PROGRAM	SOUTH AMERICA	4	2,000.	WIRE/CASH	20,971.	AIRFARE/LODG	ACTUAL EXP.
FELLOWSHIP PROGRAM	SOUTH ASIA	6	3,000.	WIRE/CASH	19,635.	AIRFARE/LODG	ACTUAL EXP.
FELLOWSHIP PROGRAM	SUB-SAHARAN AFRICA	20	9,500.	WIRE/CASH	63,122.	AIRFARE/LODG	ACTUAL EXP.
FELLOWSHIP PROGRAM	RUSSIA	7	3,500.	WIRE/CASH	23,466.	AIRFARE/LODG	ACTUAL EXP.
FELLOWSHIP PROGRAM	EUROPE/ICELAND/GREENLAND	7	4,000.	WIRE/CASH	27,610.	AIRFARE/LODG	ACTUAL EXP.
FELLOWSHIP PROGRAM	EAST ASIA/PACIFIC	15	8,000.	WIRE/CASH	63,109.	AIRFARE/LODG	ACTUAL EXP.
FELLOWSHIP PROGRAM	MIDDLE EAST/NORTH AFRICA	7	4,500.	WIRE/CASH	28,893.	AIRFARE/LODG	ACTUAL EXP.
FELLOWSHIP PROGRAM	CENT. AMERICA/CARIBBEAN	6	3,000.	WIRE/CASH	23,428.	AIRFARE/LODG	ACTUAL EXP.
FELLOWSHIP PROGRAM	NORTH AMERICA	1	500.	WIRE/CASH	3,273.	AIRFARE/LODG	ACTUAL EXP.

Part IV Supplemental Information

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

ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE THE US
 SCHEDULE F, PART 1, LINE 2

AN ICANN FELLOWSHIP IS A GRANT OF SUPPORT WHICH IS AWARDED TO ENABLE
 INDIVIDUALS FROM STAKEHOLDER GROUPS AROUND THE WORLD TO ATTEND ICANN
 MEETINGS. THIS IS A MEANS TESTED PROGRAM. APPLICANTS MUST BE CITIZENS OF
 ECONOMICALLY ELIGIBLE COUNTRIES. ICANN USES THE WORLD BANK CLASSIFICATION
 OF LOW, LOWER-MIDDLE, AND UPPER-MIDDLE ECONOMIES. THE FELLOWSHIP COVERS
 THE COST OF ECONOMY CLASS AIRFARE AND HOTEL, AS WELL AS PROVIDING A
 STIPEND AFTER SUCCESSFUL COMPLETION OF THE PROGRAM, IN ORDER TO ASSIST IN
 COVERING SOME BASIC EXPENSES INCURRED BY THE FELLOW. RECIPIENTS ARE
 EXPECTED TO ACTIVELY CONTRIBUTE TO ICANN PROCESSES AND BE A PART OF THE
 NEXT GENERATION OF ICANN LEADERSHIP.

FELLOWSHIPS ARE AWARDED BY AN INDEPENDENT SELECTION COMMITTEE BASED ON A
 MIX OF CRITERIA INCLUDING APPLICANT EXPERIENCE AND REFERENCES, GEOGRAPHIC
 PROXIMITY TO MEETING, RECEIPT OF PAST FELLOWSHIPS, ETC. ICANN STAFF AND
 THE SELECTION COMMITTEE HAVE MAINTAINED A "3X" RULE FOR RECEIVING THIS
 GRANT OF SUPPORT.

FOR EACH REGIONAL MEETING THAT INCORPORATES THE FELLOWSHIP PROGRAM, A
 LIST OF SELECTED FELLOWS TO ATTEND THE UPCOMING MEETING IS POSTED ON THE
 ICANN WEBSITE PRIOR TO THE MEETING.

SUBSEQUENT TO THE REGIONAL MEETING, A LIST OF FELLOWS WHO ATTENDED THE
 MEETING IS POSTED ON THE ICANN WEBSITE SUBSEQUENT TO THE MEETING.

TRAVEL AND HOTEL COSTS FOR FELLOWS PRE-SELECTED TO ATTEND THE FELLOWSHIP

Part IV Supplemental Information

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

MEETING ARE BOOKED AND PAID DIRECTLY BY ICANN.

ALL FELLOWS ARE ELIGIBLE TO RECEIVE A FLAT STIPEND NOT TO EXCEED US \$500.00. STIPENDS ARE PROVIDED TO FELLOWS BY WIRE TRANSFER, AND ARE PAID TO EACH FELLOW SUBSEQUENT TO THE MEETING AFTER THE FELLOW HAS DEMONSTRATED COMPLETION OF THE FELLOWSHIP PROGRAM.

