Form **990**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax**

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

► 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. OMB No. 1545-0047

Open to Public Inspection

Α	For the 2	2019 calendar year, or tax year beginning , 2019, and ending			,		
В	Check if ap	plicable: C) Employe	r identifi	cation number	
	Addres	ss change SOFTWARE IN THE PUBLIC INTEREST		11-3	3902	08	
	Name	change DBA: SPI	E	Telephor			
	Initial	1732 1ST AVENUE #20327		929-	341-	N248	
		NEW YORK, NY 10128-5177	_	723	J-11	0240	
		led return		Gross re	ceints \$	970	474.
	-		(a) Is this a				X No
	ДАррііс	MICHAEL SCHULTHEISS	• •				No
_	Tay over	C/O SOFTWARE IN THE PUBLIC INT NEW YORK, NY 10128	l (b) Are all su If "No," a	ttach a list.	(see instr	ructions)	Ш
<u>'</u>	Websi						
		Ministra Thorong	(c) Group ex			al domicile: NY	
K			n: 1997	IVI St	ate of leg	al domicile: NY	
Pa		Summary efly describe the organization's mission or most significant activities:SOFTWARE I	ו ייוויי וא	DIIDI TC	י דאות	гргст	
		SPI") IS A NOT FOR PROFIT ORGANIZATION WHICH WAS FOUN					īC
8	7	EVELOP AND DISTRIBUTE OPEN HARDWARE AND SOFTWARE.	ור השתו	LETE	URG	ANTZATTON	12
nan	<u> </u>	VELOF AND DISTRIBUTE OFEN HARDWARE AND SOFTWARE.					
Governance	2 Ch	eck this box ► if the organization discontinued its operations or disposed of more	a than 259	% of its r			
ලි	3 Nu	mber of voting members of the governing body (Part VI, line 1a)			3	J. 13.	9
		mber of independent voting members of the governing body (Part VI, line 1b)			4		9
ië.		tal number of individuals employed in calendar year 2019 (Part V, line 2a)			5		0
Activities &		tal number of volunteers (estimate if necessary)			6		1,500
Ϋ́		tal unrelated business revenue from Part VIII, column (C), line 12			7a		0.
	b Ne	t unrelated business taxable income from Form 990-T, line 39			7b		0.
				or Year		Current Ye	
Ð		ntributions and grants (Part VIII, line 1h).		435,1			<u>,577.</u>
Revenue		ogram service revenue (Part VIII, line 2g)		28,2			<u>,140.</u>
ě		restment income (Part VIII, column (A), lines 3, 4, and 7d)		3	83.	2	<u>,757.</u>
—		ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		460 8	1.0	0.70	45.4
		tal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		463,7	19.	970	,474.
		ants and similar amounts paid (Part IX, column (A), lines 1-3)					
		nefits paid to or for members (Part IX, column (A), line 4)					
S	15 Sa	laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)					
Expenses	16a Pr	ofessional fundraising fees (Part IX, column (A), line 11e)					
x be	b To	tal fundraising expenses (Part IX, column (D), line 25) ▶					
Ú	17 Ot	ner expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		385,0	55.	661	,118.
	18 To	tal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		385,0			,118.
		venue less expenses. Subtract line 18 from line 12		078,6			,356.
- 5 6 6 6			Beginning			End of Ye	
ets and	20 To	tal assets (Part X, line 16)		161,9		2,471	,262.
Assets o	21 To	tal liabilities (Part X, line 26)		•	0.	,	0.
Net, Fund		t assets or fund balances. Subtract line 21 from line 20	2	161,9	06.	2,471	. 262.
_	rt II	Signature Block		/ -		_, _, _,	
		of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the ation of preparer (other than officer) is based on all information of which preparer has any knowledge.	e best of mv	knowledge a	and belief	, it is true, correct	, and
com	plėte. Decla	ration of preparer (other than officer) is based on all information of which preparer has any knowledge.	,	3			
Sig	n	Signature of officer	Date				
He	re						
		Type or print name and title					
		Print/Type preparer's name Preparer's signature Date	С	heck	if P	TIN	
Pa	id	GARY S. EISENKRAFT, CPA GARY S. EISENKRAFT, CPA	S	elf-employe	-	00055181	
	eparer	Firm's name GARY S. EISENKRAFT, CPA					
Us	e Only	Firm's address 271 MADISON AVENUE SUITE 602	F	irm's EIN ▶	20-4	769566	
		NEW YORK, NY 10016	-	hone no.		689-2655	
Ma	y the IRS	discuss this return with the preparer shown above? (see instructions)				X Yes	No

