Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

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

Inspection

A	For th	e 2017 calendar year, or tax year beginnin	g 07/01, 2017 ,	and ending			06/3	0, 20 18	
_		C Name of organization INTERNET	CORPORATION FOR ASSIGNE	ED		D Employer ider	itification	number	
В	Check if a	applicable: NAMES AND NUMBERS				95-4712	2218		
	Addr								
		Number and street (or P.O. box if mail	is not delivered to street address)	Room/suite		E Telephone nur	nber		
	-	12025 WATERFRONT DRI	VE, SUITE 300			(310) 30:	1-580	0	
-	Final	return/ City or town, state or province, country	VALUE AND AND THE SECOND SECON						
		inated LOS ANGELES, CA 9009				G Gross receipts	\$	284,385	.012.
	retur Appli	ication F Name and address of principal officer:	BO GORAN MARBY	HILL Service by Service Co.		H(a) Is this a grou	p return for		X No
	pend	ling	VE STE 300 LOS ANGELES,	CA 9009	4	subordinates? H(b) Are all subordi			No
1	Tay ox	xempt status: X 501(c)(3) 501(c)				3.5		see instructions)	
÷		ite: ► WWW.ICANN.ORG	() (insert no.) 4947(a)(1)	01 321		H(c) Group exemp			
_	10 10 10 10 10 10 10		Association Other	I Voca of	forms	tion: 1998 M s	CONTRACTOR CONTRACTOR	200 1,531	CA
			Association Other	L real of	ioima	uon. 1990 IVI e	state of le	egai domicile.	
	art I	Summary		ים דוות קשר	<u> </u>				
1207	1	Briefly describe the organization's mission	or most significant activities: 3EE 30	מתוחמות (
Governance								=======================================	
rna	22				10.02				
)Ve	. 2	Check this box ▶ ☐ if the organization				.0.1			1.0
	3	Number of voting members of the governing					3		16.
SS	4	Number of independent voting members of				THE REPORT OF STREET AND STREET AND PARTY.	4		15.
Activities &	5	Total number of individuals employed in ca	alendar year 2017 (Part V, line 2a)				5		326.
ŧ	6	Total number of volunteers (estimate if necessity)	essary)				6		60.
Ā	7a	Total unrelated business revenue from Part	VIII, column (C), line 12			* 180 * 181 * 180 *	7a		0.
	b	Net unrelated business taxable income from	n Form 990-T, line 34				7b		939.
						Prior Year		Current Y	ear
d)	8	Contributions and grants (Part VIII, line 1h)				3,628,13	7.	3,160	648.
Revenue	9	Program service revenue (Part VIII, line 2g)		Make the court of the court of the	2	292,250,169	9. 1	125,870	285.
e ve	10	Investment income (Part VIII, column (A), I				6,791,80	3.	7,747	163.
ŭ	11	Other revenue (Part VIII, column (A), lines					0.		0.
	12	Total revenue - add lines 8 through 11 (mg			3	302,670,109	9. 1	136,778	096.
	13	Grants and similar amounts paid (Part IX, c				1,496,66		1,796	
	1	Benefits paid to or for members (Part IX, co		THE RESIDENCE OF THE SECOND	_		0.		0.
	14			The state of the state of the state of		60,036,67		73,152	7.7
ses	15	Salaries, other compensation, employee be		The second second second second			0.	757152	0.
en:	70	Professional fundraising fees (Part IX, colur	2				0.		
Expenses		Total fundraising expenses (Part IX, column	# 25 0 0			99,791,84	1	85,763,	42E
		Other expenses (Part IX, column (A), lines			1	CENTRAL TO A			
		Total expenses. Add lines 13-17 (must equ				.61,325,182		160,712,	
. 10	19	Revenue less expenses. Subtract line 18 from	om line 12		Carried St.	.41,344,92		-23,934,	
s or						ning of Current Y	Statement .	End of Yea	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			5	19,787,600		505,518,	
t As	21	Total liabilities (Part X, line 26)				45,101,43		54,500,	
뿔	22	Net assets or fund balances. Subtract line	21 from line 20		4	74,686,16	o • 4	151,017,	707.
	rt II	Signature Block		302 703 703			Total .	80 NO 15 15	over the course of
Und	ler per	nalties of perjury, I declare that I have examined ect, and complete. Declaration of preparer (other th	this return, including accompanying schedu	iles and statem	ents, a	and to the best of	my know	ledge and be	lief, it is
Huc	, 00110	dia dell'interessa dell'accioni di proporti (dell'origi	an one of the second of the se	on propare, nac	- Lily 10.	0 1	4 1 4	0 10	
O:	242					8 14	AX	2013	
Sig		Signature of officer	24 1.153			Date			
Hei	e	Namer C	ALVET, Cro						
		Type or print name and title							
200000000000000000000000000000000000000		Print/Type preparer's name	Preparer's signature	Date		Check	if PTIN		
Paid -		JOCELYNE MILLER		05/09/	/19	self-employe	d P	0063437	8
5 2 2 5 E	arer	Firm's name ERNST & YOUNG U.	S. LLP			Firm's EIN ▶ 3	4-656	5596	
Use	Only	Firm's address >4365 EXECUTIVE DRIVE, #				THIN S MIN P		5-7200	
Mav	the	IRS discuss this return with the prepar	CAMPAGE AND CONTRACTOR OF THE					X Yes	No
_		rwork Reduction Act Notice, see the separ		A 140 A 140 A 140 A		TO A COLUMN TO SEE OF SEE A		Form 990	

Form 990 (2017) Page 2 Part III **Statement of Program Service Accomplishments** Check if Schedule O contains a response or note to any line in this Part III 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? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?..... If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ 117,192,772. including grants of \$ 1,796,239.) (Revenue \$ SEE SCHEDULE O.) (Revenue \$ 4b (Code: including grants of \$ 4c (Code:) (Expenses \$) (Revenue \$ including grants of \$ 4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$

4e Total program service expenses ► 117,192,772.

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Form **990** (2017)

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

11165W 2020 60100666 PAGE 3

Page 4 Form 990 (2017)

Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		3.7	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		3.7	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated		3.7	
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	04-		Х
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Λ
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
_	to defease any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		Х
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	ZJa		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	235		
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i>			
	Schedule L. Part IV.	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	_	٦,	
	19? Note . All Form 990 filers are required to complete Schedule O.	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance Yes Nο 122 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0. b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. <u>1b</u> c Did the organization comply with backup withholding rules for reportable payments to vendors and X 1c reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | Statements, filed for the calendar year ending with or within the year covered by this return. . 2a Χ 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Χ **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X 4a **b** If "Yes," enter the name of the foreign country: ightharpoonup <u>ATTACHMENT</u> 1 See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts Χ **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?...... Χ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Χ 6a organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Χ 7a **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Χ 7с X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Χ 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7g g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.. Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year?........... Sponsoring organizations maintaining donor advised funds. 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?..... Section 501(c)(7) organizations. Enter: 10 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b Section 501(c)(12) organizations. Enter: b Gross income from other sources (Do not net amounts due or paid to other sources 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which Х

JSA 7E1040 1.000

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 16			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 15			
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?	2		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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
·u	one or more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
Ū	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
J	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	Х	
b				
	rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Secti	ion 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 (Section	501(c)(3)s	only
	available for public inspection. Indicate how you made these available. Check all that apply.		, , , , -	,
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interpretation of the conflict of interpretation of the conflict of	erest	policy	, and
	financial statements available to the public during the tax year.		. ,	
20	State the name, address, and telephone number of the person who possesses the organization's books and record XAVIER CALVEZ 12025 WATERFRONT DRIVE, STE 300 LOS ANGELES, CA 90094 310 301 5838	s:▶		
	XAVIER CALVEZ 12025 WATERFRONT DRIVE, STE 300 LOS ANGELES, CA 90094 310 301 5838			

JSA 7E1042 1.000 Form **990** (2017)

11165W 2020 60100666 PAGE 6

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

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 neither the organization nor any related organization compensated any current officer, director, or trustee.

	,							,		
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unles	Pos heck ss pe	erson	e than on is both	an tee)	(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
			ee			sated				
(1)MAARTEN BOTTERMAN DIRECTOR	16.00	·						0.	0.	0.
		Х				-		0.	0.	0.
(2)BECKY BURR	16.00								_	
DIRECTOR	16.00	Х				-		0.	0.	0.
(3)CHERINE CHALABY DIRECTOR	0.	X						50,000.	0.	0.
(4)STEVE CROCKER	16.00	Λ						30,000.	0.	0.
DIRECTOR (THRU NOVEMBER 2017)	0.	X						0.	0.	0.
(5)RON DA SILVA	16.00	Λ.						0.	0.	<u> </u>
DIRECTOR	0.	X						45,000.	0.	0.
(6)SARAH DEUTSCH	16.00	21						13,000.	· ·	-
DIRECTOR	0.	X						7,500.	0.	0.
(7)CHRIS DISSPAIN	16.00							7,75551		
DIRECTOR	0.	Х						45,000.	0.	0.
(8)AVRI DORIA	16.00							,		
DIRECTOR	0.	Х						7,500.	0.	0.
(9)LEON SANCHEZ	16.00									
DIRECTOR	0.	Х						7,500.	0.	0.
(10)ASHA HEMRAJANI	16.00									
DIRECTOR (THRU NOVEMBER 2017)	0.	Х						37,500.	0.	0 .
(11)RAFAEL LITO IBARRA	16.00									
DIRECTOR	0.	Х						45,000.	0.	0.
(12)KHALED KOUBAA	16.00									
DIRECTOR	0.	Х						45,000.	0.	0
(13)MARKUS KUMMER	16.00									
DIRECTOR (THRU NOVEMBER 2017)	0.	Х						37,500.	0.	0
(14)AKINORI MAEMURA	16.00									
DIRECTOR	0.	Х						45,000.	0.	0

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Form **990** (2017)

11165W 2020 60100666 PAGE 7

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	nplo	ye	es,	and H	ligl	hest Compensat	ed Employees (c	ontinued)
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	e Position		Reportable	Reportable	Estimated				
	hours per	,				e than or		compensation	compensation from	amount of
	week (list any hours for					is both a tor/truste		from	related	other compensation
	related							the organization	organizations (W-2/1099-MISC)	from the
	organizations	dire	iti	Officer	y en	Highest employe	Former	(W-2/1099-MISC)	(** =, ***** *******************	organization
	below dotted line)	Individual to or director	Institutional trustee		Key employee	st compensated yee	7			and related organizations
	illie)	trustee	al tr		yee	mpe				019411124110110
		ee	stee			nsa				
			Ι Ψ			ted				
15) BO GORAN MARBY	60.00									
OFFICER, PRESIDENT & CEO	0.	Х		Х				869,287.	0.	67,298.
16) RINALIA ABDUL RAHIM	16.00									
DIRECTOR (THRU NOVEMBER 2017)	0.	Х						37,500.	0.	0.
17) GEORGE SADOWSKY	16.00									
DIRECTOR	0.	X						45,000.	0.	0.
18) MATTHEW SHEARS	16.00									
DIRECTOR	0.	X						0.	0.	0.
19) MIKE SILBER	16.00									
DIRECTOR	0.	X						0.	0.	0.
20) LOUSEWIES VAN DER LAAN	16.00									
DIRECTOR	0.	X						45,000.	0.	0.
21) AKRAM ATALLAH	55.00									
PRESIDENT, GDD	5.00			Х				674,060.	0.	67,298.
22) SUSANNA H BENNETT	60.00									
CHIEF OPERATING OFFICER	0.			Х				459,976.	0.	44,472.
23) XAVIER CALVEZ	60.00									
CHIEF FINANCIAL OFFICER	0.			Х				431,368.	0.	62,798.
24) JOHN JEFFREY	60.00									
GENERAL COUNSEL & SECRETARY	0.			Х				588,121.	0.	44,798.
25) DAVID OLIVE	60.00									
SVP, POLICY DEVELOPMENT SUPPORT	0.			Х				437,045.	0.	57,959.
1b Sub-total							▶	372,500.	0.	0.
c Total from continuation sheets to Part VII, S	ection A						▶	9,238,390.	0.	1,236,197.
d Total (add lines 1b and 1c)							▶	9,610,890.	0.	1,236,197.
2 Total number of individuals (including but not		hose	liste	d al	bov	e) who	re	ceived more than	\$100,000 of	
reportable compensation from the organization	n ▶	183	3							
										Yes No
3 Did the organization list any former office										
employee on line 1a? If "Yes," complete Sched	ule J for suc	ch ina	livid	ual						3 X

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	3		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	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual			
	for services rendered to the organization? If "Yes," complete Schedule J for such person	5		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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

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 ▶ 125

Form **990** (2017)

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y Em	plo	ye	es,	and F	ligl	hest Compensat	ed Employees (c	ontinued)	
(A)	(B)			(0	C)			(D)	(E)	(F)	
Name and title	Average			Pos	sition			Reportable	Reportable	Estimate	:d
	hours per	,				e than o		compensation	compensation from	amount	of
	week (list any hours for					is both or/truste		from	related	other compensa	ition
	related							the organization	organizations (W-2/1099-MISC)	from the	
	organizations	divid	stitu	Officer	y er	Highest employe	Forme	(W-2/1099-MISC)	(** 2/1000 1/1100)	organizat	
	below dotted	lual	tion	~	Key employee	st cc	~	,		and relate organizati	
	line)	Individual trustee or director	Institutional trustee		yee)mp				Organizati	3110
		tee	uste			ensa					
			Õ			st compensated yee					
26) ASHWIN RANGAN	60.00										
SVP, ENGINEERING & CIO	0.			Х				415,211.	0.	67,	298.
27) DAVID CONRAD	55.00										
SVP & CHIEF TECHNOLOGY OFFICER	5.00				Х			422,710.	0.	53,	742.
28) ELISE GERICH	10.00										
VP, IANA SVCS & PRES PTI-PT YR	50.00				Х			370,978.	0.	57,	978.
29) JAMES HEDLUND	60.00										
SVP, CONTRACTUAL COMPLIANCE	0.				X			411,042.	0.	59,	339.
30) TAREK KAMEL	60.00										
SVP, GOVERNMENT AND IGO ENGMT	0.				Х			407,488.	0.	84,	163.
31) CYRUS NAMAZI	60.00										
VP, DNS INDUSTRY ENGAGEMENT	0.				Х			381,098.	0.	55,	495.
32) DIANE R SCHROEDER	60.00										
SVP, GLOBAL HUMAN RESOURCES	0.				Х			322,637.	0.	46,	959.
33) THERESA SWINEHART	60.00										
SVP, MULTISTAKEHOLDER STRATEGY	0.				Х			453,632.	0.	43,	735.
34) NICHOLAS TOMASSO	60.00										
VP, GLOBAL MEETING OPERATIONS	0.				Х			344,975.	0.	57,	914.
35) CHRISTINE WILLETT	60.00										
VP, GTLD OPERATIONS	0.				Х			377,957.	0.	62,	777.
36) ROBERT DUNCAN BURNS	60.00										
SVP, GLOBAL COMMUNICATIONS	0.					X		409,873.	0.	62,	460.
1b Sub-total							\blacktriangleright				
c Total from continuation sheets to Part VII, S							\blacktriangleright				
d Total (add lines 1b and 1c)							>				
2 Total number of individuals (including but not				d al	bov	e) who	re	ceived more than	\$100,000 of		
reportable compensation from the organization	n ▶	183	3								
										Yes	No
3 Did the organization list any former office											v
employee on line 1a? If "Yes," complete Sched	uie J for sud	cn ind	ividi	uai						3	X

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	3		Х
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	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual			
	for services rendered to the organization? If "Yes," complete Schedule J for such person	5		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. Report compensation for the calendar year ending with or within the organization's tax year.

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

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 ▶

Form **990** (2017)

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es,	and F	lig	hest Compensat	ed Employees (d	continued)
(A) Name and title	(B) Average hours per week (list any hours for	erage Position (Ido not check more than one box, unless person is both an officer and a director/trustee)				is both	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
37) JOHN L CRAIN	60.00									
CHIEF SEC. & STABILITY OFFICER	0.					Х		304,331.	0.	62,697.
38) DANIEL E HALLORAN DEPUTY GENERAL COUNSEL	60.00					Х		346,767.	0.	62,760.
39) MAGUY SERAD	60.00					v		222 702	0	67 220
VP, CONTRACTUAL COMPLIANCE SVC 40) AMY A STATHOS	60.00					X		323,702.	0.	67,220.
DEPUTY GENERAL COUNSEL	0.00					Х		358,632.	0.	47,037.
	<u> </u>									
1b Sub-total c Total from continuation sheets to Part VII, S	ection A						>			
d Total (add lines 1b and 1c)							>			
2 Total number of individuals (including but not reportable compensation from the organization		hose 183		d a	bov	e) who	o re	eceived more than	\$100,000 of	
										Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Scheduler and the scheduler of the sche										3 X
4 For any individual listed on line 1a, is the organization and related organizations graindividual.	eater than	\$15	0,0	00?	? It	"Yes	3,"	complete Schedu	le J for such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Yo	accrue co	mpen	sati	on i	fron	n any	un	related organizati	on or individual	5 X
Section B. Independent Contractors	os, comple	1 0 301	ieut	ii c o	, 101	SUCII	μαι	3 <i>011</i>		J 1
Complete this table for your five highest compensation from the organization. Report of year.										