DURING THE TWELVE MONTHS ENDED JUNE 30, 2010, ICANN PAID \$311,507 TO ALLOW SEVENTY-THREE FELLOWSHIP PARTICIPANTS TO ATTEND THREE ICANN MEETINGS.

ICANN ALSO PROVIDES TRAVEL SUPPORT TO OTHER MEMBERS OF THE VOLUNTEER COMMUNITY TO FACILITATE POLICY DEVELOPMENT EFFORTS AND OUTREACH IMPORTANT TO ICANN'S MISSION. THE PROCESS FOR SELECTION IS LARGELY BASED ON SPECIFIC CRITERIA ESTABLISHED BY EACH STAKEHOLDER/CONSTITUENCY GROUP. TRAVEL SUPPORT EXTENDED TO THESE GROUPS IS REPORTED AS PART OF TRAVEL EXPENSES IN PART II, STATEMENT OF FUNCTIONAL EXPENSES.

FOR OTHER CONTRIBUTIONS, ICANN GLOBAL PARTNERSHIPS STAFF DEVELOP REQUESTS BASED UPON THE ICANN STRATEGIC PLAN AND OPERATING PLAN. SPECIFIC NEEDS WITHIN SPECIFIC REGIONS OF THE WORLD ARE CONSIDERED. ICANN EXECUTIVES REVIEW THE LIST OF SUGGESTED CONTRIBUTIONS AND DECIDE ON WHICH CONTRIBUTIONS TO PURSUE. THE ICANN BOARD AND COMMUNITY CONSIDER THE CONTRIBUTIONS WITHIN THE OVERALL FISCAL YEAR OPERATING PLAN AND BUDGET PROCESS.

Part IV Supplemental Information

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

SUPPLEMENTAL INFORMATION

SCHEDULE F, PART I, LINE 3

THE INTERNATIONAL OFFICES INCLUDED ON PART I LINE 3(B) OF SCHEDULE F ARE

THE SYDNEY, AUSTRALIA AND BRUSSELS, BELGIUM ICANN OFFICES. THE NUMBER OF

EMPLOYEES IN EACH REGION SHOWN IN PART I LINE 3(C) OF SCHEDULE F INCLUDES

THOSE STAFF OR CONTRACTED STAFF WORKING IN EACH REGION AND THE NUMBER OF

ICANN STAFF ATTENDING SEOUL (67), NAIROBI (58), AND BRUSSELS (59)

INTERNATIONAL MEETINGS DURING FISCAL YEAR 2010. IN ADDITION, AN ESTIMATE

OF THOSE OFFICERS AND OTHER EXECUTIVES WHO VISITED EACH REGION WAS

INCLUDED.

THE TOTAL EXPENDITURES BY REGION SHOWN IN PART I LINE 3(F) OF SCHEDULE F

INCLUDE:

* THE AMOUNTS PAID (FOR STAFF COMPENSATION, TRAVEL REIMBURSEMENT, AND OTHER STAFF AND VENDOR COSTS) FROM THE US ACCOUNTS PAYABLE DEPARTMENT IN INTERNATIONAL CURRENCIES APPLICABLE TO THE REGION

*ALL COSTS ASSOCIATED WITH THE THREE ANNUAL INTERNATIONAL MEETINGS (I.E. SEOUL, NAIROBI, AND BRUSSELS FOR FISCAL YEAR 2010);

* AMOUNTS EXPENDED TO FUND THE SYDNEY, AUSTRALIA OFFICE AND PERSONNEL COSTS INCLUDING OFFICE EXPENSES, TRAVEL RELATED AND OTHER EXPENSES PAID BY THE US ACCOUNTS PAYABLE DEPARTMENT;

* AMOUNTS PAID TO ARGO PACIFIC, THE FORMER CEO'S COMPANY, FOR COMPENSATION AND EXPENSES OF THE FORMER CEO; AND

* ALL PAYMENTS MADE TO INTERNATIONAL BASED EMPLOYEES AND CONTRACTED STAFF THAT WERE PAID IN US DOLLARS.

* ESTIMATES OF TRAVEL COSTS ASSOCIATED WITH THOSE EXECUTIVES WHO TRAVEL FREQUENTLY WERE MADE AND THOSE ESTIMATED COSTS WERE ALLOCATED BY REGION.