Par	t III	Statement of Program Service			X
1	Briafly	describe the organization's mission:	onse or note to any line in this Part III		Δ
	-	SCHEDULE O			
	<u> </u>				
2			program services during the year which we		
					Yes X No
•		s," describe these new services on Scheo		ueta envenagram carviaca?	□ Vaa V Na
3		e organization cease conducting, or n s," describe these changes on Schedule	nake significant changes in how it cond	ucts, any program services?	Yes X No
4	Descr Section	ibe the organization's program service	e accomplishments for each of its three	largest program services, as mea grants and allocations to others,	sured by expenses. the total expenses,
4 a	(Code		587, 461. including grants of \$)
			<u>S CONFERENCES FOR PEOPLE</u> RENCES ARE PAID FOR BY U		
			NNING, SUPPORT, AND TECH		
	2) [THE ORGANIZATION PROVIDE	S FOR DEVELOPMENT OF OPE	N SOURCE HARDWARE AND	SOFTWARE.
	3) [THE ORGANIZATION MAKES O	RANTS TO 501 (C) (3) ORGAN	IZATIONS WITH SIMILAR	MISSIONS.
4 b	(Code	:) (Expenses \$	including grants of \$) (Revenue \$_)
		. – – – – – – – – – – – –			
4 c	(Code	:) (Expenses \$	including grants of \$) (Revenue \$)
	(0000	, (2,4poi.1000 4	siaag grante e.		
4 d	Other	program services (Describe on Sched	dule O.)		
	(Expe		cluding grants of \$) (Revenue \$)
4 e	Total	program service expenses 🕨	587,461.		

Form 990 (2019) SOFTWARE IN THE PUBLIC INTEREST Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i> .	11 a		Х
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
c	: Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
c	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Χ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X.</i>	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Χ	
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	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 domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х

Form 990 (2019) SOFTWARE IN THE PUBLIC INTEREST Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		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 employees? <i>If 'Yes,' complete Schedule J</i> .	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	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? <i>If 'Yes,' complete Schedule L, Part I</i>	25b		Х
26	former officer, director, trusteé, key employee, créator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	instructions, for applicable filing thresholds, conditions, and exceptions):			
	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		X
	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		X
	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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? <i>If 'Yes,' complete Schedule R, Part I</i>	33		Х
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		Х
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	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		Х
38	Note: All Form 990 filers are required to complete Schedule O.	38	Χ	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
RΛ			aan (2010

Form 990 (2019) SOFTWARE IN THE PUBLIC INTEREST

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 8	a 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			
ı	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ı	tf 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
4 8	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
ı	olf 'Yes,' enter the name of the foreign country►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			,,
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 8	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
ć	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
ı	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ı	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	_		
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12			
	o Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
10.	against amounts due or received from them.)	12a		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	ıza		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
ı	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
14 a	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
ı	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If 'Yes,' see instructions and file Form 4720, Schedule N.			37
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		X

