Fon	990-1	E	exempt Organization Bus			ax Return		OMB No. 1545-0687			
Dep:	artment of the Treasury nal Revenue Service	For	(and proxy tax und ralendar year 2005 or other tax year beginning	ler se	ection 6033(e))			2005			
A [Check box if address changed		(Emp	oyer identification number loyees' trust, see instructions							
D 1	Exempt under section	Print	MOZILLA FOUNDATION					ock D on page 7.) 0-0097189			
	501(C)(3)	or	Number, street, and room or suite no. (If a P.O. b.	E New	unrelated bus, activity codes						
	408(e) 220(e)	Туре	1981 LANDINGS DRIVE, E		(See i	nstructions for Block E					
	408A 530(a)	i	City or town, state, and ZIP code								
	529(a)		MOUNTAIN VIEW, CA 940		***************************************		518	112			
	Book value of all assets F Group exemption number (see instructions for Block F) A01(a) trust A01(a) trus										
	,919,984.	G Check	corganization type X 501(c) corporation	n L	501(c) trust	401(a) trust	L	Other trust			
	· · · · · · · · · · · · · · · · · · ·	n's orim	ary unrelated business activity. AFFILIA	TO	N FEES - PR	ODUCT SAL	ES				
			oration a subsidiary in an affiliated group or a pare				Ye	s X No			
			ifying number of the parent corporation.		,						
	<u>ie books are in care o</u>				Teleph	one number 🕨 6	50-	903-8000			
			le or Business Income		(A) Income	(B) Expenses		(C) Net			
	Gross receipts or sal										
	Less returns and allo		c Balance▶	1 c							
2			A, line 7)	2							
3			om line 1c h Schedule D)	3 4a							
			art II, line 17) (attach Form 4797)	4a 4b							
			ts	4c							
5			ps and S corporations (attach statement)	5							
6	Rent income (Schedu			6							
7	Unrelated debt-finance		ne (Schedule E)	7		******					
8			nd rents from controlled organizations (Sch. F)	8							
9	Investment income o	f a sectio	n 501(c)(7), (9), or (17) organization								
				9							
10			ne (Schedule I)	10							
11	Advertising income (Schedule	J)	11	416 000			416 000			
12 13	•		s - attach schedule.) STATEMENT 1	12 13	416,089. 416,089.			416,089.			
T			t Taken Elsewhere (See instructions fo					410,009.			
<u> </u>			tions, deductions must be directly connected			income.)					
14	Compensation of off	icers, dir	ectors, and trustees (Schedule K)				14				
15	Salaries and wages						15				
16							16				
17							17				
18							18	26 604			
19 20	Taxes and licenses Charitable contribution	one /Saa	instructions for limitation rules.)	• • • • • • • • • • • • • • • • • • • •			19	36,694.			
21			52)				20				
22			Schedule A and elsewhere on return			*	22b				
23							23				
24			pensation plans				24				
25			•••••				25				
26	Excess exempt exper	nses (Sch	redule I)				26	***************************************			
27			edule J)				27				
28			dule)				28	06.601			
29			s 14 through 28				29	36,694.			
30			come before net operating loss deduction. Subtract			· · · · · · · · · · · · · · · · · · ·	30	379,395.			
31 32			limited to the amount on line 30)				31	379,395.			
32 33			ome before specific deduction. Subtract line 31 fro \$1,000, but see instructions for exceptions)				32	1,000.			
34			pr,000, but see instructions for exceptions) le income. Subtract line 33 from line 32. If line 3				JJ	1,000.			
	of zero or line 32		The mediae. Obbliact line 33 from line 32. A line 3	•	•	i	34	378,395.			
523701 01-31-0	o6 LHA For Priva		nd Paperwork Reduction Act Notice, see instructi					Form 990-T (2005)			