Part IV Supplemental Information

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

ESTIMATE WAS BASED ON ACTUAL BOOKED FLIGHTS EXCLUDING AMOUNTS OTHERWISE

INCLUDED IN THE ACCOUNTING OF THE 3 INTERNATIONAL MEETINGS IN SEOUL,

NAIROBI, AND BRUSSELS.

* NOTE THAT PROFESSIONAL SERVICE PROVIDERS AND OTHER COMPARABLE VENDORS

ARE NOT TREATED AS AGENTS FOR THIS PURPOSE.

**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" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input checked="" type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2009

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

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

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ROD BECKSTROM	(i)	401,786.	0.	0.	16,500.	10,651.	428,937.
	(ii)	0.	0.	0.	0.	0.	0.
PAUL TWOMEY	(i)	712,709.	217,092.	0.	0.	213,517.	1,143,318.
	(ii)	0.	0.	0.	0.	0.	0.
DOUGLAS BRENT	(i)	270,000.	118,653.	32,920.	24,500.	21,303.	467,376.
	(ii)	0.	0.	0.	0.	0.	0.
JOHN JEFFREY	(i)	230,000.	63,325.	0.	0.	21,303.	314,628.
	(ii)	0.	0.	0.	0.	0.	0.
PAUL LEVINS	(i)	220,000.	57,306.	88,241.	16,500.	21,303.	403,350.
	(ii)	0.	0.	0.	0.	0.	0.
KURT PRITZ	(i)	245,000.	66,948.	0.	16,500.	21,303.	349,751.
	(ii)	0.	0.	0.	0.	0.	0.
KEVIN WILSON	(i)	168,000.	30,402.	0.	24,500.	13,183.	236,085.
	(ii)	0.	0.	0.	0.	0.	0.
STEVE ANTONOFF	(i)	156,219.	25,161.	0.	11,669.	14,243.	207,292.
	(ii)	0.	0.	0.	0.	0.	0.
DAVID CONRAD	(i)	180,000.	31,005.	49,400.	16,500.	14,516.	291,421.
	(ii)	0.	0.	0.	0.	0.	0.
DENISE MICHEL	(i)	206,098.	55,608.	0.	19,000.	21,303.	302,009.
	(ii)	0.	0.	0.	0.	0.	0.
AMY STATHOS	(i)	194,670.	36,346.	0.	16,500.	8,091.	255,607.
	(ii)	0.	0.	0.	0.	0.	0.
THERESA SWINEHART	(i)	204,000.	51,259.	0.	18,375.	8,091.	281,725.
	(ii)	0.	0.	0.	0.	0.	0.
OLOF NORDLING	(i)	187,697.	56,026.	0.	0.	40,636.	284,359.
	(ii)	0.	0.	0.	0.	0.	0.
MARCO LORENZONI	(i)	189,199.	43,111.	0.	0.	14,183.	246,493.
	(ii)	0.	0.	0.	0.	0.	0.
ELIZABETH GASTER	(i)	195,000.	30,690.	0.	22,000.	14,516.	262,206.
	(ii)	0.	0.	0.	0.	0.	0.
MASSIMILIANO MINISCI	(i)	171,831.	46,619.	0.	0.	19,897.	238,347.
	(ii)	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2009

Part III Supplemental Information

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

SUPPLEMENTAL COMPENSATION INFORMATION

AMOUNTS LISTED IN PART VII OF THE FORM 990 AND SCHEDULE J REPRESENT

AMOUNTS FOR THE 2009 CALENDAR YEAR.

BENEFIT OPTIONS ARE THE SAME FOR ALL EMPLOYEES.

SCHEDULE J, PART I, LINE 1A

HOUSING ALLOWANCES WERE PROVIDED TO THE FOLLOWING OFFICERS AND KEY

EMPLOYEE: DOUGLAS BRENT, PAUL LEVINS AND DAVID CONRAD

THESE BENEFITS WERE TAXABLE AND INCLUDED IN THE W-2, BOX 5 AMOUNTS

REPORTED IN FORM 990, PART VII.

FOR FIRST CLASS TRAVEL:

IN THE CASES WHERE FIRST CLASS TRAVEL WAS BOOKED, IT WAS IDENTIFIED AS

THE LOWEST FARE AVAILABLE AT THE TIME THE TRAVEL WAS REQUIRED.

THESE AMOUNTS WERE FOR BUSINESS PURPOSES AND WERE NOT REPORTED AS INCOME

Part III Supplemental Information

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

ON THE EMPLOYEES' W-2S.

FOR COMPANION TRAVEL:

ICANN'S TRAVEL GUIDELINES DO NOT PERMIT SPOUSAL OR FAMILY TRAVEL.