MICHAEL SCHULTHEISS 1732 1ST AVENUE,

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

NEW YORK NY 10128 929-341-0248

#20327

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

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

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

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

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

orieck this box in fickling the organization for any relative	3		(C)					,	,	
(A) Name and title		Position (do not check more than one box, unless person e is both an officer and a director/trustee)						Reportable compensation from	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	the organization and related organizations
(1) CHRIS LAMB	5									
DIRECTOR	0	Χ						0.	0.	0.
(2) TIMOTHY POTTER	5									
SECRETARY	0	Χ		Χ				0.	0.	0.
(3) ANDREW TRIDGELL	_ 1							_		_
DIRECTOR	0	Χ						0.	0.	0.
(4) MARTIN ZOBEL-HELAS	5									_
TREASURER	0	Χ						0.	0.	0.
(5) HECTOR ORON MARTINEZ	5									_
DIRECTOR	0	Χ						0.	0.	0.
	5									•
DIRECTOR	0	Χ		X				0.	0.	0.
(7) MICHAEL SCHULTHEISS	5									•
PRESIDENT	0	Χ		X				0.	0.	0.
(8) STEPHEN FROST	1	.,						•	•	•
VICE PRESIDENT	0	Χ		X				0.	0.	0.
(9) FORREST FLEMING	1	.,						•	•	•
DIRECTOR	0	Χ						0.	0.	0.
(10)										
<u>(11)</u>										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Tru	1	Key	Em	_	_	es,	and	d Highest Com	pensated Empl	oyees	(conti	nued)
	(B)			((•							
(A) Name and title			irs box, unless person is both an					(D) Reportable compensation from	(E) Reportable compensation from	Estima	(F) ated amo	ount
	week (list any hours	or c	Inst	유	Κej	em _f	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compe	of other nsation r rganizati	from
	for related	Individual trustee or director	Institutional trustee	Officer	Key employee	nest o	mer			an	d related anization	d
	organiza - tions below	or trus	भी शि		loye	omp						
	dotted line)	stee	ustee		()	Highest compensated employee						
						8						
(15)												
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1 b Subtotal	<u> </u>						•	0	0.			
c Total from continuation sheets to Part VII, Secti							•	0.	0.			0.
d Total (add lines 1b and 1c)							>	0.	0.			0.
2 Total number of individuals (including but not limited from the organization ► 0	to those I	isted	abov	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	n	
											Yes	No
3 Did the organization list any former officer, direct on line 1a? <i>If 'Yes,' complete Schedule J for suc</i>	tor, truste	e, ke	ey er	mple	oyee	e, or	high	nest compensated	employee	3		Х
For any individual listed on line 1a, is the sum of the organization and related organizations greated.										. 5		Λ
the organization and related organizations greate such individual	er than \$1	50,00)0 ['] ?	<i>lf '</i> }	/es,	com	1ple 	te Schedule J for		. 4		Х
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper s,' comple	isatio ete Sc	n fro	om Iule	any <i>J fo</i>	unre r suc	late ch p	ed organization or erson	individual	. 5		X
Section B. Independent Contractors 1 Complete this table for your five highest compen	catad ind	onon	dont		ntra	otoro	tha	t received more th	222 \$100 000 of			
compensation from the organization. Report compen	sation for	the ca	alen	dar	year	endi	ng v	vith or within the or	ganization's tax year			
(A) Name and business add	ress							(B) Description of	of services	Compe	C) nsatio	n
2 Total number of independent contractors (including the \$100,000 of compensation from the organization		ited to	o tha	se I	isted	d abo	ve)	who received more	than			

Form 990 (2019) SOFTWARE IN THE PUBLIC INTEREST Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to an	y line in this Part V	III		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns				
ਤੋਂ ਨੂ	h	Total. Add lines 1a-1f ▶	920,577.			
ne		Business Code				
E-	2 a	CONFERENCE REGISTRATION 900099	28,410.	28,410.		
Program Service Revenue	b		18,730.	18,730.		
ဒို	С					
ě.	d					
Ë	е					
ga	f	All other program service revenue				
품	g	Total. Add lines 2a-2f	47,140.			
	3	Investment income (including dividends, interest, and other similar amounts)	2,757.			2,757.
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross rents 6a				
		Less: rental expenses 6b				
		Rental income or (loss) 6c				
		Net rental income or (loss)				
		(i) Securities (ii) Other				
	7 a	Gross amount from sales of assets				
		other than inventory 7a				
	b	Less: cost or other basis				
	_	and sales expenses 7b				
		Gain or (loss) 7c				
	a	Net gain or (loss)				
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18				
7	h	Less: direct expenses 8b				
훞		Net income or (loss) from fundraising events				
O.		Gross income from gaming activities. See Part IV, line 19				
	b	Less: direct expenses 9b				
		Net income or (loss) from gaming activities ▶				
		Gross sales of inventory, less returns and allowances				
		Less: cost of goods sold				
	С	Net income or (loss) from sales of inventory				
S.		Business Code				
<u>හි</u> බ	11a b c d					
뛰	b					
夏	С					
Miscellaneous Revenue						
Σ	е	Total. Add lines 11a-11d ▶				
	12	Total revenue. See instructions ▶	970,474.	47,140.	0.	2,757.

Part IX Statement of Functional Expenses

Do i 6b, i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV. line 21.		САРОПОС	general expenses	омроново
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3					
4					
5	Compensation of current officers, directors,	0	0	0	0
6	trustees, and key employees	0.	0.	0.	0.
	section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	J.		, , , , , , , , , , , , , , , , , , ,	<u> </u>
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
	Management				
	Legal				
	: Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion	3,650.	3,102.	548.	
13	Office expenses	3,030.	5,102.	540.	
14	Information technology	138,900.	138,600.	300.	
15	Royalties	100/3001	100,000.	300.	
16	Occupancy				
17	Travel	322,985.	296,583.	26,402.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,	,	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,483.		2,483.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	PROFESSIONAL FEES	48,128.	6,205.	41,923.	
b		47,750.	47,750.		·
c	MATERIALS	30,076.	30,076.		
C		17,512.	17,512.		
	All other expenses	49,634.	47,633.	2,001.	
25	Total functional expenses. Add lines 1 through 24e	661,118.	587,461.	73,657.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X	Balance	e Sheet
--------	---------	---------