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

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 ►

Form **990** (2017)

Page 9

Part VIII	Statement of Revenue	
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ı aı		Check if Schedule O contains	a respo	nse or note to an	v line in this Part VI	II		X
			•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ន្ទន	1a	Federated campaigns	_ 1a					
	b	Membership dues						
Ağ, c	C	Fundraising events						
<u>a</u> <u>i</u>	d	Related organizations	·					
Contributions, Gifts, Grants and Other Similar Amounts	_	Government grants (contributions)						
S	f	All other contributions, gifts, grants,	•					
<u>₹</u>		and similar amounts not included above	. 1f	3,160,648.				
פַּק	g	Noncash contributions included in lines 1a	-1f: \$					
	h	Total. Add lines 1a-1f			3,160,648.			
Program Service Revenue				Business Code				
ver	2a	NEW GTLD PROGRAM REVENUE		900099	-12,548,099.	-12,548,099.		
Re	b	REGISTRY/REGISTRAR FEES		900099	88,164,033.	88,164,033.		
<u>Š</u>	c	ADDRESS REGISTRY FEES		900099	30,653,401.	30,653,401.		
Ser	d	ACCREDITATION FEES		900099	11,185,936.	11,185,936.		
E	e	PTI SERVICES AGREEMENT		900099	7,817,678.	7,817,678.		
gr	f	All other program service revenue			597,336.	597,336.		
Pro	g	Total. Add lines 2a-2f			125,870,285.			
	3	Investment income (including	divide	nds, interest,				
		and other similar amounts).		▶ [5,246,790.			5,246,790.
	4	Income from investment of tax-exen	npt bond	d proceeds . ►	0.			
	5	Royalties			0.			
		(i)	Real	(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	N ()			0.			
	7a	Gross amount from sales of (i) Se	curities	(ii) Other				
		assets other than inventory 150,1	07,289.					
	b	Less: cost or other basis						
			06,916.					
	С	Gain or (loss)	00,373.					
	d	Net gain or (loss)		. <u></u>	2,500,373.			2,500,373.
Ð	8a	Gross income from fundraising						
Revenue		events (not including \$						
Še		of contributions reported on line 1c).						
e		See Part IV, line 18	a	1				
Other	b	Less: direct expenses	b	,				
	С	Net income or (loss) from fundraising	g events	.	0.			
	9a	Gross income from gaming activitie	s.					
		See Part IV, line 19	а	ı				
	b	Less: direct expenses	b	,				
	С	Net income or (loss) from gaming a	ctivities		0.			
	10a	Gross sales of inventory, le	ss					
		returns and allowances	а	ı				
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sales of inv	entory_		0.			
		Miscellaneous Revenue		Business Code				
	11a							
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d			0.			
	12	Total revenue. See instructions.		<u> </u>	136,778,096.	125,870,285.		7,747,163.

JSA 7E1051 1.000

Form **990** (2017)

11165W 2020 60100666 PAGE 11

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX						
Do	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C)	(D) Fundraising	
8b,	9b, and 10b of Part VIII.	i otai expenses	expenses	Management and general expenses	expenses	
1	Grants and other assistance to domestic organizations					
	and domestic governments. See Part IV, line 21	516,209.	516,209.			
2	Grants and other assistance to domestic					
	individuals. See Part IV, line 22	57,665.	57,665.			
3	Grants and other assistance to foreign					
	organizations, foreign governments, and foreign					
	individuals. See Part IV, lines 15 and 16	1,222,365.	1,222,365.			
4	Benefits paid to or for members	0.				
5	Compensation of current officers, directors,					
	trustees, and key employees	9,138,746.	6,899,753.	2,238,993.		
6	Compensation not included above, to disqualified					
	persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B)	145,000.	145,000.			
7	Other salaries and wages	48,445,159.	36,573,382.	11,871,777.		
8	Pension plan accruals and contributions (include					
	section 401(k) and 403(b) employer contributions)	5,017,059.	3,796,287.	1,220,772.		
9	Other employee benefits	7,025,877.	4,715,354.	2,310,523.		
10	Payroll taxes	3,380,961.	2,558,291.	822,670.		
11	Fees for services (non-employees):					
а	Management	0.				
b	Legal	4,736,564.	3,180,251.	1,556,313.		
C	: Accounting	1,396,456.	205 200	1,396,456.		
d	I Lobbying	326,200.	326,200.			
	Professional fundraising services. See Part IV, line 17.	0.		770 401		
	Investment management fees	779,421.		779,421.		
g	J Other. (If line 11g amount exceeds 10% of line 25, column מתרום ב	18,313,917.	12,292,665.	6,021,252.		
	(A) amount, list line 11g expenses on Schedule O.) ATCH 3	162,501.	109,061.	53,440.		
	Advertising and promotion	715,248.	480,032.	235,216.		
13	Office expenses	9,750,890.	6,544,221.	3,206,669.		
14 15	Information technology	0.	0,011,221	3,200,0001		
16	Occupancy	5,340,360.	3,369,612.	1,970,748.		
17	Travel	13,698,398.	9,253,000.	4,445,398.		
	Payments of travel or entertainment expenses		-			
. •	for any federal, state, or local public officials	0.				
19	Conferences, conventions, and meetings	4,637,761.	4,637,761.			
20	Interest	0.				
21	Payments to affiliates	0.				
22	Depreciation, depletion, and amortization	7,680,031.	5,154,383.	2,525,648.		
23	Insurance	657,812.	441,485.	216,327.		
24	Other expenses. Itemize expenses not covered					
	above (List miscellaneous expenses in line 24e. If					
	line 24e amount exceeds 10% of line 25, column					
	(A) amount, list line 24e expenses on Schedule O.)	2 116 427	2 116 125			
_	RISK COSTS - GTLD	3,116,437.	3,116,437.			
-	RPM ACCESS FEE REFUNDS	6,128,256.	6,128,256.	115 217		
	DUES, SUBSCRIPTIONS & PUB PTI IANA CONTRACT	349,445. 7,817,678.	234,128.	115,317.		
_		156,060.	138,126.	17,934.		
	All other expenses	160,712,476.	117,192,772.	43,519,704.		
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	100,712,170.		13,317,701.		
	organization reported in column (B) joint costs					
	from a combined educational campaign and fundraising solicitation. Check here					
	following SOP 98-2 (ASC 958-720)	0.				
JSA	. /	• • •			Form 990 (2017)	

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Form **990** (2017)

11165W 2020 60100666 PAGE 12

Part X **Balance Sheet**

## Cash - non-interest-bearing ## End of year Cash - non-interest-bearing ## End of year 107,431,427	972. 0. 0. 763.
1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958f(f)(3)(B), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 15 Investments - program-related. See Part IV, line 11	972. 0. 0. 763.
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958f()1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation. 10b 34,025,563. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	0. 0. 763.
Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation. Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Investments - program-related. See Part IV, line 11	0.763.
4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 46,246,338. b Less: accumulated depreciation. 10b 34,025,563. 17,451,038. 10c 12,220. 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	0.
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 34,025,563. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 10 12 Investments - other securities. See Part IV, line 11 10 13 Investments - program-related. See Part IV, line 11	0.
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation. 10b 34,025,563. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation. 10b 34,025,563. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 10 12 13 Investments - program-related. See Part IV, line 11 1 1 Investments - program-related. See Part IV, line 11	
4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 34,025,563. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 34,025,563. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	0
and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 34,025,563. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Investments - program-related. See Part IV, line 11	0
7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Notes and loans receivable, net 0. 7 10, 1979, 161. 9 2, 376 10, 1979, 161. 9 2, 376 11, 979, 161. 9 12, 220 13 10, 246, 238. 17, 451, 038. 10c 12, 220 14 10, 220 15 10, 220 16 10, 220 17 10, 220 18 10, 220 19 10, 220 19 10, 220 19 10, 220 10 10, 220 11 10, 220 11 10, 220 12 10, 230 13 10, 230 15 10, 230 16 10, 230 17 10, 250 17 10, 250 18 10, 270 18 10, 270 18 10, 270 18 10, 270 19 1	
9 Prepaid expenses and deferred charges 1,979,161. 9 2,376 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 34,025,563. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 352,114,763. 11 422,400 12 Investments - other securities. See Part IV, line 11 0. 13 Investments - program-related. See Part IV, line 11	0.
9 Prepaid expenses and deferred charges 1,979,161. 9 2,376 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 34,025,563. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 352,114,763. 11 422,400 12 Investments - other securities. See Part IV, line 11 0. 13 Investments - program-related. See Part IV, line 11	0.
10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation	
other basis. Complete Part VI of Schedule D 10a 46,246,338. 17,451,038. 10c 12,220 11 Investments - publicly traded securities 352,114,763. 11 422,400 12 Investments - other securities. See Part IV, line 11 0.12 13 Investments - program-related. See Part IV, line 11 0.13	956.
b Less: accumulated depreciation	
11 Investments - publicly traded securities 352,114,763. 11 422,400 12 Investments - other securities. See Part IV, line 11 0. 12 13 Investments - program-related. See Part IV, line 11 0. 13	775
12 Investments - other securities. See Part IV, line 11 0 · 12 13 Investments - program-related. See Part IV, line 11 0 · 13	
13 Investments - program-related. See Part IV, line 11	0.
investmente program related. eeer archy, me ri	0.
	0.
14 Intangible assets 0 · 14 15 Other assets. See Part IV, line 11 939,184 · 15 1,773	
16 Total assets. Add lines 1 through 15 (must equal line 34) 519,787,600. 16 505,518	
17 Accounts payable and accrued expenses 19,033,715. 17 17,854	
18 Grants payable	0.
19 Deferred revenue 26,067,719. 19 36,645	484.
20 Tax-exempt bond liabilities 0 · 20	0.
21 Escrow or custodial account liability. Complete Part IV of Schedule D 0 . 21	0.
22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	
disqualified persons. Complete Part II of Schedule L 0 22	0.
23 Secured mortgages and notes payable to unrelated third parties	0.
24 Unsecured notes and loans payable to unrelated third parties 0 · 24	0.
25 Other liabilities (including federal income tax, payables to related third	
parties, and other liabilities not included on lines 17-24). Complete Part X	0
of Schedule D	0.
26 Total liabilities. Add lines 17 through 25	350.
Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗓 and complete lines 27 through 29, and lines 33 and 34.	
complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here	707.
28 Temporarily restricted net assets 0. 28	0.
29 Permanently restricted net assets	0.
☐ Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.	
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 474,686,166. 33 451,017	
31 Paid-in or capital surplus, or land, building, or equipment fund	
32 Retained earnings, endowment, accumulated income, or other funds	
33 Total net assets or fund balances 474,686,166. 33 451,017	
34 Total liabilities and net assets/fund balances 519,787,600. 34 505,518	707.

Form **990** (2017)

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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		36,7		
2	Total expenses (must equal Part IX, column (A), line 25)	2		60,7		
3	Revenue less expenses. Subtract line 2 from line 1	3		23,9		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	74,6		
5	Net unrealized gains (losses) on investments	5		3	98,7	738.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-1	32,8	317.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	4	51,0	17,7	07.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	ın			
	Schedule O.					37
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			٥.	Х	
b	Were the organization's financial statements audited by an independent accountant?			2b	Λ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
	separate basis, consolidated basis, or both: Separate basis Separate basis Description: Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or		•	2c	х	
	of the audit, review, or compilation of its financial statements and selection of an independent acc			20		
	If the organization changed either its oversight process or selection process during the tax year, e	xpıaır	ı in			
2-	Schedule O.	+ fa=+1-	. in			
зa	As a result of a federal award, was the organization required to undergo an audit or audits as se	rortr	ıın	3a		Х
h	the Single Audit Act and OMB Circular A-133?	erac	the			
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	_	IIIC	3b		
	required dudit of dudite, explain why in concedic c and decemberary eleps taken to undergo each ad	aito.		0.0		

Form **990** (2017)

60100666 PAGE 14

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2017
Open to Public Inspection

Name of the organization INAMES AND NUMBERS

INTERNET CORPORATION FOR ASSIGNED

Employer identification number 95-4712218

Pa	rt I	Reason for Public Cha	rity Status (All o	organizations must o	omplet	e this pa	art.) See instructions	
The	org	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1		A church, convention of chu	urches, or associa	tion of churches descr	ribed in s	ection 1	70(b)(1)(A)(i).	
2		A school described in secti	ool described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)					
3		A hospital or a cooperative	hospital service o	rganization described	in sectio	n 170(b)	(1)(A)(iii).	
4		A medical research organiz	zation operated in	conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and st	tate:					
5		An organization operated	for the benefit of	a college or universit	y owned	d or ope	erated by a governme	ental unit described in
	_	section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local go	_					
7		An organization that norma	•	•	pport fro	om a go	vernmental unit or fro	om the general public
		described in section 170(b)		•				
8		A community trust describe						
9		An agricultural research org	=			-		
		or university or a non-land-	grant college of ag	griculture (see instruct	ions). Ei	nter the	name, city, and state o	f the college or
		university:						
10	X	An organization that norma receipts from activities rela support from gross investm acquired by the organizatio	ited to its exempt facent income and un	unctions - subject to on the control of the control	certain e able incc	xception me (les	s, and (2) no more tha s section 511 tax) from	n 331/3 %of its
11		An organization organized	and operated exclu	usively to test for publi	c safety.	See sec	tion 509(a)(4).	
12		An organization organized	and operated exclu	usively for the benefit	of, to pe	erform th	e functions of, or to o	carry out the purposes
		of one or more publicly su						
	_	Check the box in lines 12a t	hrough 12d that d	escribes the type of s	upporting	g organiz	zation and complete lir	nes 12e, 12f, and 12g.
а		Type I . A supporting orga	anization operated	, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving
		the supported organization	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	es of the
	_	supporting organization. `	You must complet	e Part IV, Sections A	and B.			
b	L	Type II . A supporting org	•					
		control or management of			the sam	e persor	ns that control or man	age the supported
		organization(s). You must	complete Part IV	, Sections A and C.				
С	L	Type III functionally integrated						lly integrated with,
		its supported organization		-				
d	L				•			= ::
		that is not functionally into			-		•	d an attentiveness
	Г	requirement (see instruct	•	-				
е	L	Check this box if the orga						I, Type III
	_	functionally integrated, or	• •			•		
f		nter the number of supported ovide the following information						
<u> 9</u>							(1) Amount of monotoni	(vi) Amount of
	(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
				above (see instructions))		ment?	instructions)	instructions)
					Yes	No		
(A)								
(D)								
(B)								
(C)								
(D)								
(E)								
Tot	al							I

Schedule A (Form 990 or 990-EZ) 2017 Page **2**

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Gifts, contributions, grants. membership fees received. (Do not include any "unusual grants.") Tax revenues levied organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other governmental unit publicly or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Amounts from line 4 Gross income from interest, dividends. payments received on securities loans. rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 . . 12 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 % Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)). % 16a 331/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this b 331/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 Page 3