Parti	lax Computation				
35	Organizations Taxable as Corporations. See instructions for tax computation.				
	Controlled group members (sections 1561 and 1563) - check here . See instructions and:				
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):				
	(1) \$ (2) \$ (3) \$				
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)				
	(2) Additional 3% tax (not more than \$100,000)				
c	Income tax on the amount on line 34		35c	128,6	554.
	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on lin				
00	Tax rate schedule or Schedule D (Form 1041)		36		
97			37		
37	Proxy tax. See instructions		38		
38	Alternative minimum tax			128,6	51
39	Total. Add lines 37 and 38 to line 35c or 36, whichever applies		39	120,0	74.
	Tax and Payments	<u>. T</u>			
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40				
	Other credits (See instructions)	<u>b</u>			
C	General business credit - Check here and indicate which forms are attached:				
	Form 3800				
	Credit for prior year minimum tax (attach Form 8801 or 8827) 40				
е	Total credits. Add lines 40a through 40d		40e		
41	Subtract line 40e from line 39	<u></u>	41	128,6	54.
42	Subtract line 40e from line 39 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866	Other (attach schedule)	42		
43	Total tax. Add lines 41 and 42		43	128,6	54.
44a	Payments: A 2004 overpayment credited to 2005 44	a			
	2005 estimated tax payments 44	b			
	Tax deposited with Form 8868 44	1 1 - 1 - 1			
	Foreign organizations - Tax paid or withheld at source (see instructions) 440				
	Backup withholding (see instructions)				
	Other credits and payments: Form 2439	<u> </u>			
•	Form 4136	f			
45			45	147,1	60
45 46	Total payments. Add lines 44a through 44f		46	1,0	
	Estimated tax penalty (See instructions). Check X if Form 2220 is attached			1,0	55.
	Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed		47	17 /	E 2
	Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid		48	17,4	
_	Enter the amount of line 48 you want: Credited to 2006 estimated tax	Refunded >	49	17,4	55.
Part V					
	ly time during the 2005 calendar year, did the organization have an interest in or a signature or other a			Yes	
	eign country (such as a bank account, securities account, or other financial account)? If "Yes," the org	janization may have to file l	Form		X
TDF	90-22.1. If "Yes," enter the name of the foreign country here				
2 Durii	ng the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to	o, a foreign trust?			X
	es," see page 5 of the instructions for other forms the organization may have to file.				
3 Ente	the amount of tax-exempt interest received or accrued during the tax year ► \$				
Sched	ule A - Cost of Goods Sold. Enter method of inventory valuation ► N/A				
1 Inver	ntory at beginning of year 1 6 Inventory at end of year		6		
2 Purc	hases 2 7 Cost of goods sold. Subtract	line 6			
3 Cost	of labor from line 5. Enter here and in	Part I, line 2	7		
	tional section 263A costs 4a 8 Do the rules of section 263A		<u> </u>	Yes	No
	r costs (attach schedule) 4b property produced or acquir				
	I. Add lines 1 through 4b 5 the organization?				X
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statement			f, it is true,	
Sign	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has	any knowledge.			_
Here	111-11-06 1 050		ay the IRS discu- e preparer show		with
	Signature of officer Date Title		structions)?	Yes	No
	Date		parer's SSN c		ו אט
		heck if	hairi 2 9911 (1 1 1111	
Paid	Preparet S 1// 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1	IIOOK II			
Paid Preparer's	signature Than Johach 11/0/06 se	elf-employed	10657	72	
	signature summer or DELOITTE TAX LLP	elf-employed EIN 86	-10657		
Preparer's	signature than other II 10/06 se	elf-employed EIN 86	415-78		

1 Description of property											
(1)				*,					,		
(2)											
(3)											
(4)									,		
		2 Rent received	,						3 Deductions di	rectly o	onnected with the income in
(a) From personal proper rent for personal proper 10% but not mon	erty is more tha	ntage of an	` 'of rer	nt for per	d personal prope sonal property e s based on profi	xceeds 50%	6 or if		columns 2	(a) and	2(b) (attach schedule)
(1)	0 (11011 0070)			the fell l	5 based on pron	it of income,	, 				
(0)											
(3)											
(4)											
Total		0.	Total				().			
Total income. Add totals of coll here and on page 1, Part I, line							(o .	Total deductions. Enter here and on page Part I, line 6, column (B	e 1,	- (
Schedule E - Unrelate				(See in	structions o	n page 1		•	r artif mic of columnity	·/ P	
				\					3 Deductions directly	conne	cted with or allocable
				1		come from le to debt-		(2)	to debt-f		· · · · · · · · · · · · · · · · · · ·
1 Description	n of debt-financ	ced property				property		(a):	Straight-line depreciatio (attach schedule)	n	(b) Other deductions (attach schedule)
(1)											· · · · · · · · · · · · · · · · · · ·
(2)											
(3)									· · · · · · · · · · · · · · · · · · ·		·
(4)											
debt on or allocable to debt-financed of or all property (attach schedule) debt-financed debt-financed			adjusted basis locable to column 4 divided by column 5 ceed property schedule)			7 Gross income reportable (column 2 x column 6)			8 Allocable deductions (column 6 x total of column 3(a) and 3(b))		
(1)					***		%				
(2)	1						%				
(3)							%				
(4)							%				
									re and on page 1, se 7, column (A).		Enter here and on page 1, Part I, line 7, column (B).
Totals							> _			0.	0
Total dividends-received dedu	ictions includ	ded in column	8 8							▶	0
Schedule F - Interest,	Annuitie	es, Royalt	ies, and	Rent	s From C	ontroll	ed Or	gar	nizations (See	instru	ctions on page 18.)
			Ex	xempt (Controlled C	rganizati	ons				
1 Name of Controlled Organia	zation	Employer ider Numb			3 lated income instructions)		4 of specifi ments mad		5 Part of column (a included in the cororganization's gross	ntrolling	connected with income
(1)											
(2)											
(3)											
(4)		<u> </u>									
Ionexempt Controlled Organ	nizations	· ·									
7 Taxable Income		unrelated income see instructions)	(loss)	9 Total	of specified pay made	ments		contr	umn (9) that is included olling organization's oss income	11	Deductions directly connected with income in column (10)
(1)											
(2)										ļ	
(3)	1										
4)	<u></u>	·									
						1	Add colu Enter her line 8, co	e and	on page 1, Part I,	Enter	columns 6 and 11. here and on page 1, Part I, , column (B).
otalo									0.		_
otals					***************************************	····			<u> </u>	<u> </u>	0 Form 990-T (200