2 Savings and temporary cash investments.			Check if Schedule O contains a response or note to	any line in this Part X	<u></u>	<u></u>	<u></u>
2 Savings and temporary cash investments.					(A) Beginning of year		(B) End of year
Programment of the property of		1	Cash — non-interest-bearing		1,076,486.	1	670,160.
A Accounts receivable, net.		2	· · · ·		1,085,420.	2	1,801,102.
Solution		3	Pledges and grants receivable, net			3	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or framily member of any of these persons. 5 Controlled entity or framily member of any of these persons. 6 Loans and other receivables from other disqualified persons (as defined under section 4958(n)), and persons described in section 4958(c)(3)(8). 7 Notes and loans receivable, net. 8 Notes and loans receivable, net. 9 Prepaid expenses and deferred charges. 10a Land, buildings, and equipment: cost or other basis. 10a Land, buildings, and equipment: cost or other basis. 11complete Part IV of Schedule D. 11 Investments – publicity fraded securities. 11 Investments – publicity fraded securities. 12 Investments – publicity fraded securities. 13 Investments – publicity fraded securities. 14 Intangible assets. 15 Other assets. See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 33). 17 Accounts payable and accrued expenses. 18 Grants payable. 19 Deferred revenue. 19 Deferred revenue. 10 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member or any of these persons. 22 Secured mortgages and notes payable to unrelated third parties. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities. Add lines 17 through 25. 26 Total liabilities. Add lines 17 through 25. 27 Action that follow FASB ASC 958, check here March and complete lines 27 through 33. 28 Net assets without or restrictions. 29 Capital stock or trust principal, or current funds. 29 Organizations that do not follow FASB ASC 958, check here March and complete lines 29 through 33. 29 Capital stock or trust principal, or curren		4	Accounts receivable, net		4		
Comparison Com		5	trustee, kev employee, creator or founder, substantial	contributor, or 35%		5	
7 Notes and loans receivable, net		6	Loans and other receivables from other disqualified pe	ersons (as defined under			
8 Inventories for sale or use. 8 9 Prepaid expenses and deferred charges. 9 9 9 9 9 9 9 9 9		7				7	
9 Prepaid expenses and deferred charges. 9	ts	8		<u> </u>		8	
Total action Description	set	9				9	
11 Investments — publicly traded securities. 11 12 Investments — other securities. See Part IV, line 11. 12 13 Investments — other securities. See Part IV, line 11. 13 13 14 Intrangible assets. 14 15 15 16 16 16 16 16 17 16 17 16 17 17	As	10 a		10a			
11 Investments — publicly traded securities. 11 12 Investments — other securities. See Part IV, line 11. 12 13 Investments — other securities. See Part IV, line 11. 13 13 14 Intrangible assets. 14 15 15 16 16 16 16 16 17 16 17 16 17 17		b	Less: accumulated depreciation	10b		10 c	
13 Investments - program-related. See Part IV, line 11.						11	
14 Intangible assets 14 15 Other assets. See Part IV, line 11. 15 15 15 16 Total assets. Add lines 1 through 15 (must equal line 33). 2,161,906. 16 2,471,262. 2,471,262. 17 Accounts payable and accrued expenses 17 18 19 19 18 19 19 19 19		12	Investments – other securities. See Part IV, line 11			12	
15 Other assets. See Part IV, line 11.		13	Investments – program-related. See Part IV, line 11		13		
Total assets. Add lines 1 through 15 (must equal line 33). 2,161,906. 16 2,471,262.		14	Intangible assets			14	
17		15	Other assets. See Part IV, line 11			15	
18 Grants payable 18 18 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 25 25 26 Total liabilities. Add lines 17 through 25. 0. 26 0.		16	Total assets. Add lines 1 through 15 (must equal line 3	33)	2,161,906.	16	2,471,262.
19 Deferred revenue		17				17	
20 Tax-exempt bond liabilities				<u></u>			
21 Escrow or custodial account liability. Complete Part IV of Schedule D		-		_			
23 Secured mortgages and notes payable to unrelated third parties 24		-					
23 Secured mortgages and notes payable to unrelated third parties 24	ies			L		21	