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support			·	·	,	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	2,072,140.	2,044,258.	1,133,161.	3,628,137.	3,160,648.	12,038,344.
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	121,311,659.	214,799,352.	193,512,588.	286,797,690.	125,870,285.	942,291,574.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						0.
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						0.
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0.
6	Total. Add lines 1 through 5	123,383,799.	216,843,610.	194,645,749.	290,425,827.	129,030,933.	954,329,918.
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	37,543,078.	84,215,410.	76,543,850.	175,469,779.	56,889,658.	430,661,775.
С	Add lines 7a and 7b	37,543,078.	84,215,410.	76,543,850.	175,469,779.	56,889,658.	430,661,775.
8	Public support. (Subtract line 7c from						
	line 6.)						523,668,143.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6.	123,383,799.	216,843,610.	194,645,749.	290,425,827.	129,030,933.	954,329,918.
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from similar						
	sources	2,783,804.	1,483,793.	1,203,202.	2,744,763.	5,246,790.	13,462,352.
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0.
	Add lines 10a and 10b	2,783,804.	1,483,793.	1,203,202.	2,744,763.	5,246,790.	13,462,352.
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is regularly						
	carried on						0.
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c, 11,						
13	and 12.)	126,167,603.	218,327,403.	195,848,951.	293,170,590.	134,277,723.	967,792,270.
14	First five years. If the Form 990 is f						
14	organization, check this box and stop here	· ·	•		•		` ` ` `
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2017 (line 8		•	n (f))		15	54.11%
16	Public support percentage from 2016 Sche					16	60.52%
	tion D. Computation of Investmen					10	70
17	Investment income percentage for 2017 (lin			3 column (f))		17	1.39%
18	Investment income percentage for 2017 (in					18	.99%
	331/3% support tests - 2017. If the org						
. <i>. a</i>	17 is not more than 331/3%, check th	-					
h	331/3% support tests - 2016. If the orga		_				
J	line 18 is not more than 331/3%, check						. \square
20	Private foundation. If the organization				. ,		H 1

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Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 Page **4**

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No 1 2 3a 3b 3с 4a 4b 4c 5a 5b 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990 or 990-EZ) 2017 Page **5**

				- 5
Part l	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-		
h	below, the governing body of a supported organization? A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations	110		
	yn a ryfor outporting organizations		Yes	No
4	Did the directors, trustoca, or membership of one or more supported expenizations have the newer to			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
000	on type in outporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			1
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons).	
a	The organization satisfied the Activities Test. Complete line 2 below.			
b c	The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	inetru	ctions)	
·	The organization supported a governmental entity. Describe in t art vi now you supported a government entity (see	monuc	Yes	
2	Activities Test. Answer (a) and (b) below.			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	20		
h	trustees of each of the supported organizations? <i>Provide details in Part VI.</i> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
b	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2017

Page 6 Schedule A (Form 990 or 990-EZ) 2017

Type III Non-Functionally Integrated 509(a)(3) Supporting Organ Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (expla	
instructions. All other Type III non-functionally integrated supporting organic Section A - Adjusted Net Income	zations r	nust complete Section (A) Prior Year	ns A through E. (B) Current Year (optional)
1 Net short-term capital gain	1		(optional)
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or	+++		
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):	4-		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall	y integra	ated Type III supporting	g organization (see
instructions).			<u> </u>

Schedule A (Form 990 or 990-EZ) 2017

7E1231 2.000 11165W 2020 60100666 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Schedule A (Form 990 or 990-EZ) 2017 Page 7

Secti	Section D - Distributions				
1	Amounts paid to supported organizations to accomplish ex	xempt purposes			
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations		
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI). See instructions.				
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2017 from Section C, line 6				
10	Line 8 amount divided by Line 9 amount				
;	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017	
1	Distributable amount for 2017 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2017				
	(reasonable cause required-explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2017				
а					
b	From 2013				
С	From 2014				
d	From 2015				
е	From 2016				
f	Total of lines 3a through e				
g	Applied to underdistributions of prior years				
h	Applied to 2017 distributable amount				
i	Carryover from 2012 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2017 from				
	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2017 distributable amount				
С	Remainder. Subtract lines 4a and 4b from 4.				
5	Remaining underdistributions for years prior to 2017, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2017. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2018. Add lines 3j				
	and 4c				

Schedule A (Form 990 or 990-EZ) 2017

Breakdown of line 7: Excess from 2013 Excess from 2014.... Excess from 2015 d Excess from 2016 Excess from 2017

7E1232 1.000 111165W 2020 60100666 PAGE 21

Schedule A (Form 990 or 990-EZ) 2017 Page 8

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

Schedule A (Form 990 or 990-EZ) 2017

11165W 2020 60100666 PAGE 22

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

2017

Name of the organization		Employer identification number				
INTERNET CORPORATION	FOR ASSIGNED					
NAMES AND NUMBERS	NAMES AND NUMBERS 95-4712218					
Organization type (check one):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ation				
	501(c)(3) taxable private foundation					
Chock if your organization is	covered by the General Rule or a Special Rule .					
), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule. See				
General Rule						
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributor property) from any one contributor. Complete Parts I and II. See instruction tributions.					
Special Rules						
regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 rections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 d that received from any one contributor, during the year, total contribution f the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1.0	or 990-EZ), Part II, line s of the greater of (1)				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
contributor, during t contributions totaled during the year for a General Rule applie	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
990-EZ, or 990-PF), but it mus	isn't covered by the General Rule and/or the Special Rules doesn't file Sch st answer "No" on Part IV, line 2, of its Form 990; or check the box on line o certify that it doesn't meet the filing requirements of Schedule B (Form 990)	H of its Form 990-EZ or on its				

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Employer identification number 95-4712218

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1_	NIC.AT JAKOB-HARINGER-STRASSE 8 SALZBURG ASHMORE & CARTIER ISLANDS A-5020	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	DNS BELGIUM VZW UBICENTER, PHILIPSSITE 5, BUS 13 LEUVEN BELGIUM B-3001	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3_	UNINETT NORID AS POSTBOKS 4769 SLUPPEN TRONDHEIM NORWAY N-7465	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4_	NIC.BR AV. DAS NACOES UNIDAS SAO PAULO ONTARIO BRAZIL SP-04578	\$50,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	OTTOWA CANADA K1S 5K5	\$85,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6	UNIVERSIDAD DE CHILE RUT. 60.910.000-1, MIRAFLORES 222 PISO 1 SANTIAGO CHILE 832-0198	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization INTERNET CORPORATION FOR ASSIGNED Employer identification number 95-4712218

	NAMES AND NUMBERS		95-4/12216	
Part I	Contributors (see instructions). Use duplicate copies of	of Part I if additional space is ne	eded.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
7	DANSK INTERNET FORUM COPENHAGEN V COPENHAGEN DENMARK 1560	\$121,600.	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
8	AFNIC 2 RUE STEPHENSON MONTIGNY LE BRETONNEUX BUCHAREST FRANCE F-78181	\$150,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
9	DENIC EG KAISERSTRASSE 75-77 FRANKFURT GERMANY D-60329	\$130,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(C)	(d)	

No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
10	ICS-FORTH GR N. PLASTIRA 100 VASSILIKA VOUTON CRETE GREECE 70013	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	COUNCIL OF HUNGARIAN INTERNET PROVIDERS VICTOR HUGO 18-22 BUDAPEST HUNGARY H-1132	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	ISNIC - INTERNET ICELAND KATRINARTUN 2 REYKJAVIK ICELAND 101	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
JSA		Schedule	B (Form 990, 990-EZ, or 990-PF) (201

Employer identification number 95-4712218

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
13	INCDI - ICI BUCHAREST BD. AVERESCU 8-10 BUCHAREST ROMANIA 11454	\$\$22,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
14	INTERNET SOCIETY OF ISRAEL BAREKET 6, POB 7210 PETAH TIKVA ISRAEL 49517	\$9,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
15	IIT-CNR INSTITUTE VIA MORUZZI 1 PISA ITALY 56124	\$100,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
16	STIFTELSEN FOR INTERNETINFRASTRUCKTUR.SE PO BOX 7399 STOCKHOLM SWEDEN 10391	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
17	JAPAN REGISTRY SERVICE CO. LTD. CHIYODA FIRST BLDG. EAST 13-F TOKYO JAPAN 101-0065	\$150,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
18	KAUNAS UNIVERSITY OF TECHNOLOGY IT DEPARTMENT STUDENTU 48A KAUNAS LITHUANIA 51367	\$10,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization INTERNET CORPORATION FOR ASSIGNED Employer identification number 95-4712218

	NAMES AND NUMBERS		95-4/12216
Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	UNIVERSITY OF LATVIA RAINIS BOULEVARD 29 RIGA LATVIA 1459	\$10,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	NASK KOLSKA 12 WARSAW POLAND 01-045	\$50,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	NEUSTAR PARKSTATION WOLUWELAAN 150 DIEGEM VLAAMS BRABANT BELGIUM 1831	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22_	ASSOCIACAO DNS.PT AV. DO BRASIL, 101 LISBON PORTUGAL 1700-066	\$15,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	SGSH 10 PASIR PANJANG ROAD SINGAPORE SINGAPORE 38988	\$5,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24	ACADEMIC AND RESEARCH NETWORK OF SLOVENI TEHNOLOSKI PARK 18	\$5,000.	Person X Payroll Noncash

(Complete Part II for

noncash contributions.)

LJUBLJANA

SLOVENIA 1000

Employer identification number 95-4712218

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	STICHTING INTERNET DOMEINREGISTRATIE NED		Person X Payroll
	MEANDER 501	\$	Noncash
	ARNHEM TIKVA		(Complete Part II for noncash contributions.)
	NETHERLANDS 6825		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26	SWITCH (CH)		Person
	WERDSTRASSE 2	\$46,999.	Payroll Noncash
	ZURICH		(Complete Part II for noncash contributions.)
	SWITZERLAND CH-8004		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27	TAIWAN NETWORK INFORMATION CENTER		Person X
	SECTION 2 4F-2 NO 9 , ROOSEVELT ROAD	\$38,921.	PayrollNoncash
	TAIPEI		(Complete Part II for noncash contributions.)
	TAIWAN 100		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4		Type of contribution Person Payroll
No.	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE	Total contributions	Type of contribution Person X
No.	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I	Total contributions	Person X Payroll Noncash (Complete Part II for
No.	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE	\$6,000.	Person X Payroll Noncash (Complete Part II for
No. 28	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459	Total contributions	Person X Payroll Noncash (Complete Part II for noncash contributions.)
No	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b)	\$6,000.	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person
No. 28 (a) No.	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b) Name, address, and ZIP + 4	\$6,000.	Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution
No. 28 (a) No.	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b) Name, address, and ZIP + 4 INTERNETNZ PO BOX 11881 WELLINGTON	\$ 6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person X Payroll
(a) No.	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b) Name, address, and ZIP + 4 INTERNETNZ PO BOX 11881 WELLINGTON NEW ZEALAND 10000	\$ 6,000. (c) Total contributions \$ 25,000.	Person Payroll Noncash (Complete Part II for noncash contributions.) Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b) Name, address, and ZIP + 4 INTERNETNZ PO BOX 11881 WELLINGTON NEW ZEALAND 10000 (b)	\$ 6,000. (c) Total contributions \$ 25,000.	Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b) Name, address, and ZIP + 4 INTERNETNZ PO BOX 11881 WELLINGTON NEW ZEALAND 10000	\$ 6,000. (c) Total contributions \$ 25,000.	Person Payroll Noncash (Complete Part II for noncash contributions.) Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b) Name, address, and ZIP + 4 INTERNETNZ PO BOX 11881 WELLINGTON NEW ZEALAND 10000 (b)	\$ 6,000. (c) Total contributions \$ 25,000.	Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contributions.)
(a) No. 29	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b) Name, address, and ZIP + 4 INTERNETNZ PO BOX 11881 WELLINGTON NEW ZEALAND 10000 (b) Name, address, and ZIP + 4	\$ 6,000. (c) Total contributions \$ 25,000.	Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contributions.)
(a) No. 29	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b) Name, address, and ZIP + 4 INTERNETNZ PO BOX 11881 WELLINGTON NEW ZEALAND 10000 (b) Name, address, and ZIP + 4 RESTENA 6, RUE COUDENHOVE-KALERGI	\$ 6,000. (c) Total contributions \$ 25,000.	Person Payroll Noncash (Complete Part II for noncash contributions.) Person Payroll Noncash (Complete Part II for noncash contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contribution
(a) No. 29	Name, address, and ZIP + 4 RNIDS ZORZA KLEMANSOA 18A/I BELGRADE SERBIA LV-1459 (b) Name, address, and ZIP + 4 INTERNETNZ PO BOX 11881 WELLINGTON NEW ZEALAND 10000 (b) Name, address, and ZIP + 4 RESTENA	\$ 6,000. (c) Total contributions \$ 25,000.	Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contributions.) (d) Type of contribution Person Payroll Noncash Payroll Noncash

Employer identification number 95-4712218

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
31	HONG KONG INTERNET REGISTRATION CORPORAT UNIT 2002-2005, 20/F, ING TOWER SHEUNG WAN HONG KONG CH-8021	\$6,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
32	FINNISH COMMUNICATION REGULATORY AUTHORI P.O.BOX 313 HELSINKI FINLAND NO-7465	\$15,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
33	COORDINATION CENTER FOR TLD RU 8 MARTA STR., 1 BLD. 12 MOSCOW RUSSIA CP 832 0198	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
34	KOREA INTERNET & SECURITY AGENCY (KISA) PLATINUM TOWER 11TH FLOOR SEOUL KOREA, REPUBLIC OF (SOUTH) SI-1000	\$60,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
35	.CO INTERNET SAS CALLE 100 NO 8A - 49 TORRE B OF 507 BOGOTA COLOMBIA 00931-1613	\$138,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
36	NOMINET UK OXFORD SCIENCE PARK OXFORD UNITED KINGDOM OX4 4DQ	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number 95-4712218

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
 - -		 \$	

11165W 2020

Name of o	rganization INTERNET CORPORATION FO	R ASSIGNED		Employer identification number
	NAMES AND NUMBERS			95-4712218
Part III	Exclusively religious, charitable, etc., (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if addition	e year from any one comes completing Part III, enter year. (Enter this information	tributor. Com the total of ϵ	nplete columns (a) through (e) and exclusively religious, charitable, etc.
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
<u> </u>				
		(e) Transfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationshi	p of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
			-	
		(e) Transfer of gift	<u> </u>	
	Transferee's name, address, and	ZIP + 4	Relationshi	p of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationshi	p of transferor to transferee
	-			
(a) No.	(h) Durnage of wife	(a) Has at with		(d) Decemention of how wife in held
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationshi	p of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

PAGE 31

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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," on 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 un	nder section 501(h)): C	Complete Part II-A. Do not com	iplete Part II-B.	
	. , . , .	that have NOT filed Form 5768 (election	,	''	•	
	e organization answered "Yes," (see separate instructions), ther	on Form 990, Part IV, line 5 (Proxy	Tax) (see separate	instructions) or Form 990-I	EZ, Part V, line 35c (Prox	
•	Section 501(c)(4), (5), or (6) org					
		CORPORATION FOR ASSIGNE	ח	Employer ide	ntification number	
	IES AND NUMBERS	CORPORATION FOR ASSIGNE	D	95-4712		
		raspination is evenuativades	coetion FO1/o) or			
		organization is exempt under				
1	·	organization's direct and indirect	political campaign a	activities in Part IV. (see ir	structions for	
	definition of "political campa	,				
2		xpenditures (see instructions)				
3	Volunteer hours for political	campaign activities (see instruction	ns)			
Par		organization is exempt under				
1	Enter the amount of any exc	cise tax incurred by the organization	n under section 49	55▶\$		
2		cise tax incurred by organization m				
3	=	a section 4955 tax, did it file Form	-			
4a	Was a correction made?				Yes No	
b	If "Yes," describe in Part IV.					
Par	t I-C Complete if the c	organization is exempt under	section 501(c), e	except section 501(c)(3).	
1	Enter the amount directly e	expended by the filing organization	n for section 527	exempt function		
	activities					
2		ng organization's funds contributed				
•						
3	•	enditures. Add lines 1 and 2. Er				
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No	
5		and employer identification numb				
		s. For each organization listed, er				
		tributions received that were pron nd or a political action committee (
			T .	· · · · · · · · · · · · · · · · · · ·		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and	
				funds. If none, enter -0	promptly and directly	
					delivered to a separate	
					political organization. If	
					none, enter -0	
(1)						
			1			
(2)						
			1			
(3)						
			1			
(4)						
			1			
(5)						
. ,			1			

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

Schedule C (Form 990 or 990-EZ) 2017

(6)