EXCEPTIONS TO THIS POLICY HAVE BEEN MADE REGARDING SPOUSAL AND FAMILY

TRAVEL EXPENDITURES FOR A VERY LIMITED NUMBER OF INSTANCES RELATING TO

EXPATRIATION OR LIVING AWAY FROM EMPLOYEE/FAMILY'S PERMANENT DOMICILE.

PAUL LEVINS MOVED OFFICES WITHIN ICANN FROM LOS ANGELES TO WASHINGTON,

D.C. IN JULY 2009. ICANN PAID TO MOVE HIS FAMILY. IN DECEMBER 2009, PAUL

LEVINS ENDED HIS TENURE WITH ICANN. ICANN REPATRIATED MR. LEVINS AND HIS

FAMILY TO THEIR CITY/COUNTRY OF ORIGIN - SYDNEY, AUSTRALIA. COST OF

AIRFARE FOR BOTH MOVES WAS NOT INCLUDED IN THE W-2, BOX 5 AMOUNTS

REPORTED IN FORM 990, PART VII.

SCHEDULE J, PART I, LINE 7

REGARDING BONUSES:

THE OVERARCHING OBJECTIVE OF ICANN'S REMUNERATION FRAMEWORK IS TO ENSURE

Part III Supplemental Information

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

REMUNERATION PROVIDED IT IS COMPETITIVE GLOBALLY AND THAT IT PROVIDES
STAFF WITH APPROPRIATE MOTIVATION FOR HIGH PERFORMANCE TOWARDS AGREED
OBJECTIVES. THIS FRAMEWORK IS DESCRIBED IN DETAIL WITHIN THE "ICANN
COMPENSATION - 2010" DOCUMENT WHICH CAN BE FOUND AT THE FOLLOWING URL:
[HTTP://ICANN.ORG/EN/FINANCIALS/CURRENT-YEAR.HTM.](http://icann.org/en/financials/current-year.htm)

SCHEDULE J, PART II
IN CALENDAR YEAR 2009, COMPENSATION AND BENEFITS WERE PROVIDED FOR DR.
PAUL TWOMEY'S SERVICES THROUGH AN AGREEMENT WITH ARGO PACIFIC PYT
LIMITED, AN AUSTRALIAN PROPRIETARY COMPANY. DR. TWOMEY, THE CEO OF ICANN
FROM JANUARY 1, 2009 TO JUNE 30, 2009, AND THE SENIOR PRESIDENT OF ICANN
FROM JULY 1, 2009 TO DECEMBER 31, 2009, IS A DIRECTOR OF ARGO PACIFIC.

PURSUANT TO THE AGREEMENT, DURING THE CALENDAR YEAR 2009, ARGO PACIFIC
WAS PAID \$929,801 ASSOCIATED WITH DR. TWOMEY'S COMPENSATION, \$712,709 IN
BASE COMPENSATION, AND \$217,092 IN BONUSES. ARGO PACIFIC'S AGREEMENT WITH
ICANN IS DEMONINATED IN AUSTRALIAN DOLLARS. ICANN'S FUNCTIONAL CURRENCY
IS U.S. DOLLARS, THUS THE PAYMENTS TO ARGO PACIFIC ARE IMPACTED BY

Part III Supplemental Information

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

EXCHANGE RATE FLUCTUATIONS BETWEEN THE U.S. DOLLAR AND AUSTRALIAN DOLLAR.

THE COMPENSATION AND BENEFITS PAYMENTS MADE TO ARGO PACIFIC FOR DR. TWOMEY'S SERVICES WERE STRUCTURED AND APPROVED BY THE ICANN BOARD'S COMPENSATION COMMITTEE AND ICANN'S BOARD OF DIRECTORS.

ICANN'S OVERALL COMPENSATION PHILOSOPHY IS TO TARGET COMPENSATION BETWEEN THE 50TH AND 75TH PERCENTILE OF THE MARKET, TO ATTRACT AND RETAIN THE RIGHT STAFF. THE DRIVING ELEMENT OF THIS PHILOSOPHY IS THAT ICANN'S COMPENSATION IS MARKET-BASED.

ICANN HAS EMPLOYEES IN MANY DIFFERENT PARTS OF THE WORLD, AND STRIVES TO APPLY THIS PHILOSOPHY LOCALLY. EMPLOYMENT MARKETS AROUND THE WORLD ARE QUITE DIFFERENT, AND ALSO BRING DIFFERENT TAX, BENEFIT AND OTHER LOCAL CONDITIONS TO BEAR.