23 Secured mortgages and notes payable to unrelated third parties 24	iabilit	22	key employee, creator or founder, substantial contribu-	tor, or 35%		22	
24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. Corganizations that follow FASB ASC 958, check here ▶ X and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions. Corganizations that do not follow FASB ASC 958, check here ▶ 39, 082. Net assets with donor restrictions. Corganizations that do not follow FASB ASC 958, check here ▶ 39, 082. Capital stock or trust principal, or current funds. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 24 25 26 27 28 29 29 29 29 29 29 29 20 21 21 22 23 24 25 25 25 25 27 28 29 29 29 29 29 29 29 29 20 20		23		<u> </u>		23	
26 Total liabilities. Add lines 17 through 25. 0. 26 0. Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33. X 27 Net assets without donor restrictions. 399,082. 27 425,457. 28 Net assets with donor restrictions. 1,762,824. 28 2,045,805. Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33. 29 29 30 Paid-in or capital stock or trust principal, or current funds. 30 30 31 Retained earnings, endowment, accumulated income, or other funds. 31 32 Total net assets or fund balances. 2,161,906. 32 2,471,262.		24	Unsecured notes and loans payable to unrelated third	parties		24	
Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33. Net assets without donor restrictions. Net assets with donor restrictions. Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, or equipment fund. Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances. Organizations that follow FASB ASC 958, check here And Complete lines 29 through 33. Zero April 28		25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24). Comp	s to related third parties, plete Part X of Schedule D.		25	
and complete lines 27, 28, 32, and 33. 7 Net assets without donor restrictions		26	Total liabilities. Add lines 17 through 25		0.	26	0.
The composition399,082. 27425,457.28Net assets with donor restrictions.1,762,824. 282,045,805.Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.29Capital stock or trust principal, or current funds.2930Paid-in or capital surplus, or land, building, or equipment fund.3031Retained earnings, endowment, accumulated income, or other funds.3132Total net assets or fund balances.2,161,906. 322,471,262.33Total liabilities and net assets/fund balances.2,161,906. 332,471,262.				► X			
Net assets with donor restrictions. Organizations that do not follow FASB ASC 958, check here □ and complete lines 29 through 33. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, or equipment fund. Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances. Total liabilities and net assets/fund balances. 1,762,824. 28 2,045,805. 1,762,824. 28 2,045,805. 30 30 30 30 30 30 30 30 30 30 30 30 30 3	ılar	27	Net assets without donor restrictions		399,082.	27	425,457.
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities and net assets/fund balances. 29 30 29 31 29 32 2,471,262. 33 Total liabilities and net assets/fund balances. 31 2,161,906. 32 2,471,262.	B	28	Net assets with donor restrictions			28	2,045,805.
29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities and net assets/fund balances. 29 29 20 21 21 22 23 24 27 27 27 27 28 29 20 20 20 20 21 21 21 22 23 24 27 27 27 27 27 27 27 27 27	Fund			ck here ►			
30 Paid-in or capital surplus, or land, building, or equipment fund. 30 31 Retained earnings, endowment, accumulated income, or other funds 31 32 Total net assets or fund balances 2,161,906 32 2,471,262 33 Total liabilities and net assets/fund balances 2,161,906 33 2,471,262 34 35 36 37 37 38 39 39 39 39 39 39 39	ō	29	Capital stock or trust principal, or current funds			29	
State Stat	ets	30	Paid-in or capital surplus, or land, building, or equipme	ent fund		30	
32 Total net assets or fund balances 2,161,906. 32 2,471,262. 33 Total liabilities and net assets/fund balances 2,161,906. 33 2,471,262.	883	31	Retained earnings, endowment, accumulated income,	or other funds		31	
2 , 161, 906. 33 2, 471, 262.	t.A	32	Total net assets or fund balances	2,161,906.	32	2,471,262.	
	ž	33	Total liabilities and net assets/fund balances			33	2,471,262.