11165W 2020 60100666 PAGE 32

Sch	nedule C (Form 990 or 990-EZ) 2017	NTERN	ET CORPO	RATION FOR AS	SIGNED	95-4	712218	Page 2
Pa	art II-A Complete if the organization 501(h)).	anizatio	on is exen	npt under section	n 501(c)(3) and	filed Form 5768 (ele	ction und	er
A			•	affiliated group (and excess lobbying expe		ach affiliated group mem	ber's name	Э,
В	Check ▶ if the filing organization	ation che	cked box A	A and "limited contro	ol" provisions app	oly.		
	Limits of term "expenditu		ying Expendence)	(a) Filing organization's totals	(b) Aff group	
k c c	a Total lobbying expenditures to in b Total lobbying expenditures to in c Total lobbying expenditures (add d Other exempt purpose expenditu e Total exempt purpose expenditu Lobbying nontaxable amount.	fluence I lines 1a ires res (ado	a legislative a and 1b) l lines 1c an	e body (direct lobbyi	ng)			
	columns.							
	If the amount on line 1e, column (a)	or (b) is:			is:			
	Not over \$500,000			amount on line 1e.				
	Over \$500,000 but not over \$1,000,			us 15% of the excess				
	Over \$1,000,000 but not over \$1,50			us 10% of the excess				
	Over \$1,500,000 but not over \$17,0	00,000		us 5% of the excess of	over \$1,500,000.			
	Over \$17,000,000		\$1,000,000					
	g Grassroots nontaxable amount (-			
	n Subtract line 1g from line 1a. If z							
	Subtract line 1f from line 1c. If zo							
j	If there is an amount other that				_			
	reporting section 4911 tax for th						Yes	No
	(Some organizations that	made a	section 50	raging Period Unde o1(h) election do no te instructions for I	t have to compl		nns below.	
		Lobb	ying Exper	nditures During 4-Ye	ear Averaging Pe	riod		
	Calendar year (or fiscal year beginning in)	(a)	2014	(b) 2015	(c) 2016	(d) 2017	(e)	Γotal
2a	Lobbying nontaxable amount							
k	Lobbying ceiling amount (150% of line 2a, column (e))							
C	Total lobbying expenditures							
c	d Grassroots nontaxable amount							

Schedule C (Form 990 or 990-EZ) 2017

JSA

e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures

7E1265 1.000 11165W 2020 60100666 PAGE 33

	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO	T file	d For	m 57€	68	Page 3
	(election under section 501(h)).	(a	۱۱		(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No		Amoun	t
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:		37			
а	Volunteers?	X	X			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.		Х			
C	Media advertisements?		X			
d	Mailings to members, legislators, or the public?		X			
e f	Publications, or published or broadcast statements?		X			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X			32	26,200
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х			
i	Other activities?		Х			
j	Total. Add lines 1c through 1i				32	26,200
2a	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					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		37			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	()(5)	X	4.		
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(C)(5)	, or s	ection	1	
	301(6)(0).				Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?				1	10
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures fro				3	
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501				1	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	OR (b) Pa	rt 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 amou political expenses for which the section 527(f) tax was paid).	unts (of			
а	Current year			2a		
b	Carryover from last year			2b		
С	Total			2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible le	obbyir	ıg	4		
5	and political expenditure next year?	• • •		5		
	t IV Supplemental Information	· · ·				
	ride the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	d grou	ıp list); Part	II-A, line	s 1 and
	ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
FOF	RM 990, SCHEDULE C, PART II-B, LINES 1B AND 1G					
LOI	BBYING EXPENDITURES					
THE	ORGANIZATION UTILIZED THE SERVICES OF A STAFF REGISTERED LOBBYIST	r AS				
WEI	L AS THREE GOVERNMENT AFFAIRS FIRMS DURING THE YEAR ENDED JUNE 30	,				

Schedule C (Form 990 or 990-EZ) 2017

2018, FOR A TOTAL COST OF \$326,200.

Schedule C (Form 990 or 990-EZ) 2017 Page **4**

Part IV Supplemental Information (continued)

Schedule C (Form 990 or 990-EZ) 2017

JSA

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SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization INTERNET CORPORATION FOR ASSIGNED Employer identification number NAMES AND NUMBERS 95-4712218 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose

	conferring impermissible private benefit?	•	
Pa	art II Conservation Easements.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization (check all that apply).		
	Preservation of land for public use (e.g., recreation or education)	of a h	istorically important land area
	Protection of natural habitat Preservation	of a c	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the fo	orm of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
С	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a		
	historic structure listed in the National Register	2d	
3	Number of conservation easements modified, transferred, released, extinguished, or terminate	ated	by the organization during the
	tax year ▶		
4	Number of states where property subject to conservation easement is located ▶		
5	Does the organization have a written policy regarding the periodic monitoring, inspect	ion, h	nandling of
	violations, and enforcement of the conservation easements it holds?		
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing con	servat	ion easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing of	onser	vation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sections are sectionally as the conservation easement reported on line 2(d) above satisfy the requirements of sections.		
	and section 170(h)(4)(B)(ii)?		Yes L No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and		•
	balance sheet, and include, if applicable, the text of the footnote to the organization's finance	ial sta	tements that describes the
	organization's accounting for conservation easements.	<u> </u>	
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	r Sim	iiar Assets.
		reven	ue statement and halance sheet

- works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- 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 (ASC 958) relating to these items: ▶ \$

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

Schedule D (Form 990) 2017

Page 2 Schedule D (Form 990) 2017

Par	t III Organizations Maintainir	ng Collect	tions of	Art, Hist	orical T	reasur	es, c	or Oth	ner Simila	r Asse	ts (con	tinue	ed)
3	Using the organization's acquisition	n, accessi	on, and o	other recor	ds, checl	k any o	f the	follow	ing that ar	e a sigr	nificant i	ıse o	f its
	collection items (check all that app	ly):											
а	Public exhibition			d	Loan	or excha	ange	prograi	ms				
b	Scholarly research			e	Other								
С	Preservation for future gene	rations			_								
4	Provide a description of the organ	nization's c	ollections	and expla	ain how t	they fur	ther	the or	ganization's	exemp	t purpos	e in	Part
	XIII.			·					_				
5	During the year, did the organization	n solicit or	receive c	donations o	of art, histo	orical tr	easur	res, or	other simila	ır			
	assets to be sold to raise funds rath									_	Yes		No
Par	t IV Escrow and Custodial Ar			· ·									
	Complete if the organizate 990, Part X, line 21.			s" on Forn	n 990, Pa	art IV, I	ine 9), or re	ported an	amoun	t on Fo	m	
1a	Is the organization an agent, truste	e, custodia	an or othe	er intermed	liary for c	ontribut	ions	or othe	r assets not				
	included on Form 990, Part X?									[Yes		No
b	If "Yes," explain the arrangement i	n Part XIII a	and comp	olete the fo	llowing tak	ole:				_			-
					•				An	nount			
С	Beginning balance						1c						
d	Additions during the year						1d						
е	Distributions during the year						1e						
f	Ending balance						1f						
2a	Did the organization include an am						or cus	stodial	account liab	oility?	Yes		No
b	If "Yes," explain the arrangement i	n Part XIII.	Check he	ere if the e	xplanation	has be	en pro	ovided	on Part XIII				1
	t V Endowment Funds.												
	Complete if the organizat	ion answe	red "Yes	s" on Form	n 990, Pa	art IV, li	ine 1	0.					
		(a) Curre	nt year	(b) Pric	or year	(c) Two	o years	s back	(d) Three ye	ars back	(e) Four	years	back
1 a	Beginning of year balance												
b	Contributions												
C	Net investment earnings, gains,												
·	and losses												
ч	Grants or scholarships												
	Other expenditures for facilities												
-	and programs												
	Administrative expenses												
	End of year balance												
g 2	Provide the estimated percentage	of the curr	ont voor	and halanc	o (lino 1a	column	(2))	hold as					
а	Board designated or quasi-endown	nent ►	ent year t	_%	e (iiile 19,	Column	(a)) i	iliciu as					
	Permanent endowment	%	0/										
С	Temporarily restricted endowment		%	1000/									
٥.	The percentages on lines 2a, 2b, a		•		4: 41		اد مد ما	د: حداد د					
зa	Are there endowment funds not in	the posses	ssion of tr	ie organiza	illon inai	are nei	u and	admir	iistered for t	ne.	Г	Yes	No
	organization by:											163	140
	(i) unrelated organizations										3a(i)		
L	(ii) related organizations										3a(ii) 3b		
_	If "Yes" on line 3a(ii), are the related	•		•			·				30		
4 Por	Describe in Part XIII the intended u												
Fai	Land, Buildings, and Equ Complete if the organiza	tion answe	ered "Ye	s" on Fori	m 990, P	Part IV,	line '	11a. S	ee Form 9	90, Pai	t X, line	10.	
	Description of property		(a) Cost or	other basis	(b) Cost of	or other ba		(c) Acc	cumulated		d) Book va		
1a	Land		(inves	tment)	(0	ther)		depr	eciation				
b	Land Buildings												
	Buildings Leasehold improvements				5.0	982,38	14	3 N	99,565.		2,88	32 P	19
d						911,52			25,998.		6,98		
	Other					352,43	_	50,9	43,330.		2,3		
	I. Add lines 1a through 1e. (Column		aual Farr	n 000 Do-				<u> </u>			12,22		
ota	i. Aud iiries Ta tiirougii Te. (C <i>olumn</i>	(u) must e	quai rom	н ээ∪, Раπ	A, COIUINI	ıı (ロ), IIN	i c 100	J.,	▶		14,44	, /	, 5.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 Page **3**

Part VII	Investments - Other Securities.	d "Voo" on Form 000	Port IV line 44b, See Form 000, Port V line 42
			, Part IV, line 11b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financia	al derivatives		
(2) Closely-	-held equity interests		
(3) Other_			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII		d "Yes" on Form 990	, Part IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	,		Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.	d "Yes" on Form 990	, Part IV, line 11d. See Form 990, Part X, line 15.
	(a) De	scription	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	ımn (b) must equal Form 990, Part X, col. (B) ı	line 15.)	>
Part X	Other Liabilities.		, Part IV, line 11e or 11f. See Form 990, Part X,
4		(h) Deelee	
1. (1) Fodor	(a) Description of liability	(b) Book valu	e
_ ` '	al income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.)	•	
2 Liability fo	or uncortain tax positions. In Part VIII. provide the	text of the footnote to t	the organization's financial statements that reports the

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

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11165W 2020

Page 4 Schedule D (Form 990) 2017

	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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		
a b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>)	5	
Part			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		
		5	
	XIII Supplemental Information.		
Provid	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1b and 2b; Part	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1b and 2b; Part	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	
Provid 2; Par	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	art V, I	

Schedule D (Form 990) 2017 JSA

7E1271 1.000 111165W 2020 60100666 PAGE 39

Part XIII Supplemental Information (continued)

FORM 990, SCHEDULE D, PART X, LINE 2

FIN 48 (ASC 740-10) FOOTNOTE

ICANN IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES IN THE UNITED STATES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701(D) OF THE CALIFORNIA REVENUE AND TAXATION CODE. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE ACCOMPANYING FINANCIAL STATEMENTS. HOWEVER, ICANN IS SUBJECT TO INCOME TAXES ON ANY NET INCOME THAT IS DERIVED FROM A TRADE OR BUSINESS, REGULARLY CARRIED ON, AND NOT IN FURTHERANCE OF THE PURPOSES FOR WHICH IT WAS GRANTED EXEMPTION. NO INCOME TAX PROVISION HAS BEEN RECORDED AS THE NET INCOME, IF ANY, FROM ANY UNRELATED TRADE OR BUSINESS, IN THE OPINION OF MANAGEMENT, IS NOT MATERIAL TO THE BASIC FINANCIAL STATEMENTS TAKEN AS A WHOLE.

ICANN BELIEVES IT IS IN COMPLIANCE WITH ALL APPLICABLE LAWS, HOWEVER, UPON AUDIT BY A TAXING AUTHORITY, IF AMOUNTS ARE FOUND DUE, ICANN MAY BE LIABLE FOR SUCH TAXES. MANAGEMENT HAS ANALYZED ICANN'S TAX POSITIONS TAKEN ON FEDERAL AND STATE INCOME TAX RETURNS FOR ALL OPEN TAX YEARS AND HAS CONCLUDED THAT, AS OF JUNE 30, 2018, NO LIABILITIES ARE REQUIRED TO BE RECORDED IN CONNECTION WITH SUCH TAX POSITIONS IN ICANN'S FINANCIAL STATEMENTS.

THE FISCAL 2013 THROUGH 2017 TAX YEARS REMAIN OPEN FOR EXAMINATION BY THE TAXING AUTHORITIES. NO INTEREST OR PENALTIES ARE RECOGNIZED DURING THE YEAR AS ICANN HAS NOT RECORDED INCOME TAX CONTINGENCIES. ICANN IS NOT UNDER EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR ANY OPEN TAX YEARS.

Schedule D (Form 990) 2017

11165W 2020

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service

INTERNET CORPORATION FOR ASSIGNED

Name of the organization **Employer identification number** NAMES AND NUMBERS 95-4712218 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the X grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total offices in the émployees, region (by type) (such as, a program service, expenditures for describe specific type of fundraising, program services, region agents, and and investments investments, grants to recipients located in the region) independent service(s) in the region in the region contractors in the region (1) NORTH AMERICA Ω 2 PROGRAM SERVICES SEE 990 PART III 3,449,929. (2) CENTRAL AMERICA/CARIBBEAN 0. PROGRAM SERVICES SEE 990 PART III 2,397,452. 3. (3) SOUTH AMERICA 1. 6. PROGRAM SERVICES SEE 990 PART III 2,931,574. EAST ASIA AND THE PACIFIC 2 27 PROGRAM SERVICES SEE 990 PART III 6,547,576. SOUTH ASIA Ω 2 PROGRAM SERVICES SEE 990 PART III 284,423. (6) EUROPE 3. 53. PROGRAM SERVICES SEE 990 PART III 15,030,464. RUSSIA/INDEPENDENT STATES 0. 2. PROGRAM SERVICES SEE 990 PART III 216,974. MIDDLE EAST AND NORTH AFRICA 0. PROGRAM SERVICES SEE 990 PART III 4,920,514. (9) SUB-SAHARAN AFRICA PROGRAM SERVICES SEE 990 PART III 1,288,842. (10) (11)(12)(13)(14)(15)(16)(17)Sub-total 7. 102. 37,067,748. 3a Total from continuation

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

sheets to Part I Totals (add lines 3a and 3b)

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11165W 2020 60100666 PAGE 41

37,067,748.

95-4712218 Page 2 Schedule F (Form 990) 2017

, , , , , , ,		- 3 -
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form	n 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				SPONSORSHIP					
(1)			SOUTH AMERICA	LACIGF 2017	7,000.	WIRE/CASH			
				KISA-ICANN					
(2)			EAST ASIA/PACIFIC	PROJECT	50,002.	WIRE/CASH			
				SPONSORSHIP					
(3)			SOUTH ASIA	CYFY 2017	10,000.	WIRE/CASH			
				SPONSORSHIP					
(4)			EAST ASIA/PACIFIC	FY18 NOGS &	18,000.	WIRE/CASH			
(5)			SUB-SAHARAN AFRICA	CONTRIBUTION	10,000.	WIRE/CASH			
				SPONSORSHIP					
(6)			SOUTH AMERICA	MEETING	10,000.	WIRE/CASH			
				CONTRIBUTION					
(7)			RUSSIA/NEWLY IND. STATES	RCC ACTIVITY	7,000.	WIRE/CASH			
				AWARDS					
(8)			EUROPE/ICELAND/GREENLAND	SPONSORSHIP	20,000.	WIRE/CASH			
(9)			SOUTH AMERICA	RIOINFO 2017	7,000.	WIRE/CASH			
				CONTRIBUTION					
(10)			EUROPE/ICELAND/GREENLAND	PROJECT	70,612.	WIRE/CASH			
				SPONSORSHIP					
(11)			SOUTH AMERICA	LACNIC 28	7,000.	WIRE/CASH			
				SPONSORSHIP					
(12)			EUROPE/ICELAND/GREENLAND	WSIS FORUM	15,677.	WIRE/CASH			
				EU SUMMER					
(13)			EUROPE/ICELAND/GREENLAND	SCHOOL	12,281.	WIRE/CASH			
				SPONSORSHIP					
(14)			NORTH AMERICA	WORKSHOPS	12,500.	WIRE/CASH			
				SPONSORSHIP					
(15)			SOUTH AMERICA	SSIG	5,500.	WIRE/CASH			
				CONTRIBUTING					
(16)			EUROPE/ICELAND/GREENLAND	PARTNER WSIS	15,987.	WIRE/CASH			

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
	Enter total number of other organizations or entities

Och alvia 5 (5 yrs 200) 2047

1 (a) Name of organization (b) IRS co section and (if applicated) (1) (2) (3) (4) (5) (6) (7) (8) (10) (11) (12) (13)	EIN	(d) Purpose of grant SPONSORSHIP LACNIC 29 AIS 2018 WSIS 18	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	SUB-SAHARAN AFRICA	LACNIC 29 AIS 2018		WIRE/CASH			
(2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	SUB-SAHARAN AFRICA	AIS 2018		WIRE/CASH			
(3) (4) (5) (6) (7) (8) (9) (10) (11)				1			
(3) (4) (5) (6) (7) (8) (9) (10) (11)							
(4) (5) (6) (7) (8) (9) (10) (11)	MIDDLE EAST/NORTH AFRICA	WSTS 18	20,000.	WIRE/CASH			
(4) (5) (6) (7) (8) (9) (10) (11)	MIDDLE EAST/NORTH AFRICA	11010 10					
(5) (6) (7) (8) (9) (10) (11)		REPORTING	6,000.	WIRE/CASH			
(5) (6) (7) (8) (9) (10) (11)		SPONSORSHIP					
(6) (7) (8) (9) (10) (11) (12)	SOUTH AMERICA	LACIGF 11	10,000.	WIRE/CASH			
(6) (7) (8) (9) (10) (11) (12)		HELD EDIG					
(7) (8) (9) (10) (11) (12)	EUROPE/ICELAND/GREENLAND	EVENT	5,874.	WIRE/CASH			
(7) (8) (9) (10) (11) (12)		CONTRIBUTION					
(8) (9) (10) (11) (12)	EUROPE/ICELAND/GREENLAND	PUBLICATION	10,000.	WIRE/CASH			
(8) (9) (10) (11) (12)		SPONSORSHIP					
(9) (10) (11) (12)	EUROPE/ICELAND/GREENLAND	ICT FORUM 18	9,958.	WIRE/CASH			
(9) (10) (11) (12)		UNESCO					
(10) (11) (12)	EUROPE/ICELAND/GREENLAND	PROJECT	10,000.	WIRE/CASH			
(10) (11) (12)							
(11) (12)	EUROPE/ICELAND/GREENLAND	EURO-SSIG 18	10,000.	WIRE/CASH			
(11) (12)		IGFSA					
(12)	EUROPE/ICELAND/GREENLAND	CONTRIBUTION	50,000.	WIRE/CASH			
(12)		18 MOBILE					
	EAST ASIA/PACIFIC	SOCIETIES	12,180.	WIRE/CASH			
		SPONSORSHIP					
(13)	SOUTH ASIA	IPV6	80,000.	WIRE/CASH			-
(13)		PROJ					
	EUROPE/ICELAND/GREENLAND	M1-32XES IGF	113,253.	WIRE/CASH			
(44)							
(14)							
(45)							
(15)							-
(16)							

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exemp	ot	
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	.	
3	Enter total number of other organizations or entities	·	23.