1 0000	ription of income		2 Amount of income	3 Deductions directly connected	4 Set-asides	5 Total deductions and set-asides
Desc	inplion of Income		2 Amount of moome	(attach schedule)	(attach schedule)	(col. 3 plus col. 4)
(1)						
(2)						
(3)						
(4)						
			Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1 Part I, line 9, column (B).
Totals		>	0.			0.
Schedule I - Exploited (See instru	Exempt Activity uctions on page 19.)	Income, Othe	er Than Advertisi	ing Income		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3. If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.
Totals -	0.0	0.				0.
Schedule J - Advertision			nsolidated Basis			
Part I Income From I	Periodicais Nep	orted off a con	isolidated Dasis	<u> </u>	T	7 Excess
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	b (o).			0.
Part II Income From I	Periodicals Repo	orted on a Sep	arate Basis (For e	each periodical liste	d in Part II, fill in	Activities to the second secon
	7 on a line-by-line ba	SIS.)			T	
(1)						
(2)						
(3)						
(4)		<u>. </u>				0
(5) Totals from Part I		0.				0 .
	Enter here and or page 1, Part I, line 11, col. (A).	n Enter here and on page 1, Part I line 11, col. (B).				on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	▶ (0.	١.			0.
Schedule K - Compens	sation of Officer	s, Directors, a	nd Trustees (See	instructions on pag	ge 20.)	
1 Na	ame		2 Title	3 Perce time devo busine	ted to to un	ensation attributable related business
					%	
					%	
					%	
					%	
Total - Enter here and on page 1, F	Part II line 14				7.0	0.
TOME TO BE RESERVED AND AND DAUG 1. F	WILL II. BUILT IT					

Form 990-T (2005)

Form **2220**

Department of the Treasury Internal Revenue Service

Underpayment of Estimated Tax by Corporations See separate instructions. Attach to the corporation's tax return. FORM 990-T

OMB No. 1545-0142 2005

Name

MOZILLA FOUNDATION

Employer identification number 20-0097189

Note: Generally, the corporation is not required to file Form 2220. (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 34 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