NOTABLY, BELGIUM, WHERE ICANN HAS SEVERAL STAFF MEMBERS, REPRESENTS QUITE

Part III Supplemental Information

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

A DIFFERENT JOB MARKET THAN THE U.S. EMPLOYMENT MARKET. BASE COMPENSATION

RATES IN BELGIUM ARE HIGHER DUE TO DIFFERENCES IN TAX RATES AND OTHER

FACTORS SUCH AS NATIONAL MEDICAL PROGRAMS. IN ADDITION, EXCHANGE RATE

FLUCTUATIONS ALSO AFFECT THE U.S. DOLLAR EQUIVALENCE OF THE

BRUSSELS-BASED STAFF. THEREFORE, THE DOLLAR-DENOMINATED COMPENSATION OF

ICANN'S BRUSSELS-BASED STAFF IS HIGHER THAN THEIR U.S.-BASED

COUNTERPARTS.

**SCHEDULE J-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule J (Form 990)

▶ Attach to Form 990 to list additional information for Schedule J (Form 990), Part II.
▶ See Instructions for Schedule J (Form 990).

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (Schedule J, Part II)

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
MARGARET MILAM	(i)	166,811.	45,548.	1,728.	19,045.	20,994.	254,126.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No. 1545-0047

2009

Open To Public Inspection

Name of the organization INTERNET CORP FOR ASSIGNED NAMES & NUMBERS	Employer identification number 95-4712218
---	---

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$ _____

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

Part IV Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
MELBOURNE IT	BRUCE TONKIN - OFFICER	833,000.	SEE SCHEDULE O		X

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule L (Form 990 or 990-EZ) 2009

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990
Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

INTERNET CORP FOR ASSIGNED NAMES & NUMBERS

Employer identification number

95-4712218

ATTACHMENT 1

ORGANIZATION'S MISSION

FORM 990, PART I, LINE 1 AND PART III, LINE 1

THE MISSION OF THE INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBERS ("ICANN") IS TO COORDINATE, AT THE OVERALL LEVEL, THE GLOBAL INTERNET'S SYSTEMS OF UNIQUE IDENTIFIERS, AND IN PARTICULAR TO ENSURE THE STABLE AND SECURE OPERATION OF THE INTERNET'S UNIQUE IDENTIFIER SYSTEMS.

SEE ADDITIONAL INFORMATION ABOUT ICANN'S PROGRAMS AND ACTIVITIES ON THE ICANN WEBSITE AND IN THE ICANN ANNUAL REPORT POSTED AT ICANN.ORG.

GOVERNING BODY

FORM 990, PART I, LINE 3 AND PART VI, LINE 1A

IN ADDITION TO THE VOTING MEMBERS OF THE BOARD OF DIRECTORS, ICANN'S BYLAWS AS OF JUNE 30, 2010 ALLOWED FOR 6 NON-VOTING LIAISONS. THE NON-VOTING LIAISONS ARE ENTITLED TO ATTEND BOARD MEETINGS, PARTICIPATE IN BOARD DISCUSSIONS AND DELIBERATIONS, AND HAVE ACCESS (UNDER CONDITIONS ESTABLISHED BY THE BOARD) TO MATERIALS PROVIDED TO DIRECTORS FOR USE IN BOARD DISCUSSIONS, DELIBERATIONS AND MEETINGS.

THE FOLLOWING INDIVIDUALS SERVED AS NON-VOTING LIAISONS DURING THE FISCAL YEAR ENDING JUNE 2010:

1. HEATHER DRYDEN
2. JANIS KARKLINS
3. RAM MOHAN
4. THOMAS NARTEN

Name of the organization INTERNET CORP FOR ASSIGNED NAMES & NUMBERS	Employer identification number 95-4712218
<u>ATTACHMENT 1 (CONT'D)</u>	

5. THOMAS ROESSLER
6. VANDA SCARTEZINI
7. WENDY SELTZER
8. JONNE SOININEN
9. SUZANNE WOOLF

PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINE 4

ICANN IS A GLOBAL MULTI-STAKEHOLDER ORGANIZATION THAT COORDINATES THE INTERNET DOMAIN NAME SYSTEM (DNS) AND ADDRESSING FOR THE BENEFIT OF INTERNET USERS WORLDWIDE, ENABLING A SINGLE, INTEROPERABLE INTERNET. ICANN'S COMMUNITY-DEVELOPED POLICIES GOVERN OVER 180 MILLION DOMAIN NAMES, AND THE ALLOCATION OF ONE BILLION NETWORK ADDRESSES. CONNECTING BILLIONS OF COMPUTERS, PHONES, AND OTHER DEVICES ACROSS THE INTERNET, DNS CYBER-SECURITY IS A TOP PRIORITY. SEE ADDITIONAL INFORMATION ABOUT ICANN'S PROGRAMS AND ACTIVITIES ON THE ICANN WEBSITE AND IN THE ICANN ANNUAL REPORT POSTED AT ICANN.ORG.