Schedule F (Form 990) 2017

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) FELLOWSHIP PROGRAM	CENT. AMERICA/CARIBBEAN	14.	6,100.	WIRE/CASH	36,526.	AIRFARE/LODG	ACTUAL EXP
(2) FELLOWSHIP PROGRAM	EAST ASIA/PACIFIC	21.	9,100.	WIRE/CASH	89,350.	AIRFARE/LODG	ACTUAL EXP
(3) FELLOWSHIP PROGRAM	EUROPE/ICELAND/GREENLAND	20.	9,050.	WIRE/CASH	51,442.	AIRFARE/LODG	ACTUAL EXP
(4) FELLOWSHIP PROGRAM	MIDDLE EAST/NORTH AFRICA	11.	5,000.	WIRE/CASH	30,365.	AIRFARE/LODG	ACTUAL EXP
(5) FELLOWSHIP PROGRAM	NORTH AMERICA	4.	1,800.	WIRE/CASH	10,203.	AIRFARE/LODG	ACTUAL EXP
(6) FELLOWSHIP PROGRAM	RUSSIA/NEWLY IND. STATES	13.	5,500.	WIRE/CASH	31,855.	AIRFARE/LODG	ACTUAL EXP
(7) FELLOWSHIP PROGRAM	SOUTH AMERICA	19.	8,800.	WIRE/CASH	51,215.	AIRFARE/LODG	ACTUAL EXP
(8) FELLOWSHIP PROGRAM	SOUTH ASIA	26.	9,100.	WIRE/CASH	65,255.	AIRFARE/LODG	ACTUAL EXP
(9) FELLOWSHIP PROGRAM	SUB-SAHARAN AFRICA	29.	11,500.	WIRE/CASH	88,433.	AIRFARE/LODG	ACTUAL EXP
(10) NEXTGEN	CENT. AMERICA/CARIBBEAN	4.	2,000.	WIRE/CASH	5,216.	AIRFARE/LODG	ACTUAL EXP
(11) NEXTGEN	EAST ASIA/PACIFIC	6.	2,400.	WIRE/CASH	17,790.	AIRFARE/LODG	ACTUAL EXP
(12) NEXTGEN	MIDDLE EAST/NORTH AFRICA	2.	800.	WIRE/CASH	2,922.	AIRFARE/LODG	ACTUAL EXP
(13) NEXTGEN	NORTH AMERICA	1.	500.	WIRE/CASH	2,343.	AIRFARE/LODG	ACTUAL EXP
(14) NEXTGEN	RUSSIA/NEWLY IND. STATES	1.	400.	WIRE/CASH	1,217.	AIRFARE/LODG	ACTUAL EXP
(15) NEXTGEN	SOUTH AMERICA	12.	6,000.	WIRE/CASH	20,708.	AIRFARE/LODG	ACTUAL EXP
(16) NEXTGEN	SOUTH ASIA	5.	2,000.	WIRE/CASH	9,891.	AIRFARE/LODG	ACTUAL EXP
(17) NEXTGEN	SUB-SAHARAN AFRICA	2.	900.	WIRE/CASH	3,862.	AIRFARE/LODG	ACTUAL EXP
(18)							

Schedule F (Form 990) 2017 Page 4

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

Schedule F (Form 990) 2017

7E1277 1.000 11165W 2020 60100666 Schedule F (Form 990) 2017 Page 5

Part V Supplemental Information

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

FORM 990, SCHEDULE F, PART I, LINE 2

PROGRAM AND THE NEXTGEN PROGRAM.

ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANTS

THERE ARE TWO PROGRAMS THAT PROVIDE A GRANT OF SUPPORT THAT IS AWARDED TO ENABLE INDIVIDUALS TO ATTEND ICANN PUBLIC MEETINGS. THE ICANN FELLOWSHIP

THE ICANN FELLOWSHIP PROGRAM IS A GRANT OF SUPPORT THAT IS AWARDED TO ENABLE INDIVIDUALS FROM STAKEHOLDER GROUPS AROUND THE WORLD TO ATTEND ICANN PUBLIC MEETINGS. THIS PROGRAM SEEKS TO HELP CREATE A BROADER BASE OF KNOWLEDGEABLE CONSTITUENTS TO ENGAGE IN THE ICANN MULTISTAKEHOLDER PROCESS AND BECOME THE NEW VOICE OF EXPERIENCE IN THEIR REGIONS AND ON THE GLOBAL STAGE. THROUGH THE FELLOWSHIP PROGRAM, ICANN PROVIDES COACHING AND TRAVEL ASSISTANCE FOR INDIVIDUALS TO ATTEND AN ICANN PUBLIC MEETING. DURING THE MEETING, PROGRAM PARTICIPANTS IMMERSE IN A "FAST-TRACK" EXPERIENCE INTO ICANN'S MULTISTAKEHOLDER PROCESS, WITH PRESENTATIONS ABOUT THE MANY PARTS OF ICANN AND OPPORTUNITIES TO NETWORK AND INTERACT WITH ICANN COMMUNITY MEMBERS, BOARD MEMBERS AND PERSONNEL. PRIORITY IS GIVEN TO CANDIDATES CURRENTLY LIVING IN UNDERSERVED AND UNDERREPRESENTED COMMUNITIES AROUND THE WORLD, THOSE WHO REPRESENT DIVERSITY OF GENDER, SECTOR, REGION, EXPERIENCE, AND EXPERTISE, AND/OR HAVE ESTABLISHED FINANCIAL NEED. FOR MORE INFORMATION ON THE FELLOWSHIP PROGRAM, PLEASE REFER TO: HTTPS://WWW.ICANN.ORG/FELLOWSHIPPROGRAM.

THE NEXTGEN PROGRAM IS FOCUSED ON THE NEXT GENERATION OF INDIVIDUALS WHO WILL BECOME ACTIVELY ENGAGED IN SHAPING THE FUTURE OF THE GLOBAL INTERNET

Page 5 Schedule F (Form 990) 2017

Supplemental Information Part V

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

POLICY IN THEIR REGIONAL COMMUNITIES. THROUGH THIS PROGRAM, ICANN PROVIDES COACHING AND TRAVEL ASSISTANCE TO STUDENTS FROM THE REGIONS WHERE THE ICANN PUBLIC MEETING IS TAKING PLACE. FOR MORE INFORMATION ON THE NEXGEN PROGRAM, PLEASE REFER TO:

HTTPS://WWW.ICANN.ORG/PUBLIC-RESPONSIBILITY-SUPPORT/NEXTGEN.

BOTH OF THESE PROGRAMS COVER THE COST OF ECONOMY CLASS AIRFARE AND HOTEL, AS WELL AS PROVIDE A STIPEND AFTER SUCCESSFUL COMPLETION OF THE PROGRAM, IN ORDER TO ASSIST IN COVERING SOME BASIC EXPENSES INCURRED BY PARTICIPANTS. TRAVEL AND HOTEL COSTS ASSOCIATED WITH INDIVIDUALS PRE-SELECTED TO ATTEND THE PUBLIC MEETING ARE BOOKED AND PAID FOR DIRECTLY BY ICANN. ALL INDIVIDUALS ARE ELIGIBLE TO RECEIVE A FLAT STIPEND NOT TO EXCEED US\$500.00. STIPENDS ARE GENERALLY PROVIDED TO PARTICIPANTS BY WIRE TRANSFER AND ARE PAID TO EACH INDIVIDUAL SUBSEQUENT TO THE MEETING AND AFTER THE PARTICIPANT HAS DEMONSTRATED COMPLETION OF HIS OR HER PROGRAM.

DURING THE TWELVE MONTHS ENDED JUNE 30, 2018, ICANN PAID \$599,542 TO ALLOW 190 FELLOWSHIP AND NEXTGEN PARTICIPANTS TO ATTEND ONE OR MORE OF THE THREE ICANN PUBLIC 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 SUPPORTED TRAVELERS IS

Schedule F (Form 990) 2017 Page **5**

Part V Supplem

Supplemental Information

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

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 IX, STATEMENT OF
FUNCTIONAL EXPENSES. FOR OTHER CONTRIBUTIONS, STAKEHOLDER ENGAGEMENT TEAM
MEMBERS DEVELOP REQUESTS BASED UPON ICANN'S STRATEGIC PLAN AND ICANN'S
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.

FORM 990, SCHEDULE F, PART I, LINE 3

AT JUNE 30, 2018, ICANN HAD INTERNATIONAL OFFICES LOCATED IN BRUSSELS,
BELGIUM; ISTANBUL, TURKEY; SINGAPORE, SINGAPORE AND MONTEVIDEO, URUGUAY;
AND ENGAGEMENT CENTERS IN BEIJING, CHINA; NAIROBI, KENYA; AND GENEVA,
SWITZERLAND AS DISPLAYED IN PART I LINE 3 COL (B) OF SCHEDULE F.

THE NUMBER OF PEOPLE IN EACH REGION SHOWN IN PART I, LINE 3, COL (C) OF SCHEDULE F INCLUDES EMPLOYEES AND LONG-TERM INDEPENDENT CONTRACTORS WORKING FOR ICANN.

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

A. THE AMOUNTS PAID (FOR COMPENSATION, TRAVEL REIMBURSEMENT, AND OTHER

Schedule F (Form 990) 2017 Page 5

Supplemental Information Part V

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

COSTS AND EXPENSES) FROM THE US ACCOUNTS PAYABLE DEPARTMENT APPLICABLE TO THE REGION. THIS INCLUDES AMOUNTS SHOWN ON PARTS II AND III AS GRANTS OR OTHER ASSISTANCE.

- B. ALL COSTS ASSOCIATED WITH THE TWO ANNUAL ICANN PUBLIC MEETINGS HELD OUTSIDE OF THE UNITED STATES DURING FISCAL YEAR 2018 (I.E., PANAMA CITY. PANAMA AND BARCELONA, SPAIN). THERE WAS A THIRD ICANN PUBLIC MEETING DURING THE FISCAL HELD, WHICH TOOK PLACE IN SAN JUAN, PUERTO RICO;
- C. AMOUNTS EXPENDED TO FUND THE BELGIUM, TURKEY, SINGAPORE, URUGUAY, CHINA, SWITZERLAND, KENYA BRANCH/LIAISON/REPRESENTATIVE OFFICES, AND PERSONNEL COSTS INCLUDING OFFICE EXPENSES, TRAVEL-RELATED AND OTHER EXPENSES PAID BY THE U.S. ACCOUNTS PAYABLE DEPARTMENT.
- D. ALL PAYMENTS MADE TO INTERNATIONAL BASED EMPLOYEES AND CONTRACTORS WERE RECORDED IN US DOLLARS.

SCHEDULE I (Form 990)

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

OMB No. 1545-0047
2017

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

NAMES AND NUMBERS

INTERNET CORPORATION FOR ASSIGNED

D Employer identification number 95-4712218

Part II Grants and Other Assistance to D 990, Part IV, line 21, for any recipi		_					es" on Form
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ACCESS NOW							SPONSORSHIP OF
PO BOX 115 NEW YORK, NY 10001	27-0597430	501(C)(3)	15,000.				RIGHTSCON EVENT
(2) CARIBNOG INC							LAC-I ROADSHOW -
304 INDIAN TRACE, STE 649 WESTON, FL 33326	46-2354033		6,500.				CARIBNOG
(3) INTERNET SOCIETY							IPJ SPONSORING
1775 WIEHLE AVE 201 RESTON, VA 20190	54-1650477	501(C)(3)	100,000.				AGREEMENT
(4) INTERNET SOCIETY PUERTO RICO CHAPTER, INC.							SPONSORSHIP OF NA
PO BOX 361973 SAN JUAN, PR 00936	66-0718381		10,000.				SCHOOL OF INTERNE
(5) OARC INC.							SPONSORSHIP OF
950 CHARTER ST. REDWOOD CITY, CA 94063	26-2910778	501(C)(3)	25,000.				OARC 27 WORKSHOP
(6) US TELECOMMUNICATIONS TRAINING INSTITUTE							ANNUAL
1150 CONNECTICUT AVE. WASHINGTON, DC 20036	52-1294659	501(C)(3)	88,000.				CONTRIBUTIONS
(7) UNIVERSITY OF OREGON							
1720 E 13TH AVE EUGENE, OR 97403	93-6015767	GOVT	250,000.				NSRC
(8)							
(9)							
(10)							
(11)							
(12)							
(12)							

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

Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017)

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 FELLOWSHIP PROGRAM	12.	5,500.	25,408.	ACTUAL EXPENSE	AIRFARE/LODGING
2 NEXTGEN	12.	6,000.	20,757.	ACTUAL EXPENSE	AIRFARE/LODGING
3					
4					
5					
6					
7					

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

FORM 990, SCHEDULE I, PART I, LINE 2

ORGANIZATION'S PROCEDURES FOR MONITORING GRANTS IN THE UNITED STATES

THE GRANTS ARE AWARDED TO QUALIFIED ORGANIZATIONS AND SELECTED

INDIVIDUALS. ONCE FUNDS ARE TRANSFERRED, ICANN DOES NOT MONITOR THE

FUNDS. THE USE OF THE FUNDS IS AT THE DISCRETION OF THE GRANTEE.