	Part I Required Annual Payment							
1	Total tax (see instructions)						1	128,654.
•	Total tax (300 mat dottons)							
2	a Personal holding company tax (Schedule PH (Form 1120), lii	ne 26	6) included on line 1		2a			
	b Look-back interest included on line 1 under section 460(b)(2		- T					
	contracts or of section 167(g) for depreciation under the inco	me 1	forecast method		2b			
	c Credit for Federal tax paid on fuels (see instructions)							
	d Total. Add lines 2a through 2c						2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do	not	complete or file this form.	The corpo	oration			
	does not owe the penalty						3	128,654.
4	Enter the tax shown on the corporation's 2004 income tax re-	turn	(see instructions). Caution	n: If the ta	x is zero		1	
	or the tax year was for less than 12 months, skip this line a	nd e	nter the amount from line	3 on line	5		4	20,302.
5	Required Annual Payment. Enter the smaller of line 3 or line						_	20 202
	enter the amount from line 3 Part II Reasons for Filing - Check the boxes bel			abaalsad :			5	20,302.
Ш	Part II Reasons for Filing - Check the boxes bel even if it does not owe a penalty (see instructions).		iat apply. If any boxes are	спескец,	uie corporatioi	i iiiusi nie foi iii 22	20	
6	The corporation is using the adjusted seasonal install		t method					
7	The corporation is using the annualized income instal							
8	The corporation is a "large corporation" figuring its fir			n the prio	r vear's tax.			
Ŏ	Part III Figuring the Underpayment				, <u>, , , , , , , , , , , , , , , , , , </u>			
i			(a)		(b)	(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	04/15/05	067	15/05	09/15/	0.5	12/15/05
10	Required installments. If the box on line 6 and/or line 7	۲	01/13/03		23703	03/23/	-	
	above is checked, enter the amounts from Schedule A, line							
	38. If the box on line 8 (but not 6 or 7) is checked, see							
	instructions for the amounts to enter. If none of these boxes							
	are checked, enter 25% of line 5 above in each column	10	5,076.		5,075.	5,0	76.	5,075.
11	Estimated tax paid or credited for each period (see				•			
	instructions). For column (a) only, enter the amount						1	
	from line 11 on line 15	11						
	Complete lines 12 through 18 of one column before							
	going to the next column.							
12	Enter amount, if any, from line 18 of the preceding column	12						
	Add lines 11 and 12	13						
14	Add amounts on lines 16 and 17 of the preceding column	14			5,076.	10,1	51.	15,227.
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.		0.		0.	0.
16	If the amount on line 15 is zero, subtract line 13 from line							
	14. Otherwise, enter -0-	16			5,076.	10,1	51.	
17	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next							
	column. Otherwise, go to line 18	17	5,076.		5,075.	5,0	76.	5,075.
18	Overpayment. If line 10 is less than line 15, subtract line 10							49.9
	from line 15. Then go to line 12 of the next column	18						
	Go to Part IV on page 2 to figure the penalt	y. Do	not go to Part IV if there	are no en	tries on line 1	7 - no penalty is o	wed.	

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2005)

JWA

Form 2220 (2005)

Part IV Figuring the Penalty

		(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). (Form 990-PF and Form 990-T filers: Use 5th month instead of 3rd month.)	1				
20 Number of days from due date of installment on line 9 to the date shown on line 19	20				
21 Number of days on line 20 after 4/15/2005 and before 10/1/2005	21				
22 Underpayment on line 17 x Number of days on line 21 x 6%	22	\$	\$	\$	\$
23 Number of days on line 20 after 9/30/2005 and before 4/1/2006	23				
24 Underpayment on line 17 x Number of days on line 23 x 7%	24	\$	\$	\$	\$
25 Number of days on line 20 after 3/31/2006 and before 7/1/2006	25				
26 Underpayment on line 17 x Number of days on line 25 X *%	26	\$	\$	\$	\$
27 Number of days on line 20 after 6/30/2006 and before 10/1/2006	27	SE	E ATTACHED	WORKSHEET	
28 Underpayment on line 17 x Number of days on line 27 x *%	28	\$	\$	\$	\$
29 Number of days on line 20 after 9/30/2006 and before 1/1/2007	29				
30 Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
31 Number of days on line 20 after 12/31/2006 and before 2/16/2007	31				
32 Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
33 Add lines 22, 24, 26, 28, 30, and 32	33	\$	\$	\$	\$
34 Penalty. Add columns (a) through (d), of line 33. Enter the t Form 1120-A, line 29; or the comparable line for other incom					34 \$ 1,053.

^{*} For underpayments paid after March 31, 2006: For lines 26, 28, 30, and 32, use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

JWA Form **2220** (2005)

FORM 990-T UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying N	umber
MOZILLA FO	UNDATION			20-00	97189
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
04/15/05	5,076.	5,076.	61	.000164384	5
06/15/05	5,075.	10,151.	92	.000164384	15
09/15/05	5,076.	15,227.	15	.000164384	3
09/30/05	0.	15,227.	76	.000191781	22
12/15/05	5,075.	20,302.	151	.000191781	588
	ann dan da lé air				
				187.	
					P-1-10-10-10-10-10-10-10-10-10-10-10-10-1
alty Due (Sum of Colur	mn F).				1,053

^{*} Date of estimated tax payment, withholding credit date or installment due date.

512511 05-01-05

FORM 990-T	OTHER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
		416,089.
TOTAL TO FORM 990-T, PA	AGE 1, LINE 12	416,089.