_		00000	• •		<u> </u>
Pa	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		(70,	<u>474.</u>
2	Total expenses (must equal Part IX, column (A), line 25)		(61,	118.
3	Revenue less expenses. Subtract line 2 from line 1		3	309,	356.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,1	61,	906.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O).	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,4	171,	262.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				🗍
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Χ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis	ed on a			
ı	were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both: X Separate basis Both consolidated and separate basis	ate			
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	, 	20	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		За		Х
I	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 01/21/20		Forr	n 990	(2019)

Form **990** (2019)

SCHEDULE A (Form 990 or 990-EZ)

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 2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number SOFTWARE IN THE PUBLIC INTEREST DBA: SPI 11-3390208 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **g** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I 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							
begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	351,109.	428,087.	635,009.	1,444,778.	920,577.	3,779,560.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	351,109.	428,087.	635,009.	1,444,778.	920,577.	3,779,560.
6	Public support. Subtract line 5 from line 4						3,056,727.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	351,109.	428,087.	635,009.	1,444,778.	920,577.	3,779,560.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	343.	343.	303.	383.	2,757.	4,129.
9	Net income from unrelated business activities, whether or not the business is regularly carried on					=,::::	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.
	Total support. Add lines 7 through 10						3,783,689.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	65,699.
	First five years. If the Form 990 is organization, check this box and	stop here		rd, fourth, or fifth	tax year as a sectio	n 501(c)(3)	▶□
Sec	tion C. Computation of Pul Public support percentage for 20	blic Support P	ercentage	11 1 (0)		1 1	
	Public support percentage for 20 Public support percentage from 2						80.79 % 86.41 %
	33-1/3% support test—2019. If the and stop here. The organization	ne organization di	d not check the b	ox on line 13. an	d line 14 is 33-1/3	% or more, check	this box
b	33-1/3% support test—2018. If the and stop here. The organization	e organization did	I not check a box	on line 13 or 16a	a, and line 15 is 33	3-1/3% or more, c	heck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	ind-circumstances	s' test, check this	box and stop her	e. Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and Private foundation. If the organization	meets the 'facts-a d-circumstances' t	ind-circumstances est. The organiza	s' test, check this tion qualifies as	box and stop her a publicly support	e. Explain in Part ed organization.	VI how the ►

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

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

Sec	tion A. Public Support			,			
Calend	dar year (or fiscal year beginning in) >	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in) 🟲	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	l					
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1					
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 501(c)(3)	¹ ▶ <u></u>
	tion C. Computation of Pul					1 1	
	Public support percentage for 20	•	• • • • • • • • • • • • • • • • • • • •		•		%
	Public support percentage from 2						%
Sec	tion D. Computation of Inv						
17	Investment income percentage for	· ·	• • •	-			00
18	Investment income percentage f						0/0
	33-1/3% support tests—2019. If t is not more than 33-1/3%, check 33.1/3% support tests— 2018 164	this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organization.	
b	33-1/3% support tests—2018. If the line 18 is not more than 33-1/3%						
20	Private foundation. If the organiz		-				_

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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (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).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
С	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 .	9с		
0 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.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	t IV	Supporting Organizations (continued)			
11	∐ac t	he organization accepted a gift or contribution from any of the following persons?		Yes	No
		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	gover	ning body of a supported organization?	11a		
b	A fan	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sect	tion I	B. Type I Supporting Organizations			
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
	or ele Part \ If the direct	ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			
	applie	ed to such powers during the tax year.	1		
	that o	ne organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Sect	tion (C. Type II Supporting Organizations			
				Yes	No
	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion I	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	ne organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organ	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		nization'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			
_	organ	nization(s) or (ii) serving on the governing body of a supported organization? <i>If 'No,' explain in Part VI how</i> rganization maintained a close and continuous working relationship with the supported organization(s).	2		
	voice	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
	in this	s regard.	3		
Sect	tion I	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 instructions).			
а	Т	he organization satisfied the Activities Test. Complete line 2 below.			
b	Т	he organization is the parent of each of its supported organizations. Complete line 3 below.			
С	Т	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	nstruc	tions).	
2	Activi	ties Test. Answer (a) and (b) below.		Yes	No
	suppo organ	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was considered to those supported organizations, and how the organization determined that these activities constituted			
		antially all of its activities.	2a		
	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
		nization's involvement.	2b		
3	Parer	nt of Supported Organizations. Answer (a) and (b) below.			
а	Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
		e organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Sche	edule A (Form 990 or 990-EZ) 2019 SOFTWARE IN THE PUBLIC INTEREST		11-33	90208 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain in st complete Sections A	Part VI). See through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
á	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
	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		
Sec	tion 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		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). Schedule A (Form 990 or 990-EZ) 2019 10 Line 8 amount divided by line 9 amount

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sec	ection D — Distributions Current Year					
1	Amounts paid to supported organizations to accomplish exempt purposes					
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purposes of supported organizations					
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 responsive (provide details in Part VI). See instructions.					
9	Distributable amount for 2019 from Section C. line 6					

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			
DAA		Cabadula A (Fa	rm 990 or 990 E7) 2019

BAA

Schedule A (Form 990 or 990-EZ) 2019

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.) Part VI

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.

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 SOFTWARE IN THE PUBLIC INTEREST DBA: SPI 11-3390208 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 Total number at end of year..... Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?... No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?.... Nο Yes **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements. 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?..... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1.....