SCHEDULE J (Form 990)

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NAMES AND NUMBERS

INTERNET CORPORATION FOR ASSIGNED

Employer identification number 95-4712218

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	X Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or réimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
Ū	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	70		
	The root to any or miles to o, not the percent and provide the applicable amounts for each term in rate in			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
•	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
-	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
-	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
-	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed		37	
_	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			7.7
_	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2017

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
BO GORAN MARBY	(i)	673,133.	196,154.	0.	36,000.	31,298.	936,585.	0.
1 OFFICER, PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
AKRAM ATALLAH	(i)	518,682.	155,378.	0.	36,000.	31,298.	741,358.	0.
2 PRESIDENT, GDD	(ii)	0.	0.	0.	0.	0.	0.	0.
SUSANNA H BENNETT	(i)	354,103.	105,873.	0.	36,000.	8,472.	504,448.	0.
3 ^{CHIEF} OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
XAVIER CALVEZ	(i)	331,958.	99,410.	0.	31,500.	31,298.	494,166.	0.
4 ^{CHIEF} FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
JOHN JEFFREY	(i)	453,086.	135,035.	0.	13,500.	31,298.	632,919.	0.
GENERAL COUNSEL & SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
DAVID OLIVE	(i)	354,065.	82,980.	0.	36,000.	21,959.	495,004.	0.
6 SVP, POLICY DEVELOPMENT SUPPORT	(ii)	0.	0.	0.	0.	0.	0.	0.
ASHWIN RANGAN	(i)	318,713.	96,498.	0.	36,000.	31,298.	482,509.	0.
7 ^{SVP, ENGINEERING & CIO}	(ii)	0.	0.	0.	0.	0.	0.	0.
DAVID CONRAD	(i)	340,578.	82,132.	0.	31,500.	22,242.	476,452.	0.
8 SVP & CHIEF TECHNOLOGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
ELISE GERICH	(i)	295,119.	75,859.	0.	36,000.	21,978.	428,956.	0.
9 VP, IANA SVCS & PRES PTI-PT YR	(ii)	0.	0.	0.	0.	0.	0.	0.
JAMES HEDLUND	(i)	313,245.	97,797.	0.	36,000.	23,339.	470,381.	0.
10 SVP, CONTRACTUAL COMPLIANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
TAREK KAMEL	(i)	313,300.	94,188.	0.	65,626.	18,537.	491,651.	0.
11 SVP, GOVERNMENT AND IGO ENGMT	(ii)	0.	0.	0.	0.	0.	0.	0.
CYRUS NAMAZI	(i)	292,907.	88,191.	0.	36,000.	19,495.	436,593.	0.
12 ^{VP} , DNS INDUSTRY ENGAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
DIANE R SCHROEDER	(i)	248,035.	74,602.	0.	36,000.	10,959.	369,596.	0.
13 SVP, GLOBAL HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
THERESA SWINEHART	(i)	349,222.	104,410.	0.	36,000.	7,735.	497,367.	0.
14 ^{SVP} , MULTISTAKEHOLDER STRATEGY	(ii)	0.	0.	0.	0.	0.	0.	0.
NICHOLAS TOMASSO	(i)	294,697.	50,278.	0.	36,000.	21,914.	402,889.	0.
15 ^{VP} , GLOBAL MEETING OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
CHRISTINE WILLETT	(i)	291,328.	86,629.	0.	31,500.	31,277.	440,734.	0.
16 ^{VP, GTLD OPERATIONS}	(ii)	0.	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2017

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

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

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

		(B) Breakdown o	vn of W-2 and/or 1099-MISC compensation		(C) Retirement and	(C) Retirement and (D) Nontaxable		(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
ROBERT DUNCAN BURNS	(i)	314,218.	95,655.	0.	31,500.	30,960.	472,333.	0.
1 SVP, GLOBAL COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
JOHN L CRAIN	(i)	236,562.	67,769.	0.	31,500.	31,197.	367,028.	0.
2 ^{CHIEF} SEC. & STABILITY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
DANIEL E HALLORAN	(i)	280,467.	66,300.	0.	31,500.	31,260.	409,527.	0.
DEPUTY GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
MAGUY SERAD	(i)	249,656.	74,046.	0.	36,000.	31,220.	390,922.	0.
4 VP, CONTRACTUAL COMPLIANCE SVC	(ii)	0.	0.	0.	0.	0.	0.	0.
AMY A STATHOS	(i)	299,110.	59,522.	0.	36,000.	11,037.	405,669.	0.
5DEPUTY GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
_ 8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2017

Part | Supplemental Information

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

FORM 990, PART VII AND SCHEDULE J

AMOUNTS LISTED IN PART VII OF FORM 990 AND SCHEDULE J REPRESENT AMOUNTS FOR THE 2017 CALENDAR YEAR.

FORM 990, SCHEDULE J, PART I, LINE 1A

ICANN DOES NOT OFFER FIRST CLASS TRAVEL BUT ALLOWS CERTAIN TRAVELERS TO TRAVEL BUSINESS CLASS EITHER AS A RESULT OF THEIR FUNCTION OR DUE TO MEDICAL REQUIREMENTS. SOME AIRLINES USE THE DESCRIPTION OF FIRST CLASS INSTEAD OF BUSINESS CLASS, WHICH MAY LEAD SOME ICANN-FUNDED TRAVELERS TO HAVE TRAVELED FIRST CLASS AS A RESULT. IF AN AIRLINE OFFERS BOTH FIRST AND BUSINESS CLASS, WITH FIRST CLASS BEING USUALLY MORE EXPENSIVE THAN BUSINESS CLASS, ICANN DOES NOT ALLOW FOR FIRST CLASS TRAVEL, UNLESS A COMPLIMENTARY UPGRADE HAS BEEN OFFERED TO THE TRAVELER FREE OF CHARGE OR THE TRAVELER CHOOSES TO PAY FOR AN UPGRADE WITH HIS OR HER OWN MONEY.

DURING CALENDAR YEAR 2017, THE INDIVIDUALS LISTED BELOW RECEIVED

COMPENSATION THAT WAS TREATED AS OTHER TAXABLE BENEFITS AND INCLUDED IN

SCHEDULE J AS REPORTABLE COMPENSATION:

Schedule J (Form 990) 2017

Part | Supplemental Information

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

- 1) DAVID CONRAD TAX GROSS-UP PAYMENTS AND RELOCATION ALLOWANCE
- 2) DAVID OLIVE TAX GROSS-UP PAYMENTS AND HOUSING ALLOWANCE OR RESIDENCE

FOR PERSONAL USE

3 NICHOLAS TOMASSO - TAX GROSS-UP PAYMENTS, RELOCATION ALLOWANCE AND

HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE

FORM 990, SCHEDULE J, PART I, LINE 7

REGARDING AT-RISK COMPENSATION:

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

REMUNERATION PROVIDED IS COMPETITIVE GLOBALLY AND THAT IT PROVIDES

PERSONNEL WITH APPROPRIATE MOTIVATION FOR HIGH PERFORMANCE TOWARDS AGREED

OBJECTIVES. THIS FRAMEWORK IS DESCRIBED IN DETAIL WITHIN THE DOCUMENT

ENTITLED ICANN PERSONNEL REMUNERATION PRACTICES.

SEE ATTACHED LINKS:

HTTPS://WWW.ICANN.ORG/EN/SYSTEM/FILES/FILES/REMUNERATION-PRACTICES-FY17-01

JAN17-EN.PDF

HTTPS://WWW.ICANN.ORG/EN/SYSTEM/FILES/FILES/REMUNERATION-PRACTICES-FY18-01

Schedule J (Form 990) 2017

Part | Supplemental Information

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

JUL17-EN.PDF

FORM 990, SCHEDULE J, PART II

ICANN'S OVERALL COMPENSATION PHILOSOPHY IS TO TARGET COMPENSATION BETWEEN THE 50TH AND 75TH PERCENTILE OF THE RELEVANT MARKET, TO ATTRACT AND RETAIN THE RIGHT PERSONNEL. THE DRIVING ELEMENT OF THIS PHILOSOPHY IS THAT ICANN'S COMPENSATION IS MARKET-BASED. ICANN HAS PERSONNEL 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. IN ADDITION, EXCHANGE RATE FLUCTUATIONS ALSO AFFECT THE U.S. DOLLAR EQUIVALENCE OF THE INTERNATIONAL PERSONNEL.

SCHEDULE L

(Form 990 or 990-EZ)

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.

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

OMB No. 1545-0047

Open To Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NAMES AND NUMBERS

INTERNET CORPORATION FOR ASSIGNED

Employer identification number 95-4712218

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) 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.

4	(a) Name of discussified pages	(b) Relationship between disqualified person and	(a) Description of transaction	(d) C	orrected?
1	(a) Name of disqualified person	organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2	Enter the amount of tax incurred by	the organization managers or disqualified	persons during the year		
	under section 4958		▶ \$		
3		ne 2, above, reimbursed by the organization,			

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fron	an to or the zation?	(e) Original principal amount	(f) Balance due	(g) In o	lefault?		ard or	(i) W agreer	
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						\$						

Part | Grants or Assistance Benefiting 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 of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2017

Schedule L (Form 990 or 990-EZ) 2017 Page 2

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	organi	aring of ization's nues?
				Yes	No
(1) SEE PART V	SUBSTANTIAL CONTRIBUTOR	1,323,855.	NEW GTLD PROGRAM CONTRACT		Х
_(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART IV, LINE 1, COLUMN A

THE ORGANIZATION STIFTELSEN FOR INTERNETINFRASTRUCKTUR.SE IS AN

INTERESTED PERSON AS DEFINED BY THE INTERNAL REVENUE SERVICE. THE

ORGANIZATION STIFTELSEN FOR INTERNETINFRASTRUCKTUR IS BOTH A SIGNIFICANT

INDEPENDENT CONTRACTOR AND SUBSTANTIAL CONTRIBUTOR NOTED IN PART IV, LINE

1 ABOVE BUT LISTED HERE DUE TO SPACE CONSTRAINTS.

11165W 2020

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

1 20 17

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

INTERNET CORPORATION FOR ASSIGNED

95-4712218

NAMES AND NUMBERS

FORM 990, PART I, LINE 1 AND PART III, LINE 1
ORGANIZATION'S MISSION

THE MISSION OF THE INTERNET CORPORATION FOR ASSIGNED NAMES AND NUMBERS ("ICANN") IS TO COORDINATE, AT THE OVERALL LEVEL, AND TO ENSURE THE STABLE AND SECURE OPERATING OF, THE GLOBAL INTERNET'S SYSTEM OF UNIQUE IDENTIFIERS. IN PARTICULAR, ICANN FULFILLS ITS MISSION EITHER DIRECTLY, OR THROUGH AN AFFILIATE BY: (I) COORDINATING THE ASSIGNMENT OF INTERNET TECHNICAL PARAMETERS AS NEEDED TO MAINTAIN UNIVERSAL CONNECTIVITY ON THE INTERNET; (II) PERFORMING AND OVERSEEING FUNCTIONS RELATED TO THE COORDINATION OF THE INTERNET PROTOCOL ("IP") ADDRESS SPACE; (III) PERFORMING AND OVERSEEING FUNCTIONS RELATED TO THE COORDINATION OF THE INTERNET DOMAIN NAME SYSTEM ("DNS"), INCLUDING, SUPPORTING THE DEVELOPMENT OF, AND IMPLEMENTING POLICIES FOR DETERMINING THE CIRCUMSTANCES UNDER WHICH NEW TOP-LEVEL DOMAINS ARE ADDED TO THE ROOT ZONE; (IV) OVERSEEING OPERATION OF THE AUTHORITATIVE INTERNET ROOT ZONE; AND (V) ENGAGING IN ANY OTHER RELATED LAWFUL ACTIVITY IN FURTHERANCE OF ITEMS (I) THROUGH (IV). SEE ADDITIONAL INFORMATION ABOUT ICANN'S PROGRAMS AND ACTIVITIES ON THE ICANN WEBSITE AND IN THE ICANN ANNUAL REPORT POSTED ON WWW.ICANN.ORG.

FORM 990, PART I, LINE 3 AND PART VI, LINE 1A AND LINE 1B GOVERNING BODY

THERE ARE 16 VOTING MEMBERS OF THE BOARD OF DIRECTORS INCLUDING ICANN'S PRESIDENT AND CEO WHO SERVES EX OFFICIO AS A VOTING BOARD MEMBER. ICANN'S

BYLAWS ALLOW FOR FOUR (4) NON-VOTING LIAISONS WHO 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 30, 2018:

- 1) JONNE SOININEN (IETF LIAISON, 2013 OCT 2018)
- 2) KAVEH RANJBAR (RSSAC LIAISON, NOV 2016 PRESENT)
- 3) MANAL ISMAIL (GAC LIAISON, 2017-PRESENT)
- 4) RAM MOHAN (SSAC LIAISON, 2009 OCT 2018)
- 5) THOMAS SCHNEIDER (GAC LIAISON, 2015 NOV 2017)

FORM 990, PART I, LINE 6

VOLUNTEERS

ICANN ACCOMPLISHES ITS MISSION THROUGH IMPLEMENTATION OF POLICIES

APPROVED BY ITS BOARD OF DIRECTORS. THESE POLICIES START OUT AS

RECOMMENDATIONS FORMED AND REFINED BY THE GLOBAL ICANN COMMUNITY THROUGH

ITS SUPPORTING ORGANIZATIONS AND INFLUENCED BY ADVISORY COMMITTEES

("SO/ACS"). ICANN USES THE TERM "SUPPORTING ORGANIZATIONS" TO DESCRIBE

THE TEAMS WITHIN ICANN'S COMMUNITY THAT SUPPORT THE ORGANIZATION'S

MISSION THROUGH FORMAL GROUPS AND COMMITTEES ESTABLISHED WITHIN THEIR

AREAS OF EXPERTISE, WHICH DIFFERS FROM THE DEFINITION USED BY THE

INTERNAL REVENUE SERVICE.

ICANN CONSIDERS THAT THERE ARE 60 VOLUNTEER LEADERS THAT SERVE THE

SUPPORTING ORGANIZATIONS AND ADVISORY COMMITTEES IN LEADERSHIP POSITIONS SUCH AS CHAIR AND VICE CHAIR.

IN ADDITION TO THESE 60 VOLUNTEER LEADERS THAT ARE APPOINTED TO SPECIFIC ROLES AND REPORTED IN FORM 990, PART I, LINE 6, THERE ARE ALSO HUNDREDS OF VOLUNTEERS FROM ALL OVER THE WORLD THAT SERVE THE SUPPORTING ORGANIZATIONS AND ADVISORY COMMITTEES.

THESE VOLUNTEERS PARTICIPATE IN POLICY DEVELOPMENT WORKING GROUPS AND REVIEW TEAMS ON AN ANNUAL BASIS. VOLUNTEER POLICY DEVELOPMENT WORKING GROUPS FORM AROUND AN ISSUE AND CONSIDER IT FROM ALL ANGLES, MAKING DECISIONS BY CONSENSUS WHEREVER POSSIBLE. ICANN ALSO INCLUDES SEVERAL DIFFERENT BYLAW-MANDATED REVIEWS THAT ARE PERFORMED BY VOLUNTEERS. MANY OF THESE WORKING GROUPS AND REVIEW TEAMS ARE OPEN TO EVERYONE IN ICANN'S VOLUNTEER COMMUNITY, IN A BOTTOM-UP, OPEN AND TRANSPARENT PROCESS, THAT DOES NOT REQUIRE A MEMBERSHIP OR A SELECTION PROCESS FOR PARTICIPATION (OTHER THAN LIMITED BY THE SIZE OF THE WORKING GROUP OR REVIEW TEAM IF SPECIFIED). BECAUSE THE OPEN PROCESS FOR VOLUNTEERS TO PARTICIPATE, THE NUMBER OF VOLUNTEERS INVOLVED DURING THE PERIOD IS NOT TRACKED AND REPORTED HERE.

ICANN'S ANNUAL REPORT PROVIDES HIGHLIGHTS OF COMMUNITY INVOLVEMENT AND ACHIEVEMENT FOR THE FISCAL YEAR ENDED JUNE 30, 2018. SEE DISCUSSION IN

(HTTPS://WWW.ICANN.ORG/EN/SYSTEM/FILES/FILES/ANNUAL-REPORT-2018-EN.PDF)

FORM 990, PART I, LINE 7B

THE AMOUNT REPORTED ON LINE 7B AS NET UNRELATED BUSINESS TAXABLE INCOME RELATES TO A NEWLY ENACTED TAX EFFECTIVE JANUARY 1, 2018, THAT IS BASED ON COMPANY PAID EMPLOYEE PARKING WHICH IS CONSIDERED A TAXABLE QUALIFIED TRANSPORTATION FRINGE BENEFIT FOR EXEMPT ORGANIZATIONS.

FORM 990, PART I, LINES 8-22

FINANCIAL PRESENTATION

THE FINANCIAL STATEMENTS OF ICANN ARE PRESENTED ON A STAND-ALONE BASIS.

TRANSACTIONS WITH ITS AFFILIATE PUBLIC TECHNICAL IDENTIFIERS (PTI) ARE

REPORTED ON AN "ARMS-LENGTH" BASIS. PTI IS A SEPARATE LEGAL ENTITY AND

SEPARATELY FILES A FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME

TAX.