LOCAL CHAPTERS, BRANCHES AND AFFILIATES

FORM 990, PART VI, LINE 10A AND 10B

ICANN HAS OFFICES IN BRUSSELS, BELGIUM AND SYDNEY, AUSTRALIA, WHICH PROVIDE OPERATIONAL SUPPORT TO THEIR RESPECTIVE GEOGRAPHICAL REGIONS.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11

A COPY OF THE FORM 990 IS PROVIDED TO ICANN'S BOARD MEMBERS BEFORE IT IS FILED. THE PROCESS BY WHICH THE FORM 990 IS PREPARED, REVIEWED AND

Name of the organization INTERNET CORP FOR ASSIGNED NAMES & NUMBERS	Employer identification number 95-4712218
<u>ATTACHMENT 1 (CONT'D)</u>	

RECEIVED IS AS FOLLOWS:

1. ICANN ENGAGES AN OUTSIDE TAX PREPARER TO ASSIST IN THE PREPARATION OF ITS FORM 990.
2. ICANN'S EXECUTIVE TEAM INCLUDING CONTROLLER, COO, GENERAL COUNSEL, AND CEO REVIEWS THE FORM 990, AND SIGNS OFF FOR APPROVAL.
3. THE FORM 990 IS PROVIDED TO THE ICANN BOARD MEMBERS.
4. FOR THE 2008 FORM 990, THE ICANN BOARD RECEIVED TRAINING ON HOW TO RECEIVE/REVIEW THE FORM 990 DURING A TRAINING SEMINAR DEVELOPED BY ICANN'S EXTERNAL TAX ADVISORS. MOST BOARD MEMBERS THAT RECEIVED THIS TRAINING WERE ACTIVE BOARD MEMBERS AT THE TIME THE 2009 990 WAS COMPLETED.

CONFLICTS OF INTEREST POLICY

FORM 990, PART VI, LINE 12C

ICANN HAS A WRITTEN CONFLICTS OF INTEREST POLICY. THE OFFICE OF THE GENERAL COUNSEL MONITORS THE POLICY WITH OVERSIGHT BY THE BOARD GOVERNANCE COMMITTEE. THE CONFLICTS OF INTEREST DOCUMENT IS COMPLETED AND SIGNED BY EACH BOARD MEMBER AND OFFICER. THE DOCUMENTS ARE REVIEWED BY THE GENERAL COUNSEL, AND A REPORT OF ITS FINDINGS IS PREPARED. THE CONFLICTS OF INTEREST POLICY CAN BE FOUND HERE:

[HTTP://WWW.ICANN.ORG/EN/COMMITTEES/COI/COI-POLICY-30JUL09-EN.HTM.](http://www.icann.org/en/committees/coi/coi-policy-30jul09-en.htm)

THE POLICY DESCRIBES THE DUTY TO DISCLOSE, THE PROCEDURES FOR ADDRESSING CONFLICTS OF INTEREST, THE DUTY TO ABSTAIN, HOW VIOLATIONS OF THE CONFLICTS OF INTEREST POLICY WILL BE HANDLED, HOW TO HANDLE A BOARD MEMBER WHO RECEIVES COMPENSATION, THE ANNUAL STATEMENT PROCESS BY WHICH ALL COVERED PERSONS SIGN ANNUALLY THEIR AFFIRMATION OF THE POLICY AND

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ATTACHMENT 1 (CONT'D)

DISCLOSE THEIR SPECIFIC POTENTIAL CONFLICTS, AND THE REQUIREMENT AND NATURE OF PERIODIC REVIEWS BY THE OFFICE OF THE GENERAL COUNSEL AND FINANCE DEPARTMENT. THE REPORT OF BOARD MEMBER REPORTED CONTRACTUAL RELATIONSHIPS IS POSTED ON THE WEBSITE. THE MOST RECENT REPORT IS POSTED HERE:

[HTTP://WWW.ICANN.ORG/EN/FINANCIALS/FY10-BOARD-CONTRACTUAL-RELATIONSHIPS.PD](http://www.icann.org/en/financials/fy10-board-contractual-relationships.pdf)

F.