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

Part III Organizations Maintai	ining Colle	ctions of Ai	τ, Historic	ai ireasures, or	Otner Similar Ass	ets (continu	iea)
3 Using the organization's acquisition items (check all that apply):	, accession, a	nd other records	<u> </u>	ŭ	ke significant use of its	collection	
a Public exhibition		d	Loan or e	xchange program			
b Scholarly research		е	Other				
c Preservation for future generation	ations						
4 Provide a description of the organiz Part XIII.	ation's collecti	ons and explair	how they furt	ther the organization's	exempt purpose in		
5 During the year, did the organiza to be sold to raise funds rather the	nan to be mai	ntained as par	t of the orgar	nization's collection?		Yes	No
Part IV Escrow and Custodial line 9, or reported an a	Arrangen amount on	Form 990, I	Part X, line	organization ans e 21.	wered 'Yes' on Fo	rm 990, Pai	rt IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodia	n or other inte	rmediary for	contributions or other	r assets not included	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII a	nd complete th	ne following t	able:	<u>'</u>		
						Amount	
c Beginning balance					1c		
d Additions during the year					1 d		
e Distributions during the year					1e		
f Ending balance					1f		
2a Did the organization include an a	mount on Fo	m 990, Part X	, line 21, for	escrow or custodial a	account liability?	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII.	Check here if t	he explanatio	on has been provided	on Part XIII		
Part V Endowment Funds. C	omplete if	the organiza	ation answ	ered 'Yes' on For	m 990, Part IV, lir	ne 10.	
	(a) Current) Prior year	(c) Two years back	(d) Three years back	(e) Four year	rs back
1 a Beginning of year balance							
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage		-		g, column (a)) held a	s:		
a Board designated or quasi-endowment			5				
b Permanent endowment ►	%						
c Term endowment ►	%						
The percentages on lines 2a, 2b, ar							
3a Are there endowment funds not in the organization by:						Yes	No
(i) Unrelated organizations						3a(i)	
(ii) Related organizations						3a(ii)	<u> </u>
b If 'Yes' on line 3a(ii), are the rela	•		•			3b	
4 Describe in Part XIII the intended			endowment f	unds.			
Part VI Land, Buildings, and I Complete if the organi			on Form 9	90, Part IV, line	11a. See Form 99	0, Part X, li	ne 10.
Description of property		(a) Cost or oth (investme	er basis (ent)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	alue
1 a Land		, -		` '			
b Buildings							
c Leasehold improvements							
d Equipment							
e Other							
Total. Add lines 1a through 1e. (Colum		gual Form 990.	Part X. colu	mn (B), line 10c.)	>		0.
BAA	(-)	, ,	,	(), () () () ()		ule D (Form 99	

Schedule D (Form 990) 2019

Complete if the organization answere (a) Description of security or category (including name of security)	(b) Book value		ation: Cost or end-of-year market value
) Financial derivatives	` '	(0)	
2) Closely held equity interests			
3) Other			
	-		
A) B) C) D) E)			
<u>"</u>	-		
<u>" </u>			
<u>′</u>	_		
-)	-		
<u>3)</u>	_		
	_		
l)			
otal. (Column (b) must equal Form 990, Part X, column (B) line 12.)		27./2	
Part VIII Investments – Program Related. Complete if the organization answere	d 'Vas' on Form 991	N/A Deart IV line 11c	See Form 990 Part Y line 1
(a) Description of investment	(b) Book value	(c) Method of valuation	on: Cost or end-of-year market value
	(b) Dook value	(c) motilod of valuation	on Jose of Gha of year market value
(1)	+		
(2)	+		
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
10)			
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.)			
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.	N/A	Part IV line 11d	Soo Form 990 Part V Jino 15
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere	N/A d 'Yes' on Form 990), Part IV, line 11d.	
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D	N/A), Part IV, line 11d.	See Form 990, Part X, line 15
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D	N/A d 'Yes' on Form 990	D, Part IV, line 11d.	
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answere (a) D (1) (2)	N/A d 'Yes' on Form 990	D, Part IV, line 11d.	
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.)	N/A d 'Yes' on Form 990), Part IV, line 11d.	
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.)	N/A d 'Yes' on Form 990	D, Part IV, line 11d.	
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.)	N/A d 'Yes' on Form 990	D, Part IV, line 11d.	
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.)	N/A d 'Yes' on Form 990), Part IV, line 11d.	
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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	970,474.
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		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	
3 Subtract line 2e from line 1	3	970,474.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	970,474.
Dord VII Decompiliation of European way Audited Einemain Ctatements With European	Dal	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per Return.	
	· 	661,118.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	· 	661,118.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	· 	661,118.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	· 	661,118.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	· 	661,118.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. 2 a 2 b	· 	661,118.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses.	1	661,118.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.).	1	661,118.
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Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	1 2e 3 4c	

Part XIII | Supplemental Information.