DURING THE FISCAL YEAR ENDED JUNE 30, 2018, ICANN RECORDED THE FOLLOWING TRANSACTIONS IN RELATION TO SERVICES DELEGATED TO PTI TO PERFORM THE INTERNET ASSIGNED NUMBERS AUTHORITY (IANA) FUNCTIONS:

- 1. FORM 990, PART VIII STATEMENT OF REVENUE, LINE 2E INCLUDES "PTI SERVICES AGREEMENT" REVENUE OF \$7,817,678, REPRESENTING AMOUNTS INVOICED AT COST FOR PERSONNEL AND OTHER RESOURCES PROVIDED TO PTI TO PERFORM THE IANA SERVICES FUNCTIONS.
- 2. FORM 990, PART IX STATEMENT OF FUNCTIONAL EXPENSES, LINE 24D INCLUDES "PTI IANA CONTRACT" EXPENSE OF \$7,817,678, FOR EXPENSES PAYABLE

Name of the organization INTERNET CORPORATION FOR ASSIGNED

NAMES AND NUMBERS

Employer identification number

95-4712218

TO PTI FOR IANA SERVICES PERFORMED IN ACCORDANCE WITH THE IANA NAMING FUNCTION CONTRACT.

CERTAIN PRIOR YEAR AMOUNTS IN PART I WERE RESTATED TO REFLECT THE CURRENT YEAR PRESENTATION OF REVENUE AND EXPENSES IN PARTS VIII AND IX.

FORM 990, PART III, LINE 4A
PROGRAM SERVICE ACCOMPLISHMENTS

AS OF JUNE 30, 2018, THE INTERNET ROOT ZONE CONSISTED OF 18 LEGACY AND 1,231 NEW GENERIC TOP LEVEL DOMAINS ("GTLDS"), AND OVER 300 COUNTRY CODE TOP LEVEL DOMAINS ("CCTLDS"). EACH GTLD HAS A DESIGNATED "REGISTRY OPERATOR" AND, IN MOST CASES (EXCEPT FOR A FEW LEGACY TOP LEVEL DOMAINS ("TLDS")), A REGISTRY AGREEMENT BETWEEN THE OPERATOR AND ICANN. THE REGISTRY OPERATOR IS RESPONSIBLE FOR THE TECHNICAL OPERATION OF THE GTLD, INCLUDING ALL OF THE NAMES REGISTERED IN THAT TLD. OVER 2,000 ICANN ACCREDITED REGISTRARS INTERACT WITH REGISTRANTS (AND OTHERS) TO PERFORM DOMAIN NAME REGISTRATION AND OTHER RELATED SERVICES FOR NEW GTLDS. THE NEW GTLD PROGRAM HAS PROVIDED A MEANS FOR PROSPECTIVE REGISTRY OPERATORS TO APPLY FOR NEW GTLDS, AND CREATE NEW OPTIONS FOR CONSUMERS. ICANN OPENED THE NEW GTLD PROGRAM FOR APPLICATIONS IN JANUARY 2012; 1930 APPLICATIONS WERE SUBMITTED.

AS OF JUNE 30, 2018, ALL APPLICATIONS FOR NEW GTLDS THAT HAVE NOT BEEN WITHDRAWN HAVE COMPLETED INITIAL EVALUATION ("IE") PHASE AND, WHERE APPLICABLE, EXTENDED EVALUATION ("EE"). DURING IE AND EE, ALL APPLICATIONS WERE EVALUATED FOR, AMONG OTHER THINGS, FINANCIAL,

Name of the organization INTERNET CORPORATION FOR ASSIGNED

NAMES AND NUMBERS

Employer identification number 95-4712218

TECHNICAL/OPERATIONAL, GEOGRAPHIC NAMES, AND REGISTRY SERVICES. FOLLOWING COMPLETION AND PASSING OF IE, AND EE IF APPLICABLE, FOR EACH APPLICATION NOT ON HOLD FOR SOME OTHER REASON, THE REGISTRY AGREEMENT CONTRACTING PHASE OF THE NEW GTLD PROGRAM COMMENCED. CONTRACTING IS A PROCESS THAT RESULTS IN EACH ELIGIBLE APPLICANT ENTERING INTO A REGISTRY AGREEMENT WITH ICANN TO OPERATE A GTLD. NOTE THAT THERE ARE SOME CIRCUMSTANCES THAT EXIST THAT MAY DELAY THE START OF THE CONTRACTING PROCESS INCLUDING, BUT NOT LIMITED TO, PENDING ICANN ACCOUNTABILITY MECHANISMS, UNRESOLVED CONTENTION, OR DIRECTION FROM THE ICANN BOARD.

AFTER COMPLETION OF THE CONTRACTING PHASE, THE APPLICANT IS ELIGIBLE TO ENTER INTO PRE-DELEGATION TESTING. PRE-DELEGATION TESTING ENSURES THAT AN APPLICANT HAS THE CAPACITY TO OPERATE A NEW GTLD IN A STABLE, SECURE MANNER. EVERY NEW REGISTRY MUST DEMONSTRATE THAT IT HAS ESTABLISHED OPERATIONS IN ACCORDANCE WITH THE TECHNICAL AND OPERATIONAL CRITERIA DESCRIBED IN THE APPLICANT GUIDEBOOK. AFTER PASSING PRE-DELEGATION TESTING, A REGISTRY'S GTLD CAN BE INTRODUCED INTO THE ROOT ZONE OF THE INTERNET.

AS OF JUNE 30, 2018, 1,249 GTLDS WERE DELEGATED IN THE ROOT ZONE.

ICANN IS A MULTISTAKEHOLDER ORGANIZATION THAT COORDINATES THE INTERNET'S

DOMAIN NAME SYSTEM AND NUMBERS ADDRESSING FOR THE BENEFIT OF INTERNET

USERS WORLDWIDE, WHICH HELPS ENABLE A SINGLE, INTEROPERABLE INTERNET.

ICANN IS RESPONSIBLE FOR THE GLOBAL TECHNICAL COORDINATION OF THE DNS. AS

OF JUNE 30, 2018, THERE WERE OVER 358 MILLION REGISTERED INTERNET SECOND LEVEL DOMAIN NAMES, INCLUDING APPROXIMATELY 204 MILLION SECOND LEVEL DOMAIN NAMES FOUND IN GENERIC TOP-LEVEL DOMAINS, MOST OF WHICH ARE GOVERNED BY ICANN'S COMMUNITY-DEVELOPED POLICIES. SEE ADDITIONAL INFORMATION ABOUT ICANN'S PROGRAMS AND ACTIVITIES ON THE ICANN WEBSITE AND IN THE ICANN ANNUAL REPORT POSTED AT WWW.ICANN.ORG.

NEW GTLD AUCTIONS

CONTENTION SETS ARE GROUPS OF APPLICATIONS FOR IDENTICAL OR CONFUSINGLY SIMILAR STRINGS. IF TWO OR MORE APPLICANTS ARE UNABLE TO RESOLVE THEIR CONTENTION THROUGH OTHER MEANS, THEY PROCEED TO AN ICANN AUCTION, WHICH IS THE METHOD OF LAST RESORT TO RESOLVE STRING CONTENTIONS AS PRESCRIBED IN MODULE 4 OF THE APPLICANT GUIDEBOOK. THERE WERE NO AUCTIONS CONDUCTED DURING THE FISCAL YEAR ENDED JUNE 30, 2018.

FOR MORE INFORMATION ON AUCTIONS VISIT

HTTP://NEWGTLDS.ICANN.ORG/EN/APPLICANTS/AUCTIONS

FORM 990, PART IV, LINE 28A-C

BUSINESS TRANSACTIONS WITH INTERESTED PARTIES

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 ACTUAL, POTENTIAL OR
PERCEIVED CONFLICTS OF INTEREST BEFORE ENTERING INTO DISCUSSION ON SUCH

Page 2

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/GROUPS/BOARD/DOCUMENTS/SOIS

ICANN DISCLOSES RELATED PARTY TRANSACTIONS IN FOOTNOTE TWELVE TO ITS AUDITED FINANCIAL STATEMENTS WHICH CAN BE FOUND AT THE FOLLOWING LINK.

SEE:

HTTPS://WWW.ICANN.ORG/EN/SYSTEM/FILES/FINANCIAL-REPORT-FYE-30JUN18-EN.PDF

FORM 990, PART V, LINE 4B

ICANN HAS BANK ACCOUNTS IN THE FOLLOWING FOREIGN COUNTRIES AS LISTED IN ATTACHMENT 1:

BELGIUM

TURKEY

SWITZERLAND

SINGAPORE

FORM 990, PART VI, LINE 7A

BODIES THAT APPOINT MEMBERS OF ICANN'S GOVERNING BODY

THE NOMINATING COMMITTEE ("NOMCOM") IS RESPONSIBLE FOR THE NOMINATION OF

EIGHT ICANN VOTING BOARD MEMBERS (SEE BYLAWS IN EFFECT AS OF JUNE 30,

2017, ARTICLE VII). THE NOMCOM IS ALSO CHARGED WITH POPULATING A PORTION

Schedule O (Form 990 or 990-EZ) 2017

JSA 7E1228 1.000

OF THE AT-LARGE ADVISORY COMMITTEE ("ALAC"), THE COUNTRY CODE NAMES
SUPPORTING ORGANIZATION ("CCNSO") COUNCIL AND THE GENERIC NAMES
SUPPORTING ORGANIZATION ("GNSO") COUNCIL. THE NOMCOM COMPLEMENTS THE
OTHER MEANS FOR FILLING A PORTION OF KEY ICANN LEADERSHIP POSITIONS
ACHIEVED WITHIN THE SUPPORTING ORGANIZATIONS AND ADVISORY COMMITTEES.

THE BYLAWS IN EFFECT AS OF JUNE 30, 2018, ALSO STATE THAT THE NOMCOM SHALL ADOPT SUCH OPERATING PROCEDURES AS IT DEEMS NECESSARY, WHICH SHALL BE PUBLISHED ON THE ICANN WEBSITE. THE NOMCOM IS DESIGNED TO FUNCTION INDEPENDENTLY FROM THE BOARD, THE SUPPORTING ORGANIZATIONS, AND ADVISORY COMMITTEES.

MEMBERS OF THE NOMCOM CONTRIBUTE BOTH THEIR UNDERSTANDING OF THE BROAD INTERESTS OF THE INTERNET AS A WHOLE AND THEIR KNOWLEDGE AND EXPERIENCE OF THE CONCERNS AND INTERESTS OF THE INTERNET STAKEHOLDERS THAT HAVE APPOINTED THEM. THE CHALLENGE FOR THE NOMCOM IS TO INTEGRATE THESE PERSPECTIVES AND DERIVE CONSENSUS IN ITS SELECTIONS. ALTHOUGH APPOINTED BY SUPPORTING ORGANIZATIONS AND OTHER ICANN BODIES, INDIVIDUAL NOMCOM MEMBERS ARE NOT ACCOUNTABLE TO THEIR APPOINTING CONSTITUENCIES BUT RATHER TO ICANN AS A WHOLE. NOMCOM MEMBERS ARE ACCOUNTABLE FOR ADHERENCE TO THE BYLAWS AND FOR COMPLIANCE WITH THE RULES AND PROCEDURES ESTABLISHED BY THE NOMCOM.

IN ADDITION, AND ALSO IN ACCORDANCE WITH ICANN'S BYLAWS, EACH OF THE FOLLOWING SUPPORTING ORGANIZATIONS NOMINATE TWO VOTING BOARD MEMBERS TO

NAMES AND NUMBERS

Employer identification number 95-4712218

THE ICANN BOARD, EACH FOR A THREE-YEAR TERM: THE ADDRESS SUPPORTING ORGANIZATION, THE CCNSO AND THE GNSO. FURTHER, THE AT-LARGE COMMUNITY ALSO NOMINATES ONE VOTING BOARD MEMBER TO THE ICANN BOARD EVERY THREE YEARS.

AFTER THE NOMCOM AND THE SUPPORTING ORGANIZATIONS IDENTIFY THEIR NOMINATIONS, THEY PROMPTLY NOTIFY THE EMPOWERED COMMUNITY, WHICH IS THE SOLE DESIGNATOR OF ICANN AND WHICH SHALL DESIGNATE, WITHIN THE MEANING OF SECTION 5220 OF THE CALIFORNIA CORPORATIONS CODE, ALL OF THE ABOVE IDENTIFIED VOTING BOARD MEMBERS AS DIRECTORS TO THE ICANN BOARD. IN ADDITION TO THE EC DESIGNATED BOARD MEMBERS, THE PRESIDENT AND CEO SITS AS AN EX OFFICIO VOTING BOARD MEMBER, WHO IS SELECTED BY THE ICANN BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 7B

IN ACCORDANCE WITH ICANN'S BYLAWS, ICANN CREATED AN UNINCORPORATED ASSOCIATION CALLED THE EMPOWERED COMMUNITY. THE EMPOWERED COMMUNITY HAS LIMITED AND ENUMERATED POWERS IN RELATION TO THE ICANN BOARD. FIRST, THE EMPOWERED COMMUNITY IS RESPONSIBLE FOR THE APPOINTMENT OF ALL VOTING MEMBERS OF THE ICANN BOARD OF DIRECTORS (OTHER THAN THE PRESIDENT AND CEO). THE EMPOWERED COMMUNITY IS MADE UP OF ENTITIES PARTICIPATING IN ICANN'S MULTISTAKEHOLDER COMMUNITY AND MAY REJECT THE ICANN BOARD'S APPROVAL OF SOME BYLAWS AMENDMENTS, BUDGETS, ANNUAL AND FIVE-YEAR OPERATING PLANS, AND FIVE-YEAR STRATEGIC PLANS. THIS REJECTION RIGHT MEANS THAT THE ICANN BOARD MUST GO BACK AND LOOK AT THESE ITEMS AGAIN. THE EMPOWERED COMMUNITY MAY NOT DIRECT THE VERSION OF THESE

DOCUMENTS THAT THE ICANN BOARD MUST APPROVE. THE EMPOWERED COMMUNITY MUST ALSO CONSENT TO THE ICANN BOARD'S APPROVAL OF THE AMENDEMENT OF CERTAIN PARTS OF THE ICANN BYLAWS (SUCH AS ICANN'S MISSION OR KEY ACCOUNTABILITY COMMITMENTS), AS WELL AS TO RESTATEMENTS OF THE ARTICLES OF INCORPORATION OR A SALE OF ASSETS.

FORM 990, PART VI, LINES 10A & 10B LOCAL CHAPTERS, BRANCHES AND AFFILIATES

DURING FISCAL YEAR 2018, ICANN HAD OFFICES OUTSIDE OF THE UNITED STATES IN BRUSSELS, BELGIUM; ISTANBUL, TURKEY; SINGAPORE, SINGAPORE AND MONTEVIDEO, URUGUAY; AND ENGAGEMENT CENTERS IN BEIJING, CHINA; GENEVA, SWITZERLAND; AND NAIROBI, KENYA; ALL OF WHICH PROVIDED OPERATIONAL OR ENGAGEMENT SUPPORT TO THEIR RESPECTIVE GEOGRAPHICAL REGIONS AND/OR TIME ZONES.

PUBLIC TECHNICAL IDENTIFIERS ("PTI") IS AN AFFILIATE OF ICANN. PTI WAS
ESTABLISHED IN AUGUST 2016 UNDER THE LAWS OF THE STATE OF CALIFORNIA AS A
NON-PROFIT PUBLIC BENEFIT CORPORATION AND ICANN IS THE SOLE MEMBER OF
PTI.

ICANN HAS WRITTEN POLICIES AND PROCEDURES GOVERNING THE ACTIVITIES OF SUCH OFFICES, REGIONAL CENTERS AND AFFILIATE TO ENSURE THEIR OPERATIONS ARE CONSISTENT WITH THE ICANN'S EXEMPT PURPOSES.

FORM 990, PART VI, LINE 11B FORM 990 REVIEW PROCESS Page 2

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 RECEIVED IS AS FOLLOWS:

- 1. ICANN ENGAGES AN OUTSIDE TAX PREPARER TO ASSIST IN THE PREPARATION OF ITS FORM 990.
- 2. ICANN'S CHIEF FINANCIAL OFFICER (CFO), AND OFFICE OF THE GENERAL COUNSEL REVIEW THE FORM 990, AND THE CFO SIGNS OFF FOR APPROVAL.
- 3. THE FORM 990 IS PROVIDED TO THE ICANN BOARD MEMBERS.

FORM 990, PART VI, LINE 12C

CONFLICTS OF INTEREST POLICY

ICANN HAS WRITTEN CONFLICTS OF INTEREST POLICIES, WHICH ARE APPLICABLE TO ALL BOARD MEMBERS, ORGANIZATION PERSONNEL, AND INDEPENDENT CONTRACTORS.