RETENTION AND DESTRUCTION POLICY

FORM 990, PART VI, LINE 14

ICANN MAINTAINS AN INTERNAL DOCUMENT RETENTION AND DESTRUCTION POLICY AND HISTORICALLY HAS FOLLOWED BEST INDUSTRY PRACTICES FOR RETENTION AND DESTRUCTION.

PROCESS FOR DETERMINING COMPENSATION

FORM 990, PART VI, LINE 15

ICANN FOLLOWS PRINCIPLES OF ACCOUNTABILITY AND TRANSPARENCY AND DESCRIBES ITS COMPENSATION PLANS AND PRACTICES, WHICH IS POSTED AT:

[HTTP://WWW.ICANN.ORG/EN/FINANCIALS/COMPENSATION-PRACTICES-31JAN10-EN.PDF,](http://www.icann.org/en/financials/compensation-practices-31jan10-en.pdf)

AND IS SEPARATELY POSTED AT:

[HTTP://WWW.ICANN.ORG/EN/ANNUALREPORT/ANNUAL-REPORT-2010-EN.PDF.](http://www.icann.org/en/annualreport/annual-report-2010-en.pdf)

THE PROCESS FOR DETERMINING COMPENSATION INCLUDING SURVEYS OF COMPARABLE POSITIONS AND OTHER MARKET STUDIES IS DESCRIBED IN THIS COMPENSATION REPORT. EXECUTIVE COMPENSATION IS DISCLOSED AS WELL. SALARIES OF ALL OFFICERS ARE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS THROUGH THE EXECUTIVE COMPENSATION COMMITTEE. MINUTES OF THESE MEETINGS ARE

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ATTACHMENT 1 (CONT'D)

MAINTAINED BY THE OFFICE OF THE GENERAL COUNSEL AS PART OF ITS CORPORATE SECRETARIAT FUNCTION. EACH YEAR THE APPOINTMENT FOR EACH OFFICER INCLUDING THE CHIEF EXECUTIVE OFFICER, THE CHIEF OPERATING OFFICER, THE GENERAL COUNSEL, THE SENIOR VICE PRESIDENT, STAKEHOLDER RELATIONS, AND THE CHIEF FINANCIAL OFFICER IS CONFIRMED BY THE BOARD OF DIRECTORS IN THE ANNUAL GENERAL MEETING.

THE COMPENSATION STUDIES FOR MARKET COMPARABILITY CONDUCTED BY TOWERS WATSON IN 2009 FOR OFFICERS (AND ALL OTHER NON-OFFICER POSITIONS IN ICANN) WAS UPDATED BY TOWERS WATSON IN 2010. THE STUDY FOR MARKET COMPARABILITY CONDUCTED BY TOWERS WATSON IN 2009 FOR THE CEO IS CURRENTLY BEING UPDATED BY TOWERS WATSON.

AVAILABILITY OF 990

FORM 990, PART VI, LINE 18

ICANN POSTS ITS FORM 990 ON ITS WEBSITE. THE PRIOR YEAR POSTING IS HERE: [HTTP://WWW.ICANN.ORG/EN/FINANCIALS/FISCAL-30JUN09.HTM](http://www.icann.org/en/financials/fiscal-30jun09.htm). AFTER SUBMISSION TO THE IRS, THE 2009 FORM 990 WILL BE POSTED HERE: [HTTP://WWW.ICANN.ORG/EN/FINANCIALS/FISCAL-30JUN10.HTM](http://www.icann.org/en/financials/fiscal-30jun10.htm).

IN ADDITION, THE FORM 990 IS POSTED ON THE [WWW.GUIDESTAR.ORG](http://www.guidestar.org) WEBSITE. FINALLY, HARD COPIES OF THE FORM 990 ARE AVAILABLE UPON REQUEST FROM THE CONTROLLER OF ICANN. EMAILS SHOULD BE SUBMITTED TO ICANN'S CORPORATE CONTROLLER BY EMAIL @JUAN.OJEDA@ICANN.ORG, OR BY PHONE AT +1.310.823.9358.

ICANN POSTS THE ORIGINAL FORM 1023 (APPLICATION FOR TAX-EXEMPT STATUS) ON

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<u>ATTACHMENT 1 (CONT'D)</u>	

ITS WEBSITE. THE ORIGINAL FORM 1023 POSTING IS HERE:

[HTTP://WWW.ICANN.ORG/EN/FINANCIALS/TAX/US/](http://www.icann.org/en/financials/tax/us/).

ICANN POSTS THE UPDATED IRS FAVORABLE DETERMINATION LETTER HERE:

[HTTP://WWW.ICANN.ORG/EN/FINANCIALS/TAX/US/IRS-FAVORABLE-DETERMINATION-LETTER-19SEP08-EN.PDF](http://www.icann.org/en/financials/tax/us/irs-favorable-determination-letter-19sep08-en.pdf).