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

BAA Schedule D (Form 990) 2019

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

SOFTWARE IN THE PUBLIC INTEREST DBA: SPI

11-3390208

Employer identification number

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

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

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

3 Activities per Region. (The	following Part I,	ine 3 table can b	e duplicated if additional space	e is needed.)	T
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region PT V
CENTRAL AMERICA AND			loodied in the region,	CONFERENCES AND	PI V
(1) THE CARRIB			DDOCDAM CEDUTCEC		01.6
EAST ASIA AND THE			PROGRAM SERVICES	TRAVEL CONFERENCES AND	916.
(2) PACIFIC			PROGRAM SERVICES	TRAVEL	E2 220
(2) PACIFIC			PROGRAM SERVICES	CONFERENCES AND	52,229.
(3) EUROPE:			PROGRAM SERVICES	TRAVEL	72 016
(3) EUROPE:			PROGRAM SERVICES	CONFERENCES AND	73,916.
(4) NORTH AMERICA			PROGRAM SERVICES	TRAVEL	14 054
RUSSIA AND NEIGHORING			PROGRAM SERVICES	CONFERENCES AND	14,954.
			DDOCDAM CEDUTCEC		1 215
(5) STATES			PROGRAM SERVICES	TRAVEL	1,215.
(6) COLUMN AMERICA			DDOCDAM CEDUTCEC	CONFERENCES AND	04 001
(6) SOUTH AMERICA			PROGRAM SERVICES	TRAVEL	94,001.
(7) COURT ACTA			DDOCDAM CEDUTCEC	CONFERENCES AND	20.665
(7) SOUTH ASIA			PROGRAM SERVICES	TRAVEL	29,665.
(9) GUD GAUADAN AUDIGAN			DDOGDAM GEDUTGEG	CONFERENCES AND	F F00
(8) SUB-SAHARAN AFRICAN			PROGRAM SERVICES	TRAVEL	5,598.
(0) =\text{UPOPE}			program grantana	IT	00.500
(9) EUROPE			PROGRAM SERVICES	INFRASTRUCTURE	98,602.
MIDDLE EAST AND NORTH			program grantana	CONFERENCES AND	4 500
(10) AMERICA			PROGRAM SERVICES	TRAVEL	4,582.
EAST ASIA AND THE			program grantana	IT	1 005
(11) PACIFIC			PROGRAM SERVICES	INFRASTRUCTURE	1,027.
(12) NORTH AMERICA			PROGRAM SERVICES	IT INFRASTRUCTURE	4,322.
(13)					
(14)					
(15)					
(16)					
(17)					
3 a Subtotal					381,027.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			381,027.

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

Schedule F (Form 990) 2019

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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	>
3	Enter total number of other organizations or entities	<u> </u>

BAA

Schedule F (Form 990) 2019

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(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)							
(2)							
(3)							
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(18)							
BAA	1	l		l	l	Schedule F	(Form 990) 2019

Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471).	Yes	X 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)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

BAA TEEA3505L 06/28/19 Schedule F (Form 990) 2019

Part V Supplemental Information

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

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

REVIEW PROJECT PROGRESS AND USE OF EXPENSES.

PART I, LINE 3F - METHOD OF ACCOUNTING

CASH BASIS

BAA TEEA3504L 06/28/19 Schedule F (Form 990) 2019

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.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SOFTWARE IN THE PUBLIC INTEREST DBA: SPI

11-3390208

Employer identification number

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

SOFTWARE IN THE PUBLIC INTEREST ("SPI") IS A NOT FOR PROFIT ORGANIZATION WHICH WAS FOUNDED TO HELP ORGANIZATIONS DEVELOP AND DISTRIBUTE OPEN HARDWARE AND SOFTWARE.

THE MISSION OF THE ORGANIZATION IS TO HELP GENUINE, SUBSTANTIAL AND SIGNIFICANT FREE AND OPEN SOURCE SOFTWARE PROJECTS BY HANDLING THEIR NON-TECHNICL ADMINISTRATIVE TASKS SO THEY AREN'T ROUIRED TO OPERATE THEIR OWN LEGAL ENTITY.

FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER

MEMBERSHIP IN SOFTWARE IN THE PUBLIC INTEREST, INC IS OPEN TO ANY PERSON WHO HAS
MADE SIGNIFICANT CONTRIBUTIONS TO THE FREE SOFTWARE COMMUNITY, AS DETERMINED BY THE
MEMBERSHIP COMMITTEE.

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

THE MEMBERS OF SOFTWARE IN THE PUBLIC INTEREST, INC ELECT ITS BOARD OF DIRECTORS.

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

THE BOARD OF DIRECTORS REVIEWS THE 990

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

DIRECTORS HAVE TO SUBMIT CONFLICT OF INTEREST DECLARATIONS ANNUALY.

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

THEY ARE PUBLISHED ON OUR WEB SITE