THE OFFICE OF THE GENERAL COUNSEL MONITORS THE POLICIES WITH OVERSIGHT BY THE BOARD GOVERNANCE COMMITTEE ("BGC") AS THEY RELATE TO THE BOARD. A CONFLICTS OF INTEREST DISCLOSURE STATEMENT IS COMPLETED ANNUALLY AND SIGNED BY EACH BOARD MEMBER, OFFICER, ORGANIZATION PERSONNEL, AND INDEPENDENT CONTRACTOR. THE ORGANIZATION PERSONNEL DISCLOSURE STATEMENTS ARE REVIEWED BY THE HEAD OF HUMAN RESOURCES AND DISCUSSED WITH GENERAL COUNSEL'S OFFICE IF ANY ISSUES ARISE. THE BOARD LEVEL DISCLOSURE STATEMENTS ARE REVIEWED BY THE OFFICE OF GENERAL COUNSEL AND THE BGC.

THE BOARD MEMBER, OFFICER AND KEY EMPLOYEE CONFLICTS OF INTEREST POLICY

CAN BE FOUND AT:

HTTP://WWW.ICANN.ORG/EN/GROUPS/BOARD/GOVERNANCE/COI.

THIS 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, THE PROCESS BY WHICH ALL COVERED PERSONS SIGN ANNUALLY THEIR AFFIRMATION OF THE POLICY AND DISCLOSE THEIR ACTUAL OR POTENTIAL CONFLICTS, AND THE REQUIREMENT AND NATURE OF PERIODIC REVIEWS.

A SUMMARY OF BOARD MEMBER AND OFFICER DISCLOSURE STATEMENTS POSTED ON THE WEBSITE AT: http://www.icann.org/en/groups/board/documents/sois.

FORM 990, PART VI, LINES 13 & 14

WHISTLEBLOWER POLICY AND DOCUMENT RETENTION AND DESTRUCTION POLICY

ICANN MAINTAINS AN INTERNAL DOCUMENT RETENTION AND DESTRUCTION POLICY AND

HISTORICALLY HAS FOLLOWED BEST INDUSTRY PRACTICES FOR RETENTION AND

DESTRUCTION. ICANN ALSO MAINTAINS AN INTERNAL WHISTLEBLOWER (OR

"ANONYMOUS HOTLINE") POLICY, THAT ALSO FOLLOWS INDUSTRY BEST PRACTICES.

FORM 990, PART VI, LINES 15A & 15B

PROCESS FOR DETERMINING COMPENSATION

ICANN FOLLOWS PRINCIPLES OF ACCOUNTABILITY AND TRANSPARENCY AND DESCRIBES

ITS REMUNERATION PLANS AND PRACTICES, WHICH ARE CONTINUALLY UPDATED. THE

VERSION OF ICANN'S REMUNERATION PRACTICES APPLICABLE DURING FY2017 AND

FY2018 ARE POSTED AT:

HTTPS://www.icann.org/en/system/files/files/remuneration-practices-fy17-01 Jan17-en.pdf

HTTPS://WWW.ICANN.ORG/EN/SYSTEM/FILES/FILES/REMUNERATION-PRACTICES-FY18-01 JUL17-EN.PDF

THE PROCESS FOR DETERMINING COMPENSATION, INCLUDING SURVEYS OF COMPARABLE POSITIONS AND OTHER MARKET STUDIES IS DESCRIBED IN THESE REMUNERATION PRACTICES REPORTS. OFFICER COMPENSATION IS DISCLOSED AS WELL. SALARIES OF ALL OFFICERS ARE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS FOLLOWING RECOMMENDATIONS BY THE BOARD COMPENSATION COMMITTEE, WHICH ARE INFORMED BY RECOMMENDATIONS AND COMPARABLE DATA PROVIDED BY INDEPENDENT COMPENSATION EXPERTS. CONFIDENTIAL MINUTES OF THESE MEETINGS ARE MAINTAINED BY THE BOARD SECRETARY AS PART OF THE CORPORATE SECRETARIAT FUNCTION. EACH YEAR THE APPOINTMENT FOR EACH OFFICER IS CONFIRMED BY THE BOARD OF DIRECTORS AT THE ANNUAL GENERAL MEETING. THE ANNUAL COMPENSATION MERIT REVIEW PROCESS FOR ORGANIZATION PERSONNEL FOR THE PERIOD OF JULY 1, 2017 THROUGH JUNE 30, 2018 WAS COMPLETED AS OF JULY 1, 2017.

FORM 990, PART VI, LINE 18

AVAILABILITY OF 990

ICANN POSTS ITS FORM 990 ON ITS WEBSITE. THE PRIOR YEAR POSTING IS LOCATED AT:

HTTPS://WWW.ICANN.ORG/EN/SYSTEM/FILES/FILES/ICANN-FY-2017-FORM-990-15MAY18

-EN.PDF

IN ADDITION, THE FORM 990 IS POSTED ON THE WWW.GUIDESTAR.ORG WEBSITE.

FINALLY, HARD COPIES OF THE FORM 990 ARE AVAILABLE UPON REQUEST. REQUESTS

SHOULD BE SUBMITTED TO ICANN'S CFO BY EMAIL TO XAVIER.CALVEZ@ICANN.ORG,

OR BY PHONE AT +1.310.301.5838.

ICANN POSTS THE IRS LETTER GRANTING TAX-EXEMPT STATUS, AND THE FAVORABLE DETERMINATION LETTER ON ITS WEBSITE AT:

HTTPS://ARCHIVE.ICANN.ORG/EN/FINANCIALS/TAX/US/IRS-LETTER-GRANT-28AUG00.HT
M AND

HTTPS://WWW.ICANN.ORG/EN/SYSTEM/FILES/FILES/IRS-FAVORABLE-DETERMINATION-LE
TTER-19SEP08-EN.PDF, RESPECTIVELY.

FORM 990, PART VI, LINE 19

AVAILABILITY OF GOVERNING DOCUMENTS, CONFLICTS OF INTEREST, AND FINANCIAL STATEMENTS.

IN ACCORDANCE WITH ITS CORPORATE BYLAWS (SEE

HTTPS://WWW.ICANN.ORG/RESOURCES/PAGES/GOVERNANCE/BYLAWS-EN) AND THE

AFFIRMATION OF COMMITMENTS ICANN HAD WITH THE UNITED STATES DEPARTMENT OF

COMMERCE THAT ENDED IN JANUARY 2017 (SEE

HTTPS://WWW.ICANN.ORG/RESOURCES/PAGES/GOVERNANCE/AOC-EN), 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

Page 2

STATEMENTS.

FORM 990, PART VII

OFFICER/DIRECTOR SERVICE DATES

IN PART VII, A DATE FOLLOWING AN OFFICER/DIRECTOR'S NAME INDICATES THE DATE ON WHICH THE OFFICER/DIRECTOR'S SERVICES ENDED. IF NO DATE IS INDICATED, THAT OFFICER/DIRECTOR WAS ACTIVE AS OF JUNE 30, 2018.

FORM 990, PART VII, SECTION A, LINES 1, 2, 4, 18, & 19, COLUMN D

COMPENSATION FOR MAARTEN BOTTERMAN, STEVE CROCKER, MATTHEW SHEARS, AND

MIKE SILBER, RESPECTIVELY, ARE NOT CONSIDERED REPORTABLE, AS THEIR

COMPENSATION IS PAID TO THEIR CORPORATIONS AS FOLLOWS: MR. BOTTERMAN
GNKS CONSULTING BV (\$45,000), MR. CROCKER - SHINKURO, INC. (\$62,500), MR.

SHEARS - COMMPOLI LTD. (\$7,500), AND MR. SILBER - SILBER CONSULTING

(\$45,000).

NO COMPENSATION IS REPORTED FOR MS. BECKY BURR AS SHE DID NOT ELECT TO RECEIVE COMPENSATION AS A MEMBER OF THE BOARD OF DIRECTORS.

FORM 990, PART VII, SECTION B

COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS

ICANN USUALLY DISCLOSES ALL CONTRACTORS WITH WHICH IT SPENT \$1,000,000 OR

MORE DURING THE PERIOD, IN ADDITION TO THE TOP FIVE CONTRACTORS. DURING

THE FISCAL YEAR ENDED JUNE 30, 2018, ICANN DID NOT PAY \$1,000,000 OR MORE

TO ANY CONTRACTORS THAT ARE NOT DISCLOSED IN PART VII, SECTION B OF THE

FORM 990. SEE ATTACHMENT 2.

FORM 990, PART VIII, LINE 2A

NEW GTLD PROGRAM REVENUE

NEW GTLD APPLICATION FEES ARE RECOGNIZED RATABLY AS DIRECT APPLICATION

PROCESSING COSTS ARE INCURRED. THE RATE OF RECOGNITION OF THE FEES IS

DETERMINED BY THE PROPORTION OF THE DIRECT COSTS INCURRED VERSUS THE

TOTAL ESTIMATED COSTS OF THE PROGRAM UNTIL COMPLETION. THE NEW GTLD FEES

ARE REFUNDABLE AT A DIMINISHING RATE ACCORDING TO THE PROCESSING PHASE IN

WHICH THE REQUEST FOR REFUND OCCURS.

IN ACCORDANCE WITH THE REVENUE RECOGNITION POLICY OF THE NEW GTLD PROGRAM, MANAGEMENT PERIODICALLY REVIEWS THE TOTAL ESTIMATED COSTS OF THE PROGRAM. DURING THE FISCAL YEAR ENDED JUNE 30, 2018, MANAGEMENT ESTIMATED THE NEW GTLD PROGRAM WOULD EXTEND UNTIL 2020. THIS UPDATED TIMELINE IS BASED ON ANTICIPATED ACTIVITIES REQUIRED TO REVIEW ALL OUTSTANDING APPLICATIONS. ACCORDINGLY, THE TOTAL ESTIMATED COSTS OF THE PROGRAM UNTIL COMPLETION HAS INCREASED BY \$13,096,000, WHICH RELATE PROSPECTIVELY AND IMPACTS THE RATE OF RECOGNITION OF THE APPLICATION FEES.

THIS CHANGE IN RATE OF RECOGNITION RESULTED IN A CUMULATIVE ADJUSTMENT TO THE NEW GTLD APPLICATION FEES RECOGNIZED IN REVENUE AS OF JUNE 30, 2018.

SUCH CUMULATIVE ADJUSTMENT IS REPORTED ON 990, PART VIII, LINE 2A AS A REDUCTION RESULTING IN (\$12,548,099) FOR NEW GTLD PROGRAM REVENUE.

FORM 990, PART IX, LINE 24A

RISK COSTS - GTLD

RISK COSTS ARE EXPENSES THAT RELATE TO ANY CONTINGENCIES OR UNANTICIPATED

COSTS THAT MAY BE INCURRED BY ICANN RELATED TO THE NEW GTLD PROGRAM.

APPROXIMATELY ONE THIRD OF TOTAL APPLICATION FEES CHARGED TO APPLICANTS

IN RELATION TO THE NEW GTLD PROGRAM WERE IN ANTICIPATION OF THESE COSTS.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS

FOREIGN EXCHANGE LOSS - \$132,817

ATTACHMENT 1

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

BELGIUM

TURKEY

SWITZERLAND

SINGAPORE

ATTACHMENT 2

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
JONES DAY 555 S. FLOWER STREET, 50TH FLOOR LOS ANGELES, CA 90071	LEGAL SERVICES	5,356,953.
ZENSAR TECHNOLOGIES, INC. 1415 W 22ND STREET, SUITE 925 OAK BROOK, IL 60523	IT CONSULTING SVCS	3,734,636.
STIFTELSEN FOR INTERNETINFRASTRUCKTUR.SE PO BOX 7399 STOCKHOLM SWEDEN 10391	NEW GTLD PROGRAM	1,323,855.
IRON MT INTELLECTUAL PROPERTY MGMT, INC. 2100 NORCROSS PARKWAY, SUITE 150 NORCROSS, GA 30071	IT CONSULTING SVCS	1,144,262.

ATTACHMENT 2 (CONT'D)

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

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

INFOVITY, INC 1731 EMBARCADERO RD SUITE 230 PALO ALTO, CA 94303 IT CONSULTING 1,003,851.

ATTACHMENT 3

FORM 990, PART IX - OTHER FEES

DESCRIPTION	(A) TOTAL FEES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING EXPENSES
CONSULTING SERVICES	6,318,003.	4,240,769.	2,077,234.	0.
TRANSLATION SERVICES	2,361,089.	1,584,810.	776,279.	0.
COMMUNICATIONS	1,976,280.	1,326,518.	649,762.	0.
TEMPORARY PERSONNEL	1,402,831.	941,608.	461,223.	0.
TRANSCRIPTION SERVICES	1,300,887.	873,181.	427,706.	0.
STUDIES & RESEARCH	1,164,955.	781,941.	383,014.	0.
NEW GTLD PRE-DELEGATION TEST	1,127,600.	756,868.	370,732.	0.
DATA ESCROW	773,940.	519,484.	254,456.	0.
STRATEGIC INITIATIVES	534,615.	358,844.	175,771.	0.
NEW GTLD TRADEMARK CLEARING	400,000.	268,488.	131,512.	0.
POLICY DEVELOPMENT	339,032.	227,565.	111,467.	0.
FINANCE & TECHNICAL EVALUATION	279,768.	187,786.	91,982.	0.
IDN PROGRAMS	167,830.	112,651.	55,179.	0.
RECRUITING SERVICES	167,087.	112,152.	54,935.	0.
TOTALS	18,313,917.	12,292,665.	6,021,252.	

SCHEDULE R (Form 990)

Department of the Treasury

NAMES AND NUMBERS

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization

OMB No. 1545-0047 Open to Public Inspection

INTERNET CORPORATION FOR ASSIGNED Employer identification number 95-4712218

(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling
		Primary activity Legal domicile (state	Primary activity Legal domicile (state Total income	Primary activity Legal domicile (state Total income End-of-year assets

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	conti	g) 512(b)(13) rolled ity?
						Yes	No
(1) PUBLIC TECHNOLOGICAL IDENTIFIERS 32-0512841							
12025 WATERFRONT DR, STE 300 LOS ANGELES, CA 90094	IANA FUNCTION	CA	501(C)(3)	10	ICANN	X	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2017

Dov4 III	Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34,
Part III	Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.
	Decause it had one of more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets		h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
		oounity)		,			Yes	No		Yes	No	
<u>(1)</u>												
(2)												
(3)												
(4)												
(5)												
(6)												
<u>(7)</u>	_											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13 controlled entity?
(1)								Yes No
(2)								
(3)								
(4) (5)								
(6)								
(7)								

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Schedule R (Form 990) 2017

Schedule K (I	(7011) 930) 2017	rage
Part V	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	

No	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	1a		X
b		1b		Х
С	Gift, grant, or capital contribution from related organization(s)	1c		Х
d	Loans or loan guarantees to or for related organization(s)	1d		X
		1e		X
·	25ano on loan guaranto do 3) folatoa organization(o)			
f	Dividends from related organization(s)	1f		Х
'	Entraction for Foliation (o),	1g		X
	9	1h		X
	Turchase of assets from related organization(s),	1i		X
	Exertaings of accord man relation (s), 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
J	Lease of facilities, equipment, or other assets to related organization(s)	1j		
				Х
	======================================	1k		
	- constitution of the first of	11		X
n		1m	Х	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
0	Sharing of paid employees with related organization(s)	10	X	
р	Reimbursement paid to related organization(s) for expenses	1p		X
		1q	X	
•				
r	Other transfer of cash or property to related organization(s)	1r		Х
S	Carlot database of basis of property to roaded organization(o) 111111111111111111111111111111111111	1s		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

2	If the answer to any of the above is "Yes," see the instructions for information on who must complete t	inis line, including cove	ered relationships and trans	action thresholds.
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	PUBLIC TECHNICAL IDENTIFIERS	М	7,817,678.	FMV
(2)	PUBLIC TECHNICAL IDENTIFIERS	N	1,342,007.	FMV
(3)	PUBLIC TECHNICAL IDENTIFIERS	0	4,867,598.	FMV
(4)	PUBLIC TECHNICAL IDENTIFIERS	Q	7,817,678.	FMV
(5)				
(6)				

JSA 7E1309 2.000 Schedule R (Form 990) 2017

Schedule R (Form 990) 2017

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(state or foreign incom country) unrelate from		(d) Predominant income (related, unrelated, excluded from tax under	income (related, section nrelated, excluded 501(c)(3)		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

JSA Schedule R (Form 990) 2017

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Schedule R (Form 990) 2017 Page 5

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.