AVAILABILITY OF GOVERNING DOCS, CONFLICTS OF INTEREST, AND FINANCIAL STMTS
FORM 990, PART VI, LINE 19

IN ACCORDANCE WITH ITS CORPORATE BYLAWS (SEE:

[HTTP://WWW.ICANN.ORG/EN/GENERAL/BYLAWS.HTM](http://www.icann.org/en/general/bylaws.htm)) AND THE AFFIRMATION OF

COMMITMENTS WITH THE UNITED STATES DEPARTMENT OF COMMERCE, ICANN IS

COMMITTED TO ACCOUNTABILITY AND TRANSPARENCY PRINCIPLES. THIS INCLUDES

PROVIDING EXTENSIVE ACCESS TO THE PUBLIC THROUGH THE ICANN WEBSITE OF ITS

GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL

STATEMENTS. SEE WWW.ICANN.ORG.

CONTRIBUTIONS

FORM 990, SCHEDULE B, LINE 14

NEUSTAR SPONSORS CCTLD'S AND GTLD'S.

FORM 990, SCHEDULE B, LINE 39

VERISIGN SPONSORS THREE GTLD'S AND ONE CCTLD.

BUSINESS TRANSACTIONS WITH INTERESTED PERSONS

FORM 990, SCHEDULE L, PART IV

DR. BRUCE TONKIN IS A VOTING MEMBER OF THE BOARD OF DIRECTORS. DR. TONKIN

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ATTACHMENT 1 (CONT'D)

IS ALSO CHIEF STRATEGY OFFICER OF MELBOURNE IT, AN ICANN ACCREDITED REGISTRAR. REVENUE FROM MELBOURNE IT AMOUNTED TO \$833,000 FOR THE YEAR ENDED JUNE 30, 2010, UNDER THE FEE STRUCTURE OF THE STANDARD REGISTRAR ACCREDITATION AGREEMENT. TO AVOID ANY CONFLICT OF INTEREST BETWEEN ICANN AND MELBOURNE IT, DR. TONKIN ABSTAINS FROM VOTING ON ALL MATTERS HE IDENTIFIES AS POTENTIAL CONFLICTS OF INTEREST WHICH COME BEFORE THE BOARD.

IN ADDITION TO THE SPECIFIC DISCLOSURES ABOVE, ICANN MAY ENTER INTO OR CONSIDER PARTICIPATION IN SMALL ARM'S LENGTH TRANSACTIONS BETWEEN ICANN AND CERTAIN TAXABLE ORGANIZATIONS WITH WHICH CERTAIN ICANN DIRECTORS OR OFFICERS (OR MEMBERS OF THEIR FAMILIES) MAY HAVE AN AFFILIATION. UNDER ICANN'S CONFLICTS OF INTEREST POLICY, ALL OFFICERS AND DIRECTORS ARE REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST BEFORE ENTERING INTO DISCUSSION ON SUCH MATTERS. IN ADDITION, THE BOARD COMMITTEE RESPONSIBLE FOR CONFLICTS OF INTEREST REVIEWS ALL BOARD MEMBER CONFLICTS OF INTEREST STATEMENTS. SEE:

[HTTP://WWW.ICANN.ORG/EN/FINANCIALS/BOARD-CONTRACTUAL-RELATIONSHIPS-FY09-30
JUL09-EN.PDF.](http://www.icann.org/en/financials/board-contractual-relationships-fy09-30-jul09-en.pdf)

ATTACHMENT 2

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

AUSTRALIA

BELGIUM

ATTACHMENT 3

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ATTACHMENT 3 (CONT'D)

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
JONES DAY 555 FLOWER STREET LOS ANGELES, CA 90071	LEGAL SERVICES	2,628,421.
IRON MOUNTAIN INTELLECTUAL PRO 2100 NORCROSS PARKWAY, SUITE 150 NORCROSS, GA 30071	DATA ESCROW	698,087.
HILL AND KNOWLTON, INC. 825 THIRD AVE NEW YORK, NY 10022	EXTERNAL COMMUNICATN	663,207.
KPMG LLP 355 S. GRAND AVE. LOS ANGELES, CA 90071	CONSULTING SERVICES	513,471.
WELOCALIZE INC. 241 EAST 4TH STREET, SUITE 207 FREDRICK, MD 21701	TRANSLATION	396,557.
	TOTAL COMPENSATION	<u>4,899,743.